

THESIS

FORT COLLINS VETERINARY PRACTICES AND WEBSITES:  
HOW TELEMEDICINE IS USED AS A MARKETING TOOL

Submitted by

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## ABSTRACT

### FORT COLLINS VETERINARY PRACTICES AND WEBSITES:

### HOW TELEMEDICINE IS USED AS A MARKETING TOOL

This thesis looked into how websites were viewed from the managerial side of the veterinary practice by conducting in-depth interviews with Online Content Managers (OCMs) from eight veterinary clinics in Fort Collins, CO. The study found that not only did the OCMs find it important to use everything available to them to gain the trust of new potential clients, they also wanted to start and keep an emotional connection with all of their clients via the website. The study also found that the staff and veterinarian biography section of the websites were very important, and that an emphasis was placed on having pictures to go with every staff member, especially if the pictures also had companion animals with the staff members.

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## **I. Introduction**

This thesis is about helping the veterinary medical profession with its online presence. However, just because this particular thesis deals with the veterinary practices in Fort Collins, Colorado, it does not mean that what goes on in this thesis is only applicable to veterinary clinics in a small city. The information held within can be applicable to any independent business that is in a competitive market in a small to medium area, such as a large town or small city. Chan-Olmsted and Park (2000) say the following:

A 1997 content analysis of the home pages of the Fortune 500 companies revealed that companies who have higher market performances measured by revenues are more likely to use Web sites to reach their customers. According to the same research, the goals of the home pages were mainly to have a Web presence, to promote the companies' image, to enhance public relations, to attract users to browse products and services, and to collect user responses and other related data. Berthon, Pitt, and Watson suggested that Web sites can generate awareness, explain/demonstrate the product, provide information, help in the evaluation and selection process, provide feedback, and help project a favorable corporate image. Practitioners and academics have suggested the value of having a Web site and advertising on the Internet. Both a field trial of home Internet usage conducted by Carnegie Mellon University and a NAB survey reported that getting information and e-mail communication are the two most popular reasons for using the Internet by U.S. adults. In the same NAB survey, 50 percent of the Web users indicated that they would like to receive more local information. (Chan-Olmsted & Park, Summer 2000, p.322.)

From a communications perspective, the Internet and e-commerce are still relatively new innovations. To utilize these innovations to both educate and market to the Internet-capable public is a fascinating look at how veterinary practice views how they should be seen by the public, and what they want that public image to be.

The main goal of any veterinary practice is to help animals. The best way for veterinary practices to do that is to help animal owners, and that can happen through information transfer; in other words, by educating the public. If a member of the public feels that s/he has learned something useful at a particular veterinary practice's website, s/he is more likely to go to that particular veterinary practice to have their pet checked out. To put it simply, veterinary practice websites may often use educational tools as covert marketing tools.

How would I know this? I myself was an office manager at a small veterinary clinic for two years. Having this innate knowledge of the veterinary industry, it is my goal to help those still working within the industry as health care providers to reach more potential clients and to help educate those clients they already have attained.

“The Internet has great potential to improve Americans’ health by enhancing communications and improving access to information for care providers, patients, [...] and other health professionals” (National Research Council, 2000). While this quote was made in the context of human medicine, it can just as easily be applied to veterinary medicine. The Internet has extraordinary potential when it comes to communications and information gathering, both of which this thesis will be focusing upon. This topic is an uncommon branch of telemedicine: the creation and use of a website made and maintained by a veterinary practice.

According to the American Telemedicine Association (ATA) website, telemedicine is defined as:

Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve patients' health status. [...] Telemedicine is not a separate medical specialty. Products and services related to telemedicine are often part of a larger investment by health care institutions in either information technology or the delivery of clinical care. Even in the reimbursement fee structure, there is usually no distinction made between services provided on site and those provided through telemedicine and often no separate coding required for billing of remote services. Telemedicine encompasses different types of programs and services provided for the patient. Each component involves different providers and consumers (ATA, 2009).

The telemedicine services mentioned include specialist referral services, patient consultations, remote patient monitoring, medical education, and consumer medical and health information (ATA, 2009). Telemedicine as defined can also be called telehealth or cybermedicine.

Technology and telemedicine are fascinating subjects; how devices so small can do so much, and how medical businesses try to keep up with each other using the technology at hand. Living in Fort Collins, a very animal-friendly place, it is no surprise there are over 25 veterinary clinics and animal hospitals that have Fort Collins addresses (Bing search, 2010). Granted, Fort Collins is a small city with an estimated population of 140,600 people ([www.fcgov.com](http://www.fcgov.com), 2010),



but to have so many veterinary practices in one area must mean there is some serious competition going on between practices. So how do all the other veterinary practices in town hope to keep up with each other?

The easiest answer is this: by spreading information and being as accessible as possible to the people of Fort Collins. This means advertising in magazines, newspapers and the Internet. This also means creating and maintaining a website that potential clients can peruse to answer their questions prior to making an appointment. Of the 25 or so independent veterinary practices in Fort Collins (which means they are not satellite branches of Colorado State University's [CSU] Veterinary school), 19 have viable websites (viable meaning they have more than just a homepage). The goal is to see how these practices use their websites to encourage or persuade potential clients to come to them rather than to go to another practice in the area. A population list of the practices is attached to the back of this thesis as Appendix A.

The population size did have to be culled down to the 19 websites chosen. This is because of several factors. Some of the websites were linked to national chains of veterinary clinics, such as Banfield Animal Hospital, which has an affiliation with PetSmart. There were practices that popped up on the Internet searches done to find the veterinary practice websites that seemed a little unstable, because the brick and mortar addresses would be the same, but they would call themselves slightly different names and have different telephone numbers.

The list was culled by two more names because one is actually a cat rescue tied to a spay and neuter clinic; literally a place that only does spaying/neutering and giving basic shots. Since it is tied to a rescue and seems to not offer a full range of services, it had to be taken out of the population. The other was CSU's Veterinary School website, and the reason it had to be culled was because of both the size of the institution and the size of the website. It was a massive outlier, especially since it is not only tied to the Veterinary School, but the Teaching Hospital, Emergency Clinic and Small Animal Clinic that they have on site.

## **II. Thesis Statement, Research Questions and Hypotheses**

The purpose of this thesis was to look at Fort Collins veterinary practice websites from the angle of the online content manager (OCM) and how they framed the websites upon creation and subsequent updates. In having done so, it was with the hope that the information gathered could be useful in creating websites to help both the veterinary practices and pet owners share information in the pursuit of both education and business. Below are the three research questions and corresponding hypotheses which were at the core of the study.

**Q1:** How do Online Content Managers use information to their advantage?

**H1:** By building trust through free information, OCMs use information to keep clients coming back and also make potential clients into actual clients.

**Q2:** What does the “About Us” or “Staff” section/page say to the potential client without words?

**H2:** Pictures are definitely important in the social networking age, and so the difference between a staff with no pictures versus a staff with pictures is sizable. Veterinarians in particular are the “face” of their practice, so not having a picture to go along with a biography speaks volumes. Additionally, a picture of a veterinarian with a pet also speaks more to a potential client than if the veterinarian is simply posed and devoid of an animal companion.

**Q3:** How do Online Content Managers use emotional cues to their advantage?

**H3:** The OCMs use emotional cues by creating a sense of home/family/community brings in more clients. Emotional cues help persuade potential clients into trying a veterinary practice, with the hope that the tentative emotional connection found on the website is present in the practice itself.

### III. Review of the Literature

The method used in the project will be an in-depth interview looking at the framing of the websites made by Fort Collins veterinary practices and a short interview with each overseer for the eight (8) websites, known as the Online Content Manager (OCM). The websites are there to persuade possible clients into becoming actual clients, and also to an extent help educate the public. Framing and framing analysis will help with showing social cues, downshifts and upshifts from one state of framing to another, and will also be a helpful comparison tool when showing how each practice differs in their framing to their audience. The description of the websites of the practices that participated are located in Appendix B.

In conjunction with framing, the integrative model, put forth by Marco Yzer (2012), lends a surprisingly succinct look as to how OCMs may subconsciously think about how to build their websites in order to bring in possible clients or keep the attention of current clients. In using the Integrative Model to inform health message design, the following steps need to be taken/addressed:

1. Define the Behavior
2. Identify Salient Beliefs
3. Determine which of the Salient Beliefs a Message should have
  - a. Rationale and Criteria
  - b. Analytical Strategy
  - c. Uniqueness of Behaviors and Populations
  - d. Implication for Message Design (Yzer, 2012, p. 26-31)

The more thorough explanation of the integrative model deals with looking at a population and identifying variables that can determine certain behaviors, and proposing health messages that can address the variables in such a way as to improve the recommended behavior in the population. This means that the message one creates using this model can, given enough exposure to the population, improve recommended behaviors (Yzer, 2012). Furthermore, the

integrative model can help build a message that follows already held reasonable beliefs that the population adheres to, and get the population to listen to the message with the intent that the population will then accept the new or improved behavior. By predicting how the variables and salient beliefs affect the population, messages can be created to either improve the behavior already prevalent in the population, or to create messages that can help the population achieve the intended behavior (Yzer, 2012). But the building of messages for a population to adhere to is not all that the integrative model can be used for; it is also used to spot where the population needs help. Yzer writes:

The integrative model predicts that people act on their intentions when they have the necessary skills and when environmental factors do not impede behavioral performance. Thus, for example, when people do not perform a recommended behavior but did intend to, the objectives on an intervention would not be to improve intention. The problem here is not one of motivation, but of competence (i.e. skills) and means (i.e. environmental constraints or facilitators). (Yzer, 2012, p.23)

The integrative model, as a form of framing, is extremely flexible and can be used for not only health communication but any type of communication where an intervention or basic message that can help the population recognize a behavior that is prevalent in the community and either improve the behavior or change the perception of the behavior if it is bad for the population. This means dealing with the salient beliefs of the population. Interestingly enough, Yzer (2012) does not have a succinct explication of the term, but the editor of *Health Communication Message Design: Theory and Practice*, Hyunyi Cho (2012) in which Yzer's work appears, does a fitting description in the glossary of the book:

Salient beliefs: These beliefs can be interpreted as modal beliefs, or those beliefs in a system of beliefs that a population most often associates with performing a particular behavior. Whereas a great many beliefs can be salient, only some beliefs will be importantly considered when people make a decision about performing or not performing a behavior. According to the integrative model of behavioral prediction this subset of salient beliefs is to be addressed in health messages. (Cho, 2012, p.251)

Salient beliefs are important to message design because these beliefs can be considered part of the perceived norms of the population and will factor into the intent behind the messages. In the integrative model, the intention of the message or intervention is fueled by three types of perceptions: self-efficacy, attitude and perceived norm (Yzer, 2012). Each of these terms are defined thusly:

Attitude is a person's evaluation of how favorable or unfavorable his or her performing a particular behavior would be. Perceived norm, which is the social pressure one expects regarding performing the behavior, has two aspects, namely an injunctive and a descriptive norm. An injunctive norm is the extent to which important social networks are expected to be supportive of the person's performing the behavior, and a descriptive norm is the extent to which members of those networks perform the behavior themselves. Perceived norm is the totality of these two normative perceptions. Self-efficacy reflects the extent to which a person feels capable of effectively performing the behavior. (Yzer, 2012, p.24)

These definitions are important to the overall framing theory, especially in the case of using the integrative model of framing to create messages for veterinary practice clients perusing a website. The message must be attention grabbing for the audience, as the health messages must get through to the client before the veterinary practice can see the patient, the client's companion animal. Put another way:

The theory's approach to message design is based on the proposition that effective messages cater to an audience's needs. The theory conceptualizes these needs as the variables that determine the particular behavior in the population that an intervention seeks to approach. Once those determinants have been identified for the particular behavior in the population under consideration, an intervention can be designed to address those variables. (Yzer, 2012, p.27)

Frame analysis is Erving Goffman's (1974) ideas concerning how people use expectations to make sense of everyday life, while a frame is a set of specific expectations used to make sense of a social situation at a given point in time (Baran & Davis, 2009). Put another way, framing can be used to get people to think a certain way and expect a certain result.

For example, a veterinary practice in Fort Collins would want to frame its website to be helpful and informative. This is because the market in Fort Collins is competitive; even though there are 16 practices that have websites, there are almost the same number that do not (Bing search, 2010). There has to be a mission statement or some other form of feel-good, persuasive statement that shows that the veterinarians working there are professional, know their craft, and care about their community. "Emotional appeals are commonly used as persuasive devices in public health" (Turner, 2012, p.60). This statement does not just mean public health relating to humans; in the veterinary industry, emotional appeals of all types can be found in literature, and websites are not an exception. The public at large wants to feel like the veterinarian they pick for their pet will actually care about their pet when it needs help, and they also want somebody with experience. Therefore, it is with the public in mind that the writer or online content manager in charge of the veterinary practice website will include a statement that will meet with the public's expectations.

The online content manager (OCM) for the veterinary practice website is also prone to use not only emotional appeals, but to go for a grass-roots appeal by using narratives and introducing both staff and practice animals to the audience viewing the website. Staff biographies or sections of the website dedicated to showcasing some of the animals who have been serviced at the veterinary practice are common. There may also be client testimonials about the services rendered by the veterinary practice for potential clients to read on the website. The positives of this type of communication are explained below:

Proponents of narrative-based interventions suggest that the strength of this format lies in the appeal of messages that are drawn directly from the target audiences' world view. [...] This aspect of using narratives in health promotion holds an advantage over the usual methods of audience analysis, using an exhaustive breakdown of formative data to distill a description of target audience characteristics, and then finding ways to address or represent these characteristics in message construction. Instead, developing

messages from the language and story of a target group increases the likelihood that the message will, indeed, be reflective of the ways and norms of a group. (Larkey & Hill, 2012, p.97)

Narratives will give the audience a sense of where the practice is coming from ideologically, as well as keep the language simple enough for everybody to read and understand the messages put forth by the practice.

Along with veterinary practice websites not wanting to confuse their potential customers, there are concepts that need to be defined for the thesis. The following will be an explication of those concepts and how they will be used here, as well as how they have been used by others in the past (where applicable).

The first main concepts are framing and framing analysis. These are the main terms used with the theory and as they will be used at length, they must be explained thoroughly. Framing analysis is “[Erving] Goffman’s idea about how people use expectations to make sense of everyday life” or, put a little more eloquently, “to provide a systematic account of how we use expectations to make sense of everyday life situations and the people in them” (Baran & Davis, 2009, p.316). A frame is inside this theory would be “a specific set of expectations used to make sense of a social situation at a given point in time” (Baran & Davis, 2009, p.317). Put another way:

According to Goffman, individual frames are like notes on a musical scale—they spread along a continuum from those structuring our most serious and socially significant actions to those structuring playful, trivial actions. Like the notes on a musical scale, each is different, even though there is underlying structural continuity (Baran & Davis, 2009, p.317).

As it is the main focus of the thesis, the main concept terminology of a “veterinary practice website” will have to be defined. For the purposes of this thesis, veterinary practice website has to be broken down into its main components. A website is an online representation of a person

or organization. A veterinary practice is a brick-and-mortar full-service facility in which medical assistance is given to animals who have owners via the veterinarians who work there and their staff. Therefore, a veterinary practice website is an online representation of a medical facility in which people who own animals can bring their animals for medical assistance from the veterinarians and staff that work there.

With so many veterinary practice websites to choose from in Fort Collins, looking at studies that have done consumer reactions to choice and decision-making becomes imperative; after all, part of a veterinary practice website's marketing/advertising job is to persuade potential clients into becoming actual clients. Fortunately, there is a wealth of studies done on consumer choice and decision-making processes with frames and framing analysis.

Danielle J. O'Keefe (2012) talks about gain-framed and loss-framed appeals, as well as loss aversion. Loss aversion is simply stated as "people's general preference for avoiding losses as opposed to obtaining gains" (O'Keefe, 2012, p. 5), and it would be easy to see this sort of tactic used in the veterinary industry as people are afraid to lose their pets to ill-health that could be prevented. Gain- and loss- framed appeals are defined as follows: "A gain-framed appeal emphasizes the advantages of the advocated action or viewpoint; a loss-framed appeal emphasizes the disadvantages of not adopting the advocated view" (O'Keefe, 2012, p.4). These too can be easily used in veterinary health messages, as there is always something to be gained or lost when it comes to a pet's health.

Because pet owners see their pets in one of three ways, as friends, as family and as an extension of self, they want health care for their pets that is the best (Hirschman, 1994). However, cost and services do come into the consideration as to which veterinary practice to go to, and that is where choice and decision-making processes come into play. Fort Collins presents



an interesting study because of how big it is and how many veterinary practices there are in the area. Including the veterinary practices that do not have websites plus the veterinary college, there are over 25 practices that possible clients can go to with their pets.

Because pet owners value the health and well-being of their animal companions, they want to be able to access information on different veterinary practices in order to see whom is going to be the best fit for what they need in a veterinarian. They also want easily attainable health information for their pet. According to Sarah Anne Murphy (2006) in her study, more than half the information that she evaluated pertaining to books and large websites dedicated to making health information available for veterinary consumers was written above an 11th grade reading level, which is not accessible to most people. This brings up a very true issue with being able to convey information, which is described best as follows:

In an information age, where telehealth is now regularly used to give information to patients, there are two important components to assemble and link into processes for delivering care. One component is the technology necessary to deliver information and the second is the information itself. Information is not a value-free commodity, and finding clinical information that patients and physicians both understand and agree on is an essential part of making it a tool for the joint negotiation of clinical decisions. (Darkin & Cary, 2000, p. 40)

Even six years after Darkin & Cary (2000) wrote this, Murphy (2006) was still coming across a translation problem of sorts; making medical information available to the masses. This is why looking at the text of the veterinary practice websites will be important; the masses of people who go to veterinary practice websites for information, no matter how trivial, must be able to understand it, even if they have a minimal knowledge of medical jargon. How these veterinary practice websites frame their information and make it digestible for the Internet masses will be important, because the last thing a competitive business owner wants is to confuse or alienate a potential customer.

This brings us to health literacy and targeting messages. While health literacy, “the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions” (Cho, 2012, p.250), can be a challenging thing to attain for some people, there are strides being made to make it easier for pet owners to understand what is going on with their pet, and it has to do with Rachel E. Davis and Ken Resnicow (2012) and their work on message design. A lot of veterinary practices will have a ‘new client’ data form for clients to fill out, and this will give them valuable data on how to market to them in the future, as well as how to set up their websites for their clients’ use. How is this using targeted message design? Targeting is “defined as the use of group-level data to customize health messages for a specific audience group, or segment, that is relatively homogeneous on determinants of a specific health outcome” (Davis & Resnicow, 2012, p. 117-118). This definition obviously includes pet owners as a group, though the specific health outcome is not for themselves, but for their pets.

Finally, we come to the last bit of analysis used for the thesis. Ethnographic content analysis will be used, because it is a method that fits the needs of the thesis and overall study. All the websites are not just the same because they are all made for veterinary practices; the ethnographic feature is well established because all the veterinary practice websites that will be looked and analyzed are from the same town. But that is just one part of why an ethnographic content analysis would fit best. An ethnographic content analysis is:

Ethnographic content analysis is also oriented to documenting and understanding the communication of meaning, as well as verifying theoretical relationships. A major difference, however, is the reflexive and highly interactive nature of the investigator, concepts, data collection, and analysis. Unlike QCA, in which the protocol is the instrument, the investigator is continually central in ECA, although protocols may be used in later phases of research. As with all ethnographic research, the meaning of a message is assumed to be reflected in various modes of information exchange, format,

rhythm, and style - for example, the aural and visual as well as the contextual nuances of the report itself. (Altheide, 1996, p.16)

In addition, here are instances where many of the features of a website may be a form of mass communication to be used by a medical practice to help inform the public of medical procedures/treatments that they should know about. For example:

Throughout this text, we advance a claim about the increasing relevance of the Internet as an instrument of mass communication. To introduce this, we can consider the recent development of health care centres and practices where physicians have uploaded video clips to YouTube demonstrating specific treatments, such as how to use an inhaler for treating asthma (Miah & Rich, 2008. p.9).

This gives a perfect example of how embedded videos from YouTube in a veterinary practice website would be very useful to a client or potential client. A few of the websites mentioned in Appendices A and B have embedded videos to help the consumer of the information with some sort of health related issue.

It may seem like a lot to use for one analysis of data in the context of veterinary practice websites, but using the integrative model with framing and framing analysis, plus looking at the targeting of messages and any gain- or loss- framed messages used in the integrative model of framing, and the ethnographic value of the city all of this data comes from is important to the whole of the study. If we want to know the most we can about how websites are made and how they can be made better for both the audience and the veterinary practices, we cannot simply look at the data through a single type of analysis.

#### IV. Method

The veterinary practices chosen for interviews out of the 19 available were chosen based on the availability of the interview subjects, who agreed to participate after hearing the recruitment script (Appendix C). To help with anonymity, each practice was given a letter of the alphabet at random to be identified by during the interview process. The randomization practice was done by taking a twenty-sided die and an eight-sided die, casting them, and adding the two numbers together, then giving the corresponding letter of the alphabet to the practice (Note:  $1+1 = 2 = A$ ,  $1+2 = 3 = B$ ,  $1+3$  or  $2+2 = 4 = C$ , and so forth). This happened for each of the practices chosen for the sample population. Once that was done, the interviews began, then the analysis took place.

The thesis looked at a sample of veterinary practice websites from the Fort Collins area. The original population for this sample were the 19 veterinary practice websites from the Fort Collins area that were non-Colorado-State-University affiliated, had more than just a homepage and were non-duplicating when searched for online (in other words, when searching for a veterinary practice, there weren't two or more different links to the same practice's homepage in the search results, each with a subtly different name). The sample was veterinary practices that had online content managers who agreed to be interviewed.

The interviews were focused on the online content managers from the practices. There were both demographic and open-ended questions in the interview. The questions that were asked can be seen in Appendix E, and the consent form can be seen in Appendix D. The interviews were recorded with an Olympus VN-8100PC Digital Voice Recorder, so that nothing was missed and so a transcript could be generated from the interview, to ease the process of analysis. The interviewees, also known as the online content managers (OCMs) would only be

known in the thesis by their job titles and by the coded veterinary practice in which they work (e.g. Office Manager for Practice A), or by the title OCM and the coded veterinary practice in which they work (e.g. Practice A's OCM, the OCM for Practice A).

This was a largely qualitative study, but there was a small section at the beginning of each interview which dealt with demographics and was quantitative. The set of 20 interview questions presented after the demographics section was mostly qualitative, considering the scope of the answers needed for most of the questions, though some of the questions were surprisingly easy to graph if the answers were boiled down.

The units of analysis varied depending on whether the information was quantitative or qualitative. The demographics information was easily quantifiable, because there was only a certain range of answers that were expected for each question, and so these answers could be easily graphed. The qualitative interview questions, however, required deeper analysis than the graphs could provide, and so were definitely qualitative in nature. The analysis included a look at any and all trends found within the interviews, up to and including similar reasoning patterns.

The data was provided by veterinary practices in the City of Fort Collins. This means that veterinary practices have to have brick-and-mortar addresses within the Fort Collins area before their websites would even be considered for research purposes. The websites would have had to be more than one page to be considered viable, and the only people to be interviewed would be the online content managers that work in the practices. The reading and signing of the consent form took between five to ten minutes, and the interviews took about 35 minutes, for a maximum time of 45 minutes to sit down and talk with each participant. Afterward the audio recordings of the interviews were reviewed and transcribed for analysis of the answers to the

questions. Then these answers were used to give a complete picture into how/why the websites were the way they were.

## **V. Analysis and Discussion**

*Please Note: For the Full Transcriptions of the interviews, See Appendix F (interviews are in chronological order: V, B, J, O, H, R, Y & M). For Consolidated Answers of the Interviews, See Appendix G. For Tables and Charts of this information, See Appendix H.*

### **Demographics Information**

Of the eight participants, five were female and three were male. The ages of participants ranged from 21 to 47, with men being younger on average than women.

The demographics information provided a picture that even though the women may be more consistently educated (four out of the five women have Bachelor's Degrees, and only women had Bachelor's Degrees out of the eight participants), and they on average held their position in the practice longer than men, the men are the ones who had spent more of their life in the veterinary industry compared to the women.

Four participants had the title of Practice Manager; two had Bachelor's Degrees, one had a Veterinary Technician Degree and one had a High School Diploma. Four participants had Bachelor's Degrees; two were Practice Managers, one was a Hospital Coordinator and the last was Clinic Director.

Of the three men, one had a High School Diploma, one an Associate's Degree and one a Master's Degree. Of the five women, four had Bachelor's Degrees and one had a Veterinary Technician Degree. An interesting thing of note was that there were a few instances of the education of the participant not matching up with what one would assume their job title would be with that level of education.

## **Interview Questions**

As for the rest of the interview questions, it was found that charting them showed interesting patterns. For each table full of responses per question, a chart was made that grouped the answers by the practice and by the frequency of any response. All of these tables can be seen in Appendix H, but do not necessarily need to be viewed with the analysis.

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### **Q One**

*Why does the practice have a website?*

While half of the practices only replied with one firm answer, the other half gave anywhere from two to four answers to the question. The two most frequent responses were “advertising” and “online presence” with four responses each, followed by “getting new clients” and “informational tool” with three responses each.

### **Q Two**

*When was it realized that the practice needed a website?*

“From the beginning” was the most frequent response, with three practices responding with that answer. Second place with two responses are practices who came to the realization “before the current OCM started working there”. Only one practice gave a firm time of “six years ago”, while all other responses were vague as to when the practice realized it needed a website.

### **Q Three**

*How much time elapsed between the realization of needing a website and the actualization of having the website operational online?*



The range of time given amongst the practices was not surprising; as the range goes from “still in the process” to “two years”. What was surprising was that the most frequent response was it took two years to get a website up for three of the practices.

**Q Four**

*Was the website created by a Staff Member, or was it contracted out to a website making company?*

Here is another question that yielded surprising results. While four practices said that a “staff member” created the website (two of which being the OCM), three practices responded that a “client of the practice” either helped make the website with a staff member or made the website outright at the request of the practice. Only two veterinary clinics went to a website design company.

**Q Five A, B & Unforeseen Answers**

*A: If the website was created by a staff member, what programming did you use?*

*B: If the website was contracted out, how was the company chosen?*

For Question Five A, two of the four practices didn’t know what programming the staff member used to make the website. One OCM used Intuit, and the other used a combination of CoffeeCup and Dreamweaver.

To answer Question Five B, one OCM looked at three different companies before going with the one that had the best ability to adapt to her vision, while the other looked at five different companies and went with the one that happened to have both the best vision and the best price.

Due to the unforeseen answers of Question Four, there is an extra page of charts to cover how the client who made/helped make the website was chosen. In all three instances, the OCM

does not know what programming the client used to make the website, and each OCM picked their clients for different reasons; skill, availability or offering the service.

**Q Six**

*Were there any exemplary or model veterinary practice website that influenced the look of the practice's website?*

This question yielded a surprising and varied amount of answers. Two practices, both of whom had no direct hand in how the website was created, did not know if there were outside influences to the current look of their website. One OCM replied no, because at the time the website went up it was basically the brochure for the practice made digital and navigable. After that, there were two OCMs who responded that they only looked at non-veterinary-industry websites for inspiration. The response was the most frequent, as four out of the eight responded this way, was "to see what not to do". After that, there were a variety of veterinary practices named.

**Q Seven**

*What is the most important point of having a website for the practice?*

Six OCMs responded that putting out "information about the practice" was the most important point, with "getting new clients" being the second most given response with three OCMs responding in this manner.

**Q Eight**

*Who decides what content goes on the website?*

While the OCM did have a say in what content goes on the website in most instances, there were two veterinary practices that specifically did not. One practice only posted what the Veterinarian/Owner wanted, while the other had a management team that decided what new

things to post on the website. It should be noted that the practice with the management team, Practice J, was a democratic unit and would put things to a vote, so even though the Clinic Director was the OCM for her practice and was part of the management team, she only had one vote and no veto power. Three other practices had the Vet/Owner and OCM as the two in charge of content, one practice had the OCM plus multiple Vets/Owners, and two had the OCM, the Vet/Owner and the Staff gather together for ideas, though the OCM and Vet/Owner had veto power.

**Q Nine**

*How often is the website updated?*

The timeline for updating the websites was also much more varied than anticipated, with a range of “Zero/Not currently updated” to “Seasonally/3 or 4 times a year”. Two of the practices gave two responses each, because it was in the spirit of “we try to update it x, but if we don’t do it x, then we do it y”. So there was a bit of overlap in the charts, but it seemed like seasonally or monthly are the most common responses, with once a week a close contender for update schedules.

**Q Ten**

*Who is in charge of updating the website?*

This was the only question that does not have a chart, and with good reason: out of the eight interviews, it was only necessary to ask it once. During all the other times, this question was answered during a previous question, usually Question Eight or Nine. For the most part, the person in charge of updating the website was the OCM, with the exception of the two practices that had website design companies and the one practice that had a staff member that wasn’t the OCM in charge of posting new material on the website. In the former two cases, the

OCM had to call or email the company with the changes, and they were then made at the time specified by the OCM. In the latter case, the OCM told the staff member what new things to post and it would usually appear on the website the same day.

**Q Eleven**

*What process went into the deciding whether or not to use photographs with the veterinarian and staff mini-biographies?*

The most common answer was that the pictures were used to introduce who the staff and veterinarian(s) were prior to a client ever walking in the door, with four OCMs answering thusly, followed by additional answers that there wasn't a real process to it, it was just done. Several OCMs stated that they wanted to show off who their doctors and staff were, and that posing with animals was just common sense. Further statements backing up these answers came in the form of OCMs talking about how clients wanted to know who would be taking care of their companion animal, as most see their companion animals as small, furry children.

There was one very interesting bit of interview with the OCM of Practice O, who at first did not post pictures of the staff and then gradually did. Because her website was quite a bit older (as was the practice she works for), she had an unique point-of-view about the early websites and Internet. She and the staff vehemently did not want their pictures on the website, because prior to Facebook and MySpace, it just wasn't done. There was a real fear that if their pictures were up on the website, they would risk the chance of being preyed upon by stalkers. Also, the thought of having a picture of themselves up on the website for anybody to get to and see scared them.

Conversely, the OCM of Practice R stated that she'd taken most of the photographs of the veterinarians and staff off the website, because now the practice had a Facebook page and

she could upload all the pictures she could ever want there, which kept the practice website from becoming too cluttered. This also kept the practice website running smoothly, because without a deluge of pictures, the loading times of the pages was kept short.

### **Q Twelve**

*What process went into deciding against putting a price list for services on the site?*

The most frequent answer for this question was the tried and true “prices change”, with five OCMs responding, followed by four responses of OCMs wanting clients to call in. Two OCMs cited that there were price-setting laws, and that veterinary practices packaged their services differently from place to place so creating a price list would be too time consuming for the practices and too confusing for the clients. Two OCMs also believed that service should trump price, and was an equally valid reason for not posting a price list. There were several OCMs who, when asked this question, did respond in a manner that suggested they were slightly offended by the question itself, as if the answer was obvious and a waste of time. Two responded in a manner that suggested they were not only offended by the question, but they were irate that the question was even asked, giving their responses in clipped sentences and annoyed tones of voice.

### **Q Thirteen**

*What process went into selecting client education material?*

There was an interesting segue from one reason to another when it came to responses on this topic. The most frequent answer was that OCMs posted information they thought their clients needed, and one OCM from that group added that they also posted information that coincided with topics of interest that they’d been hearing about from clients in the practice. Another OCM who had the same topic of interest answer also replied that she often posted

information that dealt with a topic of the month or season, such as Dental Month or Heartworm Season. Two OCMs responded that they liked to post information on treatments that cover all the options, such as when doing a dental procedure, what the minimum service was (e.g. a simple, basic cleaning with anesthesia) and what the maximum service was (e.g. anesthesia, deep cleaning, pulling all rotten/impacted teeth, dental x-rays, etc.), plus all the steps in-between. One OCM stated that whatever the Veterinarian wanted to post for client education was what was selected; information that he could verify himself and was comfortable posting on the website.

**Q Fourteen A & B**

*A: What process went into deciding whether or not to use embedded videos?*

*B: What process went into deciding which videos would be embedded in the website?*

Out of the eight practices, only two had embedded videos. Of those two, one had them for educational purposes, while the other used them for advertising. Of the six that do not have embedded videos, two of them chose not to have them due to either bandwidth restraints or because they had seen no use for them; the other four do not have them yet, but were looking forward to adding them once they renovated the current website and could figure out which videos they wanted.

**Q Fifteen**

*What does the practice hope that the audience remembers after visiting the website?*

The most frequent response came from four of the OCMs, who stated they wanted people to remember a “feeling of caring or compassion” emanating from the website. The next two most frequent responses were “a feeling that this was where clients want to be” and “location/ phone number”. Only two of the OCMs replied they wanted people to remember the

practice name. One OCM responded that they hoped the audience “learned something”, which was rather surprising, especially considering all the concern from all the OCMs in Question Thirteen about selecting client education material to be posted for the benefit of the clients, and then ultimately the patients as the clients used the information.

**Q Sixteen**

*How is the success of the website measured in the practice? Client retention, draw, increased phone traffic, etc.?*

Seven out of eight OCMs responded that they gave new client surveys to see where the clients were referred from when asked this question. The one that didn’t do new client surveys looked at increased phone traffic and online reviews. Four practices used search engine analytics as well, and two clinics that already used new client surveys also monitored phone traffic.

It should be noted that Practice R recently did an online survey of its 100 oldest clients (oldest referring to how long they’ve been clients of the practice). The return of completed surveys was surprisingly high, and told the OCM that the oldest clients were in fact very in tune with what was happening on the website, and they had decided interest in learning something new about their pets and how to care for them.

**Q Seventeen**

*Describe the perfect veterinary homepage. What vital material would be shown?*

The most frequent response was contact information, followed by practice information, address/directions, easy navigation and relevant pictures. Interestingly enough, only one practice said having the practice name was important, and only one practice said having the practice logo on the homepage was important. Only two clinics said that having the mission

statement, hours of operation or current/new information (such as news/specials) on the homepage was important, even as links.

The variety of responses were not surprising for this question; but the practices that answered with only two or three pieces of vital material instead of a laundry list was surprising. Out of the eight, only three OCMs answered with only two or three responses, with two of them saying only the contact information and practice information was important, and the third saying the practice information, mission statement and hours of operation were important. The other five practices had four or more things on their list of answers, with Practice J having the longest list with six responses.

#### **Q Eighteen**

*Where do you think this is all going? Put another way, what direction do you believe the website is headed?*

Half of the OCMs responded that clients booking appointments online as part of the future, making it the most frequent response. Other frequent responses included clients ordering medication refills, having interactive websites and the websites becoming the main point of the practice's advertising.

It should be noted that many of the OCMs interviewed were at the time undergoing the task of updating the veterinary practice website to be more in keeping with the times and more social networking friendly, as well as much more interactive. This definitely showed in the way in which the OCMs looked to the future of what their website could do and what they wanted it to do in order to make life easier for both their clients and their staff.



## Discussion

Looking at the data and then finding connections to the Research Questions and Hypotheses, it appears as though most of the Hypotheses were right on track. However, in the case of Research Question and Hypothesis One, it was on the right track, but did not reach far enough. Instead of just using information to their advantage, OCMs for the most part tried to use every part of the website to their advantage when it came to acquiring new clients and keeping the clients they already had attained. This was prevalent theme in almost all the answers given in the interviews, though the OCMs think less of it being about building trust and more of building a connection and making the client feel like the practice and its staff were a place of community / family.

For the second question and hypothesis, Interview Question 11 was the only place to garner informed answers. These answers almost all played to the same theme: the OCMs were certain that potential clients or new clients wanted to see and know who the staff and veterinarians were and what they looked like before coming in with their pet. A lot of OCMS also stated that there was no decision-making process on whether or not to post pictures, it was just something they felt they had to do. Only a couple of the veterinary practices don't have a full set of staff pictures; one because the practice now has a Facebook page for all their pictures and the second because some staff members requested not to be pictured while others were fine having their picture on the website.

Finally, the third research question and hypothesis, regarding emotional cues was surprisingly almost the same answer as the first research question and hypothesis, in that many of the OCMs felt the need to use the entire website to their advantage when it came to emotional appeals. Many stated that they wanted to make the potential or current clients feel a

sense of community / family / home when they visited the website. A lot of this type of emotional outreach was done with pictures of companion animals, and accompanied with messages that were meant to appeal to a variety of client emotions, so that no matter what mood one was in when perusing the website, there would be a picture that spoke to him / her. Examples were up to and included: a picture on every page of a different puppy or kitten that was a patient of the practice, with an anecdote about what the pet's favorite things to do entail; a tasteful page dedicated just for those patients that have "gone over the Rainbow Bridge" (a euphemism prevalent in the veterinary industry for having a companion animal that has died); a scrolling marquee that reminded clients about National Dog Day (August 26th) and National Cat Day (October 29th), and how they could celebrate having their beloved companion animals in their lives now and in the years to come.

It was obvious that a lot of the OCMs could agree on their reasons for doing some of the things they have done with their websites, and thereby set up the argument for framing their websites in a manner that would get all of these points across to the audience. Also, because so many of the practices had in fact admitted to using new client questionnaires, it was reasonable to assume that the integrative model for framing would be used (though since all but two of the OCMs had nothing but veterinary experience, they may not have even realized there was a name for the type of framing model they were using). Every OCM stated that they had targeted messages to their audience, and the use of gain- and loss- framed appeals (though again, many OCMs had not stated the type of appeal by name). It was also true that the OCMS trended towards loss aversion than gain-framed appeal, as a healthy pet becoming ill was a bigger motivator for some clients than the gain-framed appeal of keeping a healthy pet healthy, even if it was essentially the same message. As far as the ethnographic content analysis goes, it was

fascinating to see eight veterinary practices, positioned all over the City of Fort Collins, be so unique unto themselves while mostly having the same goals for their clients, their practices and their websites.

## **VI. Conclusions and Further Research**

The results of this thesis were based on eight in-depth interviews that were conducted from late May to late December in 2011. The participants were all online content managers (OCMs) for the veterinary practice they worked for within the Fort Collins area (though that was not their official title in the practice, as they had other duties to attend to as well), and each had an interesting point of view on the subject of veterinary practices and how they used their websites for both telemedicine and marketing.

Getting these eight interviews took quite a bit of time and persistence; calling once and leaving a message usually didn't work, and it was oftentimes necessary to call a practice once a week, every week, for almost a month or more before getting any sort of response. The population the sample was from was a list of 19 veterinary practices that had brick-and-mortar addresses in the Fort Collins area that also had websites with more than just a homepage. In retrospect, acquiring these interviews was the hardest part of the process.

Taking in all the data the interviews garnered was a tumultuous process, because even though all eight people worked in the same industry and had the goal of bolstering the practice they worked for, they each came from various backgrounds that made them approach how they created the websites a different way. The ethnographic part of the study, in which the data was viewed as a whole in the context of all the websites originating from veterinary practices in Fort Collins, found most of their answers to be consistent with each other, with slight variations dependent on their backgrounds.

As for further research, a consumer panel would be a great idea for further research. At first, a consumer panel was part of this study, but due to a lack of interest in potential participants, that part of the study never truly materialized. The original idea was to have a

panel of consumers look at the websites of participating veterinary practices and fill out a survey booklet, to see how consumers reacted to the websites. It was with the hope that the study could then have information not only on how OCMs saw the websites they built, but how consumers saw the websites they went to for information.

This brings up the next point of order: if anybody wants to replicate what was done here and build upon it, by all means do so with gusto. Fort Collins is not the only city with a veterinary college and lots of veterinary clinics; if one lives in or near such a city, it is a hope that this thesis will actively encourage graduate students (and undergraduate students) to take up the project. Do interviews, get the consumer panel going that this thesis was unable to get off the ground, talk to veterinarian students and animal rescue groups. Why animal rescue groups? Because not all animal rescue groups have doctors on staff (in fact, it's rather rare if they do, because many are small), so they have to get their medical care from somebody; find out which veterinary practice they chose and why.

Another avenue for further research would be to do a comparative study amongst the cities that have veterinary clinics. To build upon that, you could then look at cities of the same approximate size that do not have a veterinary schools and see if there are any discrepancies in the language used on the websites or how the OCMs feel about their practice and how they represent the practice online. Add in a consumer panel if appropriate to see how consumers differ from cities with a veterinary school to cities that do not have a veterinary school in terms of pet health literacy, how they view veterinarians in the area and how they use websites.

There are dozens more ways to further the research started here, and it is with hope that somebody reading this will take up the project and continue it. The only way to acquire knowledge is to look for it, and if the answer to your questions are unattainable with the

knowledge already present, then by all means, go after what you need to know to satisfy your curiosity.

This thesis found the answers to the questions posed to it at the beginning of the study; OCMs use the entirety of the website at their disposal for both marketing and telehealth purposes. They see their websites as a way to connect emotionally with their client base, through both words and pictures. They believe that posting pictures of their staff for their client base is something that must be done, so that the clients can know who the staff is before taking their companion animals in for treatment.

These things, and much more, were found during this study. As the internet becomes more interactive and fully embraces Web 2.0 (and any further leaps in technology), veterinary websites will change again. It is with a firm belief in academic spirit and natural curiosity that the work done in this thesis will be replicated elsewhere and built upon, in order to explain how OCMs both now and in the future use their websites for the practices in which they work.

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## APPENDICES

FORT COLLINS VETERINARY PRACTICES AND WEBSITES:  
HOW TELEMEDICINE IS USED AS A MARKETING TOOL

APPENDIX A (1)

Animal Haven Veterinary Clinic  
125 Carpenter Road, Fort Collins, CO  
(970)663-7387 <http://www.animalhavenvetclinic.com>

Animal Hospital of Colorado  
1721 West Harmony Rd., #104, Fort Collins, CO  
(970)267-9333 <http://ahcolorado.com/default.aspx>

Aspen Grove Veterinary Care  
2633 S. College Ave., Fort Collins, CO  
(970)416-0232 <http://www.aspengrovetvet.com>

Chappelle Small Animal Hospital Pc  
1601 N. US Highway 287, Fort Collins, CO  
(970)482-7595 <http://chappellehospital.com>

City Park Animal Clinic  
1720 W. Mulberry Street, Unit C, Fort Collins, CO  
(970)224-2929 <http://www.cityparkvets.com/CityParkVets.com/Welcome.html>

Countryside Animal Hospital  
3820 S. Timberline Rd., Fort Collins, CO  
(970)223-7789 <http://countrysidevet.com>

Elder Pet Care & Thomas Veterinary Service  
909 N. College Ave., Fort Collins, CO  
(970)493-2657 <http://epctvs.weebly.com/index.html>

Friendship Hospital for Animals  
1103 Oak Park Dr. Suite 101, Fort Collins, CO  
(970)206-1868 <http://friendshiphospitalforanimals.com>

Front Range Veterinary Clinic and Pet Lodge  
3200 E. Mulberry St., Fort Collins, CO  
(970)484-5667 <http://www.frontrangevetclinic.com>

Gamble Pet Clinic  
2108 Midpoint Dr. Unit 4, Fort Collins, CO  
(970)221-9995 <http://www.gamblepetclinic.com>

Harmony Hospital for Pets  
309 W. Harmony Rd., Fort Collins, CO  
(970)226-1524 <http://harmonyhospitalforpets.com>

Moore Animal Hospital Pet Camp  
2550 Stover St. Unit H, Fort Collins, CO  
(970)416-9101 <http://mooreanimalhospital.com>

Mulnix Animal Clinic  
1015 S. Taft Hill Rd. Suite T, Fort Collins, CO  
(970)484-1848 <http://www.mulnixanimalclinic.com>

Paws of the Rockies Animal Hospital  
1538 E. Harmony Rd. Unit 2, Fort Collins, CO  
(970)226-0963 <http://pawsoftherockies.com>

Paws'n Claws Veterainry Clinic  
225 9<sup>th</sup> St. Suite 2, Fort Collins, CO  
(970)493-6696 <http://pncvets.com>

Pet Wellness Clinic LLC  
4848 S. College Ave. Unit B, Fort Collins, CO  
(970)282-9719 <http://www.thepetwellnessclinic.com>

Raintree Animal Hospital  
2335 S. Shields, Fort Collins, CO  
(970)482-1987 <http://www.raintreepets.com>

South Mesa Veterinary Hospital  
3801 S. mason St., Fort Collins, CO  
(970)226-6526 <http://southmesa.com>

Trilby Companion Animal Hospital  
125 W. Trilby Rd., Fort Collins, CO  
(970)223-3204 <http://trilbyvet.com>

## APPENDIX B (2)

**Note:** All Websites were initially viewed on an Apple iMac with a screen resolution of 1680x1050. It should also be noted that when it is said that a homepage for a veterinary practice needed to be scrolled in order to see all of it, that is on the iMac resolution. -AMW

### *Practice B*

Simple site, that for some reason is formatted to be rather wide. However, the home page is very short because of this, so no scrolling is required. Contact information is on the sidebar, and even includes a fax number and an email address in addition to the practice address and telephone number. All links to other pages are at the top of the page near the practice logo. There is a short welcome message, followed by an even shorter mission statement. Below that, there are graphics for affiliations, which include CareCredit, Pets Best Insurance, Trupanion, AVMA (American Veterinary Medical Association) and a graphic-link to the AAHA. Below that, there are links to the practice's Facebook and Twitter accounts.

There is a thorough and very image-heavy "Clinic Tour" page, which is in slideshow format. The pictures are good, no blurry shots of anything. This site does not shy away from pictures, but they're kept to certain areas. "Meet The Team" has pictures of the staff, usually with animals, and the unique "Artwork" page has a couple of pictures of animals as well.

Two interesting pages include "New Client Form" and "Patient Medical History"; the former gives the option of printing the New Client Form or filling in the electronic version right on that page, while the latter gives the option of Canine or Feline "Lifestyle Review Information", then also gives the option for a printable version of the form or an electronic version to fill out on the page.

There are a lot of links on this site. Some are super helpful; there is a page titled “Pet Care Tips” that has nothing but links to .pdf files full of educational material for clients. The “Map/Directions” link goes directly to a Google Maps page with Gamble Pet Clinic marked clearly on the map already. The “Recommended Doggy Daycare” and “Recommended Boarding Kennels” go to links for just those things. There is even a page just titled “Links”, which has a list of links to various places that could be helpful to a pet owner.

### *Practice H*

Simple site, with six pages total. The color scheme is fairly monochromatic, white and gray everywhere. All pictures are bordered by light grey, and any important information is done in red-orange type. All pages have at the bottom “Made on a Mac”, along with the Apple logo.

Homepage itself is short and to the point; no scrolling necessary. Several pictures of animals are prominently displayed. Top of the page has a horizontal navigation bar, which is on every page. Directly under this is the name of the clinic, the phone number, the address and the emergency number, the last of which is one of the things done in red-orange type. After the pictures of the animals, there is a mission statement, office hours and a link on “How to Find Us”.

Second page is “Cat Boarding”, which has several pictures of the boarding facility and information about the boarding situation, including the location, contact number and what to expect when cats stay there.

Third page is “About the Vet”, with three pictures; one of the veterinarian holding a dog, one of him checking the vitals of another animal and the last of him at a microscope. There is a

small biography, mostly turned towards what animals the veterinarian takes care of and how long he's been in practice.

Fourth page is "Our Staff", though the only person with a biography of any sort is the Office Manager & Head Technician. There are three pictures on this page, one of a dog that is already used on the homepage, one of the Office Manager to go with her biography and the last of the veterinarian with a veterinary technician and a kitten.

Fifth page is "How to Find Us" has the number of the practice, landmarks around the practice so it can be easily found, a picture of the front of the building, the address, the office hours, the emergency number to call if it is after hours and a Google Map pinpointing the location.

Last page is "Pet Pics", which has 21 pictures of various patients of the practice, some of which are taken with the clients, others with staff and sometimes just of the animals themselves. All of these were taken in 2009, since the site was initially put up that year and then not updated thereafter.

### *Practice J*

Set up of site overall is intuitive, though extensive with 31 pages crammed with information. The header for every page has the following: the logo on the upper left side of the page, a graphic that looks like a sticky note with the practice's phone number on it on the upper right side of the page, plus three links plus a horizontal navigation bar with drop down menus. The three links that run horizontally at the top of the header are "Articles & Information", "Community Support & Involvement" and "Contact Us". The space in between the three links and the navigation bar has the words "Healthy for life. Loved forever.", and the navigation bar

has individual links for “Home”, “Promotions” and “Dog Training”, as well as drop-down menus for links that fall under “Animal Hospital”, “Boarding & Daycare” and “About Us”. At the bottom of each page there is also a footer, where there are several links to keep a person in touch with the practice. Links to their Facebook, Twitter, Foursquare (coupon), Google Places, LinkedIn and Yelp pages are readily handy on the bottom left column. To the right of that is a column of links to different veterinary services, as well as boarding, day care and grooming information for dogs. To the right of that is a “Contact Us” column, which has the name of the practice, the phone and fax numbers as well as the email address for the practice, and below that the full address for the brick-and-mortar site of the practice. On the far right of the page, there is a scannable QR code for smartphones to instantly import the numbers for the practice. Slightly below the “Contact Us” and QR Code, there is a Pet Portal log in, where clients can view the vaccine history of their pets, refill a prescription or schedule an appointment.

On the homepage, there is a collage of pictures of dogs and cats and a few small children, as well as a picture of the veterinarian with a dog, with a mini-biography under the picture. Below the collage is a slideshow style advertising banner for services the practice has, as well as a small ad to “like” them on Facebook. To the right of this, there are quick links to the newest client education articles.

Each page has a side bar on the left of the text, where people can see another animal picture with a small biography, below which there are links to Pet Portal, Facebook, Twitter and LinkedIn. To the right of the text for the page, there is a graphic with the office hours for the practice. The graphics for the site seem to be stationary motif, looking like sticky notes, pieces of paper ripped out of spiral-bound notebooks, and the pictures that have the pet bios beneath them all look like Polaroids.

All of the pages are packed with information, and there is no wasted space. The color scheme throughout is pleasant to the eyes and even after reading throughout the entire site, I do not have eye strain. I should make note that at the time this is being written the “Tour” of the facility is not operational, but the other 30 pages work just fine.

While there are pages specifically just for client education material, the entire site is set up to be educational in some way, explaining procedures and such to the reader. Overall, the site happens to pull off the paradox of being full almost to excess while not looking “too busy” or distracting from the information.

#### *Practice M*

Rudimentary multi-page site with a very compact no-scroll home page. The contact information is at the top of the page next to the practice logo. The page links are on a sidebar, and the information on the home page gives a brief update of pet record policy (they have joined Vetstreet so there is now online access to their pet’s records if you wish to sign up for “Pet Portal”) and there is also a “Pet News” update that reminds pet owners to have pets tested for heartworm disease and to buy Heartgard for their pets.

The links on the sidebar are for “About Us”, “Staff”, “Veterinary Services”, “Map and Directions”, “Contact Us”, “Emergencies”, “Other Information”, “Tour” and “Pet Lodge”.

The “About Us” page has no pictures, but does provide the practice’s history, the mission statement and the practice’s “Core Values”. The “Staff” page has bios of everybody plus pictures of the people (usually with an animal). One doctor’s picture wasn’t showing up, though, but it may be a technical error. The “Veterinary Services” page just has a list of services, but no descriptions. In case of emergency, people are to contact the Front Range Veterinary



Clinic, or if the emergency happens after hours, they are to contact the Fort Collins Veterinary Emergency Hospital.

The “Tour” is short and full of pictures, but other than the “Staff” page, it seems to be the only other place with pictures. The “Map and Directions” page does have a MapQuest map graphic, but it’s rather small.

### *Practice O*

The address and telephone number are directly below the name of the practice, which is at the very top of the home page. There is a welcome statement on the home page. However, there are also links on the home page everywhere, making navigation confusing. There are four links under the welcome statement, links to various pages in the side bar, plus three small boxes near the bottom of the page with a link each. Taken in all at once, it looks hectic.

Pages for this site include two dedicated to their adoption center and pets for adoption, plus “News & Events”, “Doctors & Staff”, “Hours & Services”, “Pet Care & Health”, a contact page and a page just for more links to other places/pet services in Colorado. Going to the “Doctors & Staff” page, instead of short bios with a picture, there are more links. These links in particular are poorly done (click one doctor’s name, you get the page “Doctor Profiles” where the bios of all the doctors are, click any of the staff, and you’re sent to “Staff Profiles”) and there are no pictures of the staff or doctors with their bios. It seems the only part of the site dedicated to pictures is the “Pet Gallery”, because other than the home page, that’s the only place I’ve seen a picture.

The interesting thing about this site is the fact that this is apparently the renovated version; one of the boxed links on the home page goes to the “Our Website Makeover” page,

where it states that one of the clients of the practice is a Web usability specialist, who took a look at the site and helped the practice renovate.

### *Practice R*

Absolutely everything is encased in either a square or rectangle, and scrolling is necessary on this homepage. It starts with a rectangle that has the contact information - address, telephone number and email - and the three veterinarians' names. Then there is a row of five squares, and each square has a picture of at least one animal in it - dog, two cats, two dogs, a cat and then two dogs. After that, there are two rectangles. One rectangle has the links to the other pages plus a small logo, the second has the mission statement.

After that, there is an almost square with a lot of stuff in it. There's an animated graphic of a cat leaving tracks above directions to the practice, and next to those two things are the practice hours. Directly below those three things, there is a scrolling marquee. After that, there is a list of services, and below that are two button-links; one to a "Client Info Form" and the other is a "Companion Info Form". All of that is in this one square!

Back to the links for the rest of the pages. There is "Veterinarians", "Our Staff", "What's New", "Specials", "Library" and "Spay/Neuter Program". One has to click rather quickly to the "Veterinarians" page, because the front page was actually headache-inducing. The topmost rectangle full of contact info and the five squares of pictures are a site-wide header. Interestingly enough, the pictures have changed to completely different dogs and cats from the home page. The "Veterinarians" page starts out with a paragraph about surgery services and other specialities of the clinic before introducing the pictureless veterinarians via bios. Checking the "Our Staff" page, none of the staff have pictures either, just bios as well.

The “What’s New” and “Specials” pages, there wasn’t anything even remotely exciting on either page. The “Library” has four YouTube videos embedded, plus one extra picture of a puppy, and then links to a bunch of articles. The videos and articles are there to educate pet owners, though it’s rather mystifying as to why the puppy picture is there.

The “Spay/Neuter Program” page was an interesting non-argument. It touted a “High Quality/Low Cost” spay/neuter surgery for the pet, then broke down exactly what the practice believes to be “high quality”, without then giving a price list for what their spay/neuter surgery actually costs.

And here’s an added note: the color scheme to this entire site is awful. The blocks are all a medium gray with mainly white lettering for the body, but there’s also a plum color of font in there as well. The only block that isn’t gray is the page navigation block, which is plum background with white lettering. The background color for all of this is some kind of deep green-blue mixed with a bit of gray. It’s ugly and the full color combo hurts the eyes. Oh, and remember the scrolling marquee? It’s plum with black type, and moves just fast enough for it to be both easy and hard to read.

#### *Practice V*

Very short home page, no scrolling necessary. Picture intensive, but a very short statement about caring for all kinds of companion animals. There is a horizontal bar of page links, and there is no contact information on the home page whatsoever; no address, no phone or fax number.

“About Us” is a very short page as well, that has a mission statement, and an AAHA graphic. “Hours/Location” does have hours, the types of credit cards accepted at the practice (including CareCredit), the location of the clinic and a link to a map, plus a link to North

Boulder Companion Animal Hospital's (NBCAH) Website. "Contact Information" has the address for the practice, as well as phone and fax numbers and an email address; there is another link to NBCAH's Website. "Services" is a mere list of services, although it does say at the top of this page that the practices serves "dogs, cats, birds, reptiles, and other exotic pets" (Trilby, 2010). There is again a list of what credit cards are accepted, and a link to CareCredit's Website.

"Staff" only has the bios for the two veterinarians on staff; one doctor is pictured with her family, the other is pictured with her horse. The "Resources" section is rather short; it starts with yet another link to NBCAH's Website, the a series of "Online Resources", and then has a couple of paragraphs introducing a video about pet overpopulation and the Colorado Pet Overpopulation Fund.

#### *Practice Y*

This website has a rather interesting approach to the static header on every page; it contains a "corner" navigation bar, where there is both a horizontal bar with practice logo and slogan on top with links below it, as well as a left-aligned vertical navigation bar. Also static at the bottom of every page, there is the address, a map of the location, the phone and fax numbers and the business hours of the practice.

The homepage has a mission statement, links to different articles, button links to AAHA, BBB and Facebook, as well as links for new clients to get either a "Client Information Sheet", "Reptile History Sheet" and/or "Small Mammal History Sheet", to fill out before they get to the practice.

The horizontal navigation bar has links for “Home”, “About Us”, “Rainbow Bridge”, “Links” and “Contact Us”. The vertical navigation bar has links for “Boarding Care”, “Grooming”, “General Care”, “Emergency Care”, “Dental Care”, “Surgery”, “Acupuncture”, “Microchipping”, “Exotic Pet Care”, “Senior Pet Care”, “Employment” and “What’s In Your Mix”. The parsing out of links dependent on what the links are to in the navigation bars also brings about a good sense of direction; those looking for information about pet care can look at the vertical navigation bar, while those who want to know more about the practice itself or other information can look at the horizontal navigation bar.

It should be noted that while the static header / sidebar has 17 links to pages including the homepage, that there are more than 17 pages to this website. Under several of the links in the sidebar, there are additional links to more specific information, especially when it comes to the care of various animals or procedures. In “Dental Care” and “Surgery” there are slideshows of some procedures in-progress, with a warning before the link to the slideshow that some images may be graphic (and they are right; anybody who is not used to watching / participating in surgeries should beware, because some of the images do in fact show innards). There is no specific page for client education material, because there seems to be a lot of information that would answer most of the common questions people might ask about their pets under the appropriate procedural sections.

The “Rainbow Bridge” page is a memorial page, full of pictures of pets with their names and years lived (e.g. 1999-2003, etc.). With the exception of the “Links” page, every page of the website has at least one picture on it, and they are always appropriate for the page they are on.

## APPENDIX C (3)

### Recruitment Telephone Script for Interview Participants

*<Receptionist Answers Phone>*

Hello, my name is Alice Weaver. May I speak to or leave a voicemail with the employee in your practice that oversees the online content of your website?

*<Receptionist Transfers The Call to the Appropriate Party>*

#### If leaving a voicemail:

Hello, my name is Alice Weaver. I am a graduate student at Colorado State University, in the Journalism and Technical Communications Department. The reason I am calling you is because I am interested in learning more about the process that goes into making veterinary practice websites, and I would like to interview you for my thesis. My thesis is concentrated on the veterinary practices of Fort Collins, and how veterinary practice websites can be used as marketing tools.

I would like to state up front that I will need you to read and sign a consent form to participate, and that I will be audio recording the interview for accuracy when I write up my thesis. However, you will be anonymous in the study, and given a code to be referenced by so your identity remains safe. Also, the entirety of the interview, including the time it takes to read and sign the consent form is one hour or less.

In return for your participation, I will be giving you a copy of my thesis after it is defended and published. It may be a benefit to your practice, because in addition to the overall information, it will give you a head start over practices all around the country. This is because after the thesis is published, I will also be writing articles for trade magazines in veterinary business and telemedicine.

If you are interested in participating, or even if you have to decline, please give me a call at (734) 846-6868. Thank you for your time, and I hope you have a pleasant day.

**<End Call>**

#### If speaking to a possible interviewee:

Hello, my name is Alice Weaver. I am a graduate student interested in veterinary online content; may I have a few moments of your time?

*<Possible Interviewee hopefully allows me to continue>*

I am doing my thesis on veterinary practice websites and how they can be used as marketing tools. I've seen your practice's website, and I am hoping to interview you on the process you

went through to set the website up. By participating, you'll receive in return information that may help your practice. You will be anonymous and given an identity code, so your name will remain out of the thesis. However, I will need to audio record the interview for accuracy, and have you read and sign a consent form before you participate. Are you interested?

*<Possible Interviewee accepts or declines. If s/he declines, I will thank him/her for his/her time and hang up. If s/he accepts, I will continue>*

Wonderful! In return for your help, I will be giving you a copy of my thesis once it is defended and published. This is an important informational advantage to your practice, because after my thesis is done, I plan on writing several articles for trade magazines in the veterinary business and telemedicine fields. You'll have a head-start with the information I'll be giving you.

The interview may take up to two hours, since I have a series of questions for you, but it may very well take less. Is there any day / time that works best for you?

*<At this point, it is a matter of scheduling, and once it is concluded, I will hang up.>*

## APPENDIX D (4)

D.1 (4, Consent Form 1 - Used when there was still a consumer panel planned)

### **Consent to Participate in a Research Study Colorado State University**

#### **TITLE OF STUDY:**

Fort Collins Veterinary Practices and Websites: How Telemedicine is Used as a Marketing Tool

#### **PRINCIPAL INVESTIGATOR:**

Peter Seel, Journalism and Technical Communication, Associate Professor, T: (970) 491-2030, E: [peteseel@colostate.edu](mailto:peteseel@colostate.edu)

#### **CO-PRINCIPAL INVESTIGATOR:**

Alice Weaver, Journalism and Technical Communication, Graduate Student in Public Communication and Technology, T: (734) 846-6868, E: [malia.alice@gmail.com](mailto:malia.alice@gmail.com)

#### **WHY AM I BEING INVITED TO TAKE PART IN THIS RESEARCH?**

You have been invited to take part in this research because you have been identified as the person that is in charge of online content for the veterinary practice's website. This makes you a person of interest in this study, as you would have the most insight as to the inner workings of the website and what has gone into making it what it is today.

#### **WHO IS DOING THE STUDY?**

Alice Weaver, a graduate student at Colorado State University in the Journalism and Technical Communication Department. She is working with Professor Peter Seel, as well as being overseen by Professor Joseph Champ and Professor Bernard Rollin.

#### **WHAT IS THE PURPOSE OF THIS STUDY?**

The purpose of this study is to look at websites of veterinary practices in the city of Fort Collins, and see what commonalities and differences there are among them. In addition, this study will interview people in charge of these websites, and try to find out the reasoning behind how the websites are set up.

#### **WHERE IS THE STUDY GOING TO TAKE PLACE AND HOW LONG WILL IT LAST?**

The study is two-fold; the content analysis will take place at one of the Colorado State University computer labs, so that the websites of the chosen veterinary practices can be assessed for their content, and the people in charge of the online content for the chosen veterinary practices will be interviewed in person at their practices. The entirety of the data collection should take up to four (4) to five (5) weeks. Your part of the study will take up to two hours maximum.

#### **WHAT WILL I BE ASKED TO DO?**

You will be asked a series of questions. All you have to do is answer these questions to the best of your ability. There are a few demographic questions, which are standard practice. There are some questions that require a yes or no answer, but can be expounded upon at length if you wish. Finally, there are some questions that are completely open-ended and you may answer



however you like. You are free to look up information if you don't immediately remember it but know that you have the information on hand. Also, you can answer "I don't know" for any question if the answer eludes you.

Page 1 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

#### **ARE THERE REASONS WHY I SHOULD NOT TAKE PART IN THIS STUDY?**

The only reason you should have for not taking part in this study is if you are not the main creator/caretaker/overseer of online content for the veterinary practice in which you work.

#### **WHAT ARE THE POSSIBLE RISKS AND DISCOMFORTS?**

There are no known risks associated with the procedures. However, it is not possible to identify all potential risks in research procedures, but the researcher has taken reasonable safeguards to minimize any known and potential, but unknown, risks.

#### **ARE THERE ANY BENEFITS FROM TAKING PART IN THIS STUDY?**

There are no direct benefits for participating. However, by taking part in this study, it is the hope of we the researchers that the information gathered will make it possible to make veterinary websites better for both the creators and the consumers. In addition, we hope to publish in trade magazines and then we will also give you a copy of the results.

#### **DO I HAVE TO TAKE PART IN THE STUDY?**

Your participation in this research is voluntary. If you decide to participate in the study, you may withdraw your consent and stop participating at any time without penalty or loss of benefits to which you are otherwise entitled.

#### **WHO WILL SEE THE INFORMATION THAT I GIVE?**

We will keep private all research records that identify you, to the extent allowed by law. Your information will be combined with information from other people taking part in the study. When we write about the study to share it with other academics, we will write about the combined information we have gathered. You will not be identified in these written materials. We will publish the results of this study; however, we will keep your name and other identifying information private.

We will make every effort to prevent anyone who is not on the research team from knowing that you gave us information, or what that information is. For example, your name will be kept separate from your research records and these two things will be stored in different places under lock and key. The only way a participant is to be identified is through their job title. The name of the veterinary practice will be replaced with a letter of the alphabet, chosen at random, so it will be very hard for your identity to be determined (e.g. "Office Manager at Practice X").

#### **WHAT IF I HAVE QUESTIONS?**

Before you decide whether to accept this invitation to take part in the study, please ask any questions that might come to mind now. Later, if you have questions about the study, you can always contact the Investigator Peter Seel, at [peteseel@colostate.edu](mailto:peteseel@colostate.edu), or at his work number, (970) 491-2030. You can also contact the Co-Investigator, Alice Weaver, at [malia.alice@gmail.com](mailto:malia.alice@gmail.com), or on her mobile phone, (734) 846-6868.

If you have any questions about your rights as a volunteer in this research, contact Janell Barker, Human Research Administrator at (970) 491-1655. We will give you a copy of this consent form to take with you.

This consent form was approved by the CSU Institutional Review Board for the protection of human subjects in research on May 3, 2011.

Page 2 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

**WHAT ELSE DO I NEED TO KNOW?**

To make sure that the investigators have a perfect record of your answers during the interview, a digital voice recorder will be used. The main purpose of the recording will be for transcription services, and once the manuscript of the interview is completed, the recording of your voice will be deleted.

Please be aware that the study will be part of a published thesis, but the contents of the study will also be written for trade magazines in the veterinary field and the business telecommunications field. By participating in this study, the information will be available to you after the thesis is published, but before it will be published as an article in the trade magazine, giving you and your practice an informational advantage.

Your signature acknowledges that you have read the information stated and willingly sign this consent form. Your signature also acknowledges that you have received, on the date signed, a copy of this document containing three (3) pages.

\_\_\_\_\_  
Signature of person agreeing to take part in the study      Date

\_\_\_\_\_  
the study      Printed name of person agreeing to take part in

\_\_\_\_\_  
providing information to participant      Date      Name of person

\_\_\_\_\_  
Signature of Research Staff

Page 3 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

D.2 (4, Consent Form 2 - Used once the method changed to in-depth interviews only)

**Consent to Participate in a Research Study  
Colorado State University**

**TITLE OF STUDY:**

Fort Collins Veterinary Practices and Websites: How Telemedicine is Used as a Marketing Tool

**PRINCIPAL INVESTIGATOR:**

Peter Seel, Journalism and Technical Communication, Associate Professor, T: (970) 491-2030, E: [peteseel@colostate.edu](mailto:peteseel@colostate.edu)

**CO-PRINCIPAL INVESTIGATOR:**

Alice Weaver, Journalism and Technical Communication, Graduate Student in Public Communication and Technology, T: (734) 846-6868, E: [malia.alice@gmail.com](mailto:malia.alice@gmail.com)

**WHY AM I BEING INVITED TO TAKE PART IN THIS RESEARCH?**

You have been invited to take part in this research because you have been identified as the person that is in charge of online content for the veterinary practice's website. This makes you a person of interest in this study, as you would have the most insight as to the inner workings of the website and what has gone into making it what it is today.

**WHO IS DOING THE STUDY?**

Alice Weaver, a graduate student at Colorado State University in the Journalism and Technical Communication Department. She is working with Professor Peter Seel, as well as being overseen by Professor Joseph Champ and Professor Bernard Rollin.

**WHAT IS THE PURPOSE OF THIS STUDY?**

The purpose of this study is to see if there is a way to improve the websites of veterinary practices in the city of Fort Collins for both the creators and the consumers. To this end, this study will interview people in charge of the online content for these websites, and try to find out the reasoning behind how the websites are set up, and how they are maintained/updated.

**WHERE IS THE STUDY GOING TO TAKE PLACE AND HOW LONG WILL IT LAST?**

The veterinary practice online content managers will be interviewed in person at their place of employment, unless the online content manager is unable to meet there or would prefer another venue (coffee shop, restaurant, park, etc.). The entirety of the data collection is dependent on the schedules of those interviewed, so it is possible that this phase will last several months. Your part of the study will take up to 45 minutes maximum.

**WHAT WILL I BE ASKED TO DO?**

You will be asked a series of questions. All you have to do is answer these questions to the best of your ability. There are a few demographic questions, which are standard practice. There are some questions that require a yes or no answer, but can be expounded upon at length if you wish. Finally, there are some questions that are completely open-ended and you may answer however you like, as they are theoretical/philosophical in nature. You are free to look up

information if you don't immediately remember it but know that you have the information on hand. Also, you can answer "I don't know" for any question if the answer eludes you.

Page 1 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

### **ARE THERE REASONS WHY I SHOULD NOT TAKE PART IN THIS STUDY?**

The only reason you should have for not taking part in this study is if you are not the main creator/caretaker/overseer of online content for the veterinary practice in which you work.

### **WHAT ARE THE POSSIBLE RISKS AND DISCOMFORTS?**

There are no known risks associated with the procedures. However, it is not possible to identify all potential risks in research procedures, but the researcher has taken reasonable safeguards to minimize any known and potential, but unknown, risks.

### **ARE THERE ANY BENEFITS FROM TAKING PART IN THIS STUDY?**

There are no direct benefits for participating. However, by taking part in this study, it is the hope of we the researchers that the information gathered will make it possible to make veterinary websites better for both the creators and the consumers. In addition, we hope to publish in trade magazines and then we will also give you a copy of the results.

### **DO I HAVE TO TAKE PART IN THE STUDY?**

Your participation in this research is completely voluntary. If you decide to participate in the study, you may withdraw your consent and stop participating at any time without penalty or loss of benefits to which you are otherwise entitled.

### **WHO WILL SEE THE INFORMATION THAT I GIVE?**

We will keep private all research records that identify you, to the extent allowed by law. Your information will be combined with information from other people taking part in the study. When we write about the study to share it with other academics, we will write about the combined information we have gathered. You will not be identified in these written materials. We will publish the results of this study; however, we will keep your name and other identifying information private.

We will make every effort to prevent anyone who is not on the research team from knowing that you gave us information, or what that information is. For example, your name will be kept separate from your research records and these two things will be stored in different places under lock and key. The only way a participant is to be identified is through their job title. The name of the veterinary practice will be replaced with a letter of the alphabet, chosen at random, so it will be very hard for your identity to be determined (e.g. "Office Manager at Practice X").

### **WHAT IF I HAVE QUESTIONS?**

Before you decide whether to accept this invitation to take part in the study, please ask any questions that might come to mind now. Later, if you have questions about the study, you can always contact the Investigator Peter Seel, at [peteseel@colostate.edu](mailto:peteseel@colostate.edu), or at his work number, (970) 491-2030. You can also contact the Co-Investigator, Alice Weaver, at [malia.alice@gmail.com](mailto:malia.alice@gmail.com), or on her mobile phone, (734) 846-6868.

If you have any questions about your rights as a volunteer in this research, contact Janell Barker, Human Research Administrator at (970) 491-1655. We will give you a copy of this consent form to take with you.

This consent form was approved by the CSU Institutional Review Board for the protection of human subjects in research on May 3, 2011.

Page 2 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

**WHAT ELSE DO I NEED TO KNOW?**

To make sure that the investigators have a perfect record of your answers during the interview, a digital voice recorder will be used. The main purpose of the recording will be for transcription services, and once the manuscript of the interview is completed, the recording of your voice will be deleted.

Please be aware that the study will be part of a published thesis, but the contents of the study will also be written for trade magazines in the veterinary field and the business telecommunications field. By participating in this study, the information will be available to you after the thesis is published, but before it will be published as an article in the trade magazine, giving you and your practice an informational advantage.

Your signature acknowledges that you have read the information stated and willingly sign this consent form. Your signature also acknowledges that you have received, on the date signed, a copy of this document containing three (3) pages.

\_\_\_\_\_  
Signature of person agreeing to take part in the study      Date

\_\_\_\_\_  
the study      Printed name of person agreeing to take part in

\_\_\_\_\_  
providing information to participant      Date      Name of person

\_\_\_\_\_  
Signature of Research Staff

Page 3 of 3 Participant's initials \_\_\_\_\_ Date \_\_\_\_\_

## Appendix E (5)

### *Demographics Questions:*

Age:

Gender:

Education Level:

Job Title:

Years of Experience at Job:

### *Interview Questions:*

1. Why does the practice have a Website?
2. When was it realized that the practice needed a Website?
3. How much time elapsed between the realization of needing a Website and the actualization of having the Website operational online?
4. Was the Website created by a Staff Member, or was it contracted out to a Website making company?
- 5a. If the Website was created by a Staff Member, what programming did they use? 5b. If the Website was contracted out, how was the company chosen?
6. Were there any exemplary or model veterinary practice websites that influenced the look of the practice's website?
7. What is the most important point of having a Website for the practice?
8. Who decides what content goes on the Website?
9. How often is the Website updated?
10. Who is in charge of updating the content?
11. What process went into deciding whether or not to use photographs with the Veterinarian and Staff mini-biographies?
12. What process went into deciding against putting a price list for services on the site?
13. What process went into selecting client education material?
- 14a. What process went into deciding whether or not to use embedded videos?
- 14b. What process went into deciding which videos would be embedded in the website?
15. What does the practice hope that the audience remembers after visiting the website?
16. How is the success of the Website measured in the practice? Client retention, draw, increased phone traffic, etc.?
17. Describe the perfect veterinary practice homepage. What vital material would be shown?
18. Last question. Where do you think this is all going? Put another way, what direction do you believe the website is headed?

## APPENDIX F (6) - Chronological

F.1 (6, Interview #1)

A = Alice Malia Weaver, Interviewer

V = Practice Manager of Practice V

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### **Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into the recorder] This is Alice Weaver. Today is Friday, May 27th, and I am at Practice V for my first interview. [speaking to interviewee, V] Alright, again, thank you very much for helping me with my thesis.

V: Sure.

A: I do have a few demographic questions that I need to ask you before I can get to the good stuff.

V: Okay, of course.

A: If I may ask your age?

V: 34.

A: And you're obviously male.

V: Correct.

A: What is your education level?

V: Some post-graduate, or I should say, some post-high school graduation college courses, but I didn't get a degree.

A: Okay, and what is your job title?

V: I am the practice manager.

A: Something we have in common, I also used to be a practice manager.

V: Oh really?

A: Yes, back in Michigan, for a little over two years. And speaking of years of experience on the job, how many do you have here?

V: As practice manager, four years; in the veterinary field, eleven.

A: Alright, thank you very much.

### **Interview Questions:**

A: Okay, the very first question is why does the veterinary practice have a website?

V: Okay, we have a website, well originally it was set up because obviously that's where people were going for their information was online. So basically it's used as an advertising tool just to get the name out there.

A: Okay, when was it realized that the practice needed a website?

V: I would say probably six years ago.

A: And how much time elapsed between the realization that you needed a website, and the actualization of having the website operational?

V: I would say at least two years.

A: Two years? That's quite a bit of time. Was the website created by a staff member, or was it contracted out to a website making company?

V: It was actually created by a client who does web design.

A: Nice! I didn't even think about that, or consider it an option. Did they volunteer for the position, or did the person who made your website get contracted?

V: Well, knowing that she does web design, and she actually had some stuff that she needed done on her animals, it just worked out that we traded it in.

A: Ah, okay. You know, when I was working back in Michigan, we still didn't have a logo for our practice yet, and there was a lady who needed a little bit of work done for her cats, and she was a graphic design major so she helped us with our logo in exchange for services. I completely get where you're coming from with that.

V: Exactly. Sometimes those things just work out. And I guess I would say that the reason it took so long to get the website running wasn't necessarily in the planning, but it kinda came to we knew we needed a website, these are all the things we wanted to do with it, and it was so much, it was so much that the prior practice manager wanted to do with it, and essentially when it came down to it I just wanted web presence. So the website we currently have is fairly basic, it just has a general information that's not real elaborate site, just because, again, I just wanted to have web presence, where the prior practice manager wanted that and all these little extra newsletters and things, these little fun things, and it was taking a really long time to put together, and finally when I took over I was just let's put something together and put it up.

A: So it was more like, you just wanted to have something to be standard instead of all the bells and whistles as soon as you got it off the ground.

V: Right.

A: Okay, I totally get that.

V: I mean, it's something that is way better than nothing.

A: Exactly.

V: Dragging it out; planning it and planning it and planning it and still have nothing, it just didn't make sense.

A: Right. Okay. Were there any exemplary or model veterinary practice websites that influenced the look of your practice's website when you put it up?

V: I would say initially, no. Essentially, again, the client just basically took our brochure and put together a very brief website. So, I don't believe that there were any websites or anything actually reviewed or anything like that before she designed it, and just as far as design and our part of the process of design, we didn't necessarily review anything to give her feedback, just what we wanted to have essentially. Now, as I mentioned to you on the phone, we are in the process of completely redesigning our website, because we got a lot of information on the marketing side from practice management CDs. Basically, what the consumer's looking for, because there's been a huge shift from where people are getting their information from phonebooks and all that sort of thing where people used to get their information to it's all web now, it's all online. So we decided we needed to have more web presence and beef that up a little bit. What I'd like and what we're in the process of doing is actually creating a website that will actually be a tool for our clients so they'll actually be able to use it, look at their pet's records, that sort of thing.

A: Nice; oh that is great! Interaction, I like it.

V: Schedule appointments and request prescriptions and all that kind of stuff.



A: So you're going full Web 2.0 with it?

V: Right.

A: Awesome.

V: That's the intention anyway.

A: I love it when innovation actually happens.

V: [laughs]

A: That's actually part of my thesis, to have Web 2.0 in veterinary websites, because that's where it really needs to go.

V: Yes, definitely!

A: Okay, what is the most important point of having a website for the practice?

V: I would say the most important point is essentially to get the name out there, who we are and what we do. That's why we're redesigning, because what we currently have is nice looking, but it's very basic. It doesn't express any level of competency in what we offer, so that's what we're striving for, something that's a little more edgy and more obvious to the client as they look at it that we are a competent practice.

A: Who decided what content goes on the website?

V: Myself and the business owners; we actually have four practices.

A: Four practices?

V: Yeah, and then there's a primary doctor who owns the majority of four of the practices and then there's an associate who's kind of the lead doctor in each facility, that is actually a partner in the business, so those owners as a whole as well as myself decide what goes on the website. It's mostly me, but it's always run by them first.

A: Nice. Other than [Practice V], what are the others that the owners run?

V: We have [name redacted to keep anonymity] in Greeley.

A: Okay.

V: Also we have [name redacted to keep anonymity] in Lafayette, and then the original practice was the [name redacted to keep anonymity].

A: So this is the only one in Fort Collins.

V: Yes.

A: And I take it [name redacted to keep anonymity] is in Boulder.

V: Yeah, that practice was established in 1993. So it's been about 18 years.

A: Alright, so when you do the [Practice V] makeover, are you also going to be making over the other websites for those three as well?

V: What we're doing is creating a central site, and then each facility is going to be a micro-site linked in, and then they'll link back and forth. Again, what we're really pushing for is SEO, working toward search engine optimization. So, I spent a lot of time learning about SEO and how that integrates with web design. So what we are actually doing is going backwards, and we contracted a SEO guy that's building our website.

A: Okay, good.

V: So we're building our website for SEO instead of trying to optimize our current website.

A: That is excellent; I applaud you, sir.

[V and A laugh]

A: How often is the website updated?

V: Currently? Not that frequently. What we're doing, again, with the new site is there's actually going to be pages where we can constantly update, they'll actually have a blog, as well as staff and that sort of thing can be updated by someone within the practice. And we will be able to do all this without having to contact a web designer. Currently that's an issue; we contact the web designer with changes we want, and it takes a few months to get the stuff done, get in contact with her essentially, and then we get the changes made. So, infrequently it is updated.

A: Wow, I understand the infrequent updating. When I was at the clinic, I was the one who designed the website, because I knew HTML, and so whenever we had an update I could always just get on the computer once we set up a FTP set up, but it was still, the actual content? I wasn't in charge of that, the main doctor was, and that wasn't exactly a good thing because we updated too infrequently. If I had been in charge of online content, we would have updated a lot more, and we would have had more on there than just the basics.

V: And that's our thing, essentially what we're creating now, is one, it is going to be relatively basic, but there's going to be some capabilities for user functionality on the consumer side, as well as us being able to make changes that are necessary when we want to make them.

A: Awesome. You're giving me hope!

[V and A laugh]

A: What process went into deciding whether or not to use photographs with the veterinarians and staff mini-biographies?

V: As far as, like as content on the page, or individual photos with biographies?

A: Both, actually.

V: Okay. Originally, there was no thought as to who went where, essentially we just put pictures up. That was the original website. Now, the majority of the photos that are going to be on our site are going to be showing some level of competency, really focusing on the client-patient, the human-animal bond, focusing on that. Really enforcing our competency and compassion and care, so essentially as soon as you look at our website, you're going to be able to see who we are and what we do. So that's the plan, and then as far as staff photos, what we've done now is we're also throwing that little caveat of caring into it, so there are staff photos with their pets and they wrote their own bios, as far as what they wanted on them.

A: Very good. What process went into deciding against putting a price list for services on the site?

V: A what again?

A: A price list for services.

V: There is a very competitive market, especially in Fort Collins as far as pricing and that sort of thing, so if people just look at prices they're not going to call, they're not going to see what they get for those prices, where if you call in, you're going to get someone that's going to explain to you what is involved, what is included in those prices, and show you a level of customer service that we have, versus just showing you how much it will be.

A: Okay, I can see that.

V: If you're not creating that contact, you're likely not going to get, that human contact you're likely not getting that client. If they're just price shopping, they're going to be price shopping. Our practice, well, practices a very high level of animal medicine and we definitely spend the time with our clientele, we really focus on client education, and we realize that we aren't

necessarily the best for everyone. We're definitely at the level of caring for people whose pets are their children.

A: Yes, I understand that completely.

V: And so, we're not the people that it's just a dog, and it's going to be cheap and I want it as cheap as possible because I'm not gonna do a whole lot, you know, so that's another reason you don't want to put the price list out there. As well as the, the laws against it. I can't remember the name of it, but price sharing amongst veterinarians and businesses in general as far as creating monopolies. Because if you set the same prices or you start competing, there's a lot of ways that posting a price list can get you in trouble.

A: Really, I knew about that for human health care, but I didn't know it was the same for veterinarian health care.

V: It would also be illegal for us make a phone call to another practice and say "Hey this is [Practice V], I'm calling to see how much you charge for this."

A: Really, that's illegal here?

V: Yes, I'm pretty sure that's a federal law.

A: Okay, awesome. For some reason in my research, that law didn't come up.

V: So I'm sure that plays into that pricing and posting of price lists as well.

A: I knew there used to be, it used to be considered more of an ethical issue for that, but I can totally see the reasoning behind that.

V: Yep.

A: As far as client education material, what process went into selecting that?

V: Basically, we, because there's tons of materials out there [laughs]. One, we need to make sure that we agree with what it is portraying and we want to make sure that it's the best recommendation for the animal, we want to make sure it's a product that we're comfortable using, that we know works, that sort of thing. And then, we often times really focus on multi-modal learning, so things are comprehensive as far as colors and photographs and verbage and that sort of thing, and it's also explained. We really focus in our practice on repetitiveness, so that basically, people need to hear things three times before they actually hear them. And so, we really focus on that in our practices.

A: I remember the 'you have to say it three times, or they're not going to get it'.

V: At least, at least three times.

A: Especially for people who are like, oh yeah, I can put flea medication on my cat once during the summer and they'll be fine. No, no, no.

V: Exactly! [laughs]

A: Okay, let's see. I believe, the last time I looked at your site, I can't remember if you had embedded videos or not.

V: No, no we don't.

A: No? Alright, what process went into deciding whether or not to use embedded videos?

V: You know what? We never even considered it before. It is something that we may do in the future, but right now we aren't doing it either. I'm not sure that the consumer spends a lot of time looking at things on veterinary websites; I think they go there to get information and move on about their business. [laughs] So on the flip of this, I would be interested in seeing what consumers do have to say with your project.

A: Yeah, because I have seen some websites, veterinary websites that have embedded videos for things like 'this is how you clip your cat's nails' or 'this is how you realize that your dog's nails are too long and you need to have them clipped', that sort of a thing.

V: Sure, that makes sense.

A: What does the practice hope that the audience remembers after visiting the website?

V: Essentially, what I would want it to portray is that we're competent, compassionate, caring, all those things we want to get out there.

A: The three Cs.

V: Correct. I'm not sure, well I'm actually positive that our current site does not do that, and that's why we're redoing it.

A: By the way, when is your new website going to be up?

V: I'm hoping by the end of June.

A: Okay, awesome.

V: I'm hoping!

[both laugh]

A: Everybody hopes.

V: Mhm, well it's kinda the situation of us giving it a matter of time and the designer is on the other end with scheduling and stuff.

A: I totally understand. How is the success of the website measured in the practice? Do you see in client retention, draw, increase phone traffic?

V: I would say we definitely see, well, we do ask when we have new clients come in how they found us. The website is one of the options of course, and people have found us via our website, by Google or whatever search engine, again that's why we're trying to bump up our SEO. I wouldn't necessarily say that our website has anything to do with client retention, necessarily, but we also don't track how many people visit it or anything; there's not a lot of time spent on that.

A: Okay, let's see. I would like you to describe the perfect veterinary practice homepage. What vital material would be shown?

V: Up front, it should portray competency, first and foremost, so it should be attractive, there should be a photograph that is actually portraying some level of competency.

A: Such as?

V: A veterinarian and a client interacting with a pet or something like that, showing that little detail of bond or something. We're in the process of creating that, so [laughs]. Phone number, contact information, and how they're gonna find us, and primarily the ideal homepage should at least have those. The other thing, and this new mobile world makes it need to be visible on mobile devices.

A: Like smart phones.

V: Yes.

A: Okay. Anything else?

V: Well, a menu of other items listed on the side so you can get to resources, obviously.

A: Of course.

V: I believe that our new websites are going to have immediately, I don't know if the main site will but the micro-sites will have buttons immediately for making an appointment, filling a prescription.

[slight disruption from Practice V personnel to alert the manager that she was going to be cleaning a machine. Please note that for the rest of the interview, there is a fairly loud hissing noise intermittent]

V: And then, there are a couple other things. The main pages need to show immediate functionality. That noise is the dental machine, we need to release the air out of the compressor once we're done using it.

A: Ah, I understand, I used to deal with one of those too. Okay, last question. Where do you think all of this is going? Put in another way, what direction do you believe the website is headed?

V: Essentially, again, what we're doing now is creating a new tool. That's my main goal; I want it to be a user-friendly tool for our clients. I want it to be, well, as it is right now, it's a main focus of advertising, and that's where people are going to find you, they're going to see immediately who you are, what you do, so that's kind of an open door portrayal of 'if you can't come to my building, this is where I am and this is what we do'.

A: Right.

V: But primarily, I'd have to say one, an advertising tool and two, it's needs to be and it's going to be a functional tool for our clients to use.

A: For education and stuff like that.

V: Education, and then, again, scheduling appointments, filling prescriptions, stuff like that.

A: Yeah, excellent. Well, that is everything I wanted to ask you, so thank you very much!

V: Yeah, okay, not a problem.

A: And I hope you have a really good day.

V: Well, it's gorgeous out, so I might go home early. It's a holiday weekend, so everybody with animals has mostly left.

[Several sounds of maintenance emitted from the next room that were so loud they garbled a good 20 seconds worth of audio, but to be fair, V and A were discussing the weather, so the relevance of the dialogue is moot.]

A: So thank you very much again, and thank you for being my first interview, and I will keep you in contact with everything.

V: You're welcome; feel free to give me a call if you have any other questions or anything like that.

A: Okay, awesome; thank you very much.

[recorder is turned off]

F.2 (6, Interview #2)

A = Alice Malia Weaver, Interviewer

B = Practice Manager of Practice B

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**Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into recorder] This is Alice Weaver. Today is July 15th, 2011, and I am at Practice B. I am with the Practice Manager of Practice B. [speaking to B] Thank you very much for letting me interview you.

B: No problem.

A: Well, we already know you're the Practice Manager. I do need to get some quick demographics information from you before we begin the interview proper.

B: Alright.

A: Can I ask your age?

B: 30.

A: And you are female.

B: Yes. [laughs]

A: And what is the highest level of education that you have?

B: I have a bachelor's degree.

A: Bachelor of arts or science?

B: Science.

A: And what is that in?

B: Animal Science.

A: Nice! How many years have you been practice manager here?

B: Seven.

A: Seven years; that's impressive. Okay, demographics questions, check!

**Interview Questions:**

A: As you've already read in the consent form, my entire thesis is about veterinary practices and how they use websites. Am I correct in saying that you are in charge of the online content of this practice's website?

B: Yes.

A: Most of these questions are going to be about the website and how it came to be, and when you needed certain thing.

B: Okay, sounds good.

A: Alright, first question: Why does the practice have a website?

B: We utilize it a lot for marketing of course, online as people are doing it through their search engines, we come up on veterinarian lists for the area. The other reason we have a website is so that our clients have access to information, paperwork that they might need for when they come in for an appointment, recommendations that we have here at the practice, and also we do articles every month that are informative for our clients so they have access.

A: I read those; they were nice.

B: Yes! So a lot of it is just so we have information there for mainly our current clients. I'm working on another section that is for prospective clients, explaining our services, so that's another area too, so that we have an explanation of what we do here and who we are, basically.

A: Okay, awesome. When was it realized that the practice needed a website?

B: I think from day one. [laughs]

A: And just so I know, how long has the clinic been operating?

B: Today is our seven year anniversary.

A: Really? So you've been here since the beginning.

B: I've actually been here before we actually opened the doors for business, so it's July of 2004 that is our anniversary.

A: Well happy anniversary!

B: Thanks, I know, I just looked at the date today and went 'Wow, it's exactly seven years since we saw our first client here at this clinic!'

A: Oh, that's sweet.

B: Yep! So pretty much for the website, in fact Dr. [name withheld to uphold anonymity of practice], who is the owner knew before, it was always something we were going to have, for our practice to have a website with information.

A: Very good. How much time elapsed from the realization you needed a website and the actualization of having a website?

B: You know, I think it took us, I'm trying to think of when our website finally got off the ground. I think it took us a couple of years; I can't remember how long our website's been active. We had our domain name for long before we even started the website. So it was probably 2006, 2007 when it finally went up. And part of that is because as a new practice, it takes a long time to get things situated before you start in on a big project like a website.

A: I know how that is, I helped a practice get off the ground myself; I was main dish and bottle washer, I did everything; cleaning, holding animals if the other veterinary assistant was busy, all the office work.

B: Yeah! There's a lot going on when you first open.

A: Was the website created by a staff member, or was it contracted out to a website making company?

B: We have, well, a website making company, kind of; it's actually a client of ours that helped establish our computer system here in the practice. So he does all the content information; he'll give me input on what he wants, but a lot of the design and things is me. So, it's not contracted like, I know it's not very specific, here's my information, upload it into whatever you want to do, and that's not how ours is, it's here's exactly what I want, done for our website, this is what it should look like, and that's what he does.

A: Nice. And he's a client; does he get paid to do this, or does he do things in trade?

B: He gets paid to do it; we don't trade anything.

A: Was there any particular way this client was chosen as far as getting the contract? Was there anybody else as far as competition?

B: We looked at some other people, and looked at his availability to do things in the timeline that we needed, and so those are things that we looked at before we decided on him. It also helped that he knew our practice inside and out, because he was here setting things up before we even opened the doors, so he knew us. And I think a lot of it had to do with time constraints and if I send him stuff that I need done, he does it as soon as he can.

A: So he's nice and efficient.

B: Yes. [laughs]

A: Alright. Were there any exemplary or model veterinary practice websites that influenced the look of your practice's website?

B: Not in particular. You know, before I started our website, I looked at other practice websites to see what we didn't want it to look like [laughs]. Because there are ones out there that are you know, not great, but there are other websites that are fantastic. In fact, I'm uploading content stuff and I was just looking at Chappelle Animal Hospital has a beautiful website-

A: Yes they do.

B:-it's gorgeous! So they have a great one. Paws of the Rockies has a really nice website, Aspen Grove has a really nice website, so those ones. Our website, I looked at everybody else's, to see what everybody else was doing, and when you see those websites, you know how you would feel when you walked in the practice, and when you look at our website, that's what I want is that it looks like our practice, it feels like our practice and I think that that's what it does.

A: Nice! And I have to say I really love this color green on the walls, because it is almost the exact color green that the walls were in the practice I worked at.

B: Yes, well it's a very calming green. This is actually the only exam room that is this color; we're going to be updating and painting the exam rooms soon. So this green may be going to a different green, but everything is green and purple in the practice.

A: I have to say I like the color scheme. Okay, next question: what is the most important point of having a website for the practice?

[staff member comes in to deliver copies of consent form; quickly leaves]

B: The most important point of us having a website?

A: It can be from a personal or professional perspective, if you'd like.

B: Like, why?

A: It's a little bit more to the point than a why, it just, well, if you could name one specific thing that sort of gives purpose to your website, what would it be?

B: I think information, I guess. I don't know if that answers the question appropriately.

A: Information is always a good answer. I know, that question is a little bit-

B: -funky! [laughs]

A: I know, it's a little bit obtuse. Now, who decides what content goes on the website?

B: The majority of the time, it would be me, and then I usually have a meeting with our owner, Dr. [name withheld]. She is most of the time in charge of the client, the "Pet Care Tips" that are those once a month articles, because those need to be done by a veterinarian, but that's a discussion between her and I also, as to what goes on there. Most of the other content on there, I'm in charge of, and then I just touch base with her.

A: Okay, excellent. How often is the website updated?

B: Every month it gets something, every month it will have an updated article on there and then I check it, usually every month to see if we need to update or change things, and then of course as needed, because information is always changing, so you know, boarding facilities change requirements so we need to keep it updated on a regular basis.

A: And then of course, there's always the new products that are out, and the new things you can sell, and so there's always something.



B: Yeah, and also as staff changes, because we have a staff page on there and we need to update that and sometimes I lag behind it on that one, but we do our best.

A: And speaking of staff, what process went into deciding whether or not to use photographs with the veterinarian and staff mini-biographies?

B: Decision making, is that what you said?

A: Yes.

B: I don't really think we had a decision making process, it was just that I made the decision [laughs]. That that's what we were gonna have on there, because I know some clinics don't do their photo-bio and things like that together. We have always been at this practice, again it goes back to your website should feel how your practice feels, that our staff wants to be part of your family and that our clients want to be part of our family, so it goes back to that home feeling again.

A: There are quite a few questions as to the what kinds of decisions went into making stuff. The next one would be what process went into deciding against putting a price list for services on the website?

B: You know, I don't think we ever even have discussed that, I know that other practices will put pricing up on there, I think that Dr. [name withheld] and I's consensus is that your pricing can change on a regular basis, and again that we want people to call us or email us to get pricing information so we can give them and explanation of why it is what it is.

A: Be a little more personal, that sort of thing.

B: Yes, so it's not so cut and dried. And again, websites are great, the Internet is great, but our practice is built on contact with people and pets, so that gets them to call us or contact us.

A: Okay, awesome. As far as client education material, how do you go about selecting that?

B: Sometimes what it is is what have we been seeing a lot of in the clinic lately; right now, we're seeing a high prevalence of leptospirosis cases, so I wouldn't be surprised if we see Dr. [name withheld] writing an article about leptospirosis for the month of August. So sometimes the decision is what have we seen a lot of, or what have we been discussing a lot of, and do we need to do a bigger education on that? Other times it's new things that came out on the market that we want to educate people about, and then another part of that decision making process is there is of course something every month like there's Microchip Month, there's Technician Month, there's Dental Month, so we fall into one of those, sometimes we do articles to them.

A: Yes, the ever popular Fill-In-The-Blank Month.

B: Yeah, I know, and you can print a list off, and they have something for every month, and within those months, there's something for every week.

A: And there's something for every day [laughs].

B: Yeah, so lately it's been a lot more of what have we been seeing a lot of, what do we need to discuss. Microchips, we did an article on microchips because we had pets that were being lost and found by their microchips, and we had a couple of cases where they were found miles away. So those types of things influence those articles.

A: What process went into deciding whether or not to use embedded videos?

B: Right now, because we don't have videos on there, we have discussed putting them on there and I think the discussion that we've had with Dr. [name withheld] is that she wants people to

be able to visually, like, see a process from start to finish. So one of the videos that we are in the process of putting up would be like 'How to Pill Your Pet', 'How to Wash Your Dog's Ears Out', you know, some of those simple things that some people are like "I don't, I don't know how to do that! I don't know how to put ointment in my dog's eye, what are you trying to make me do?!" So again, because we are visual people here, and a lot of people are visual learners, is that we do want to have those on our website. So that was kind of our discussion in deciding.

A: Okay. I know that not a lot of people use videos, but I always thought that they could be a good tool.

B: Yeah!

A: Because I look at some of these websites that don't use videos, and they try to write out how to do a procedure, and I just think 'You could do this so much better if you just showed how to do it in a video.'

B: Exactly! For example, we just had a client call and ask how to trim his dog's nails over the phone, which we had shown him once, like three months before, and now he's gonna do it, and he forgot how to do it, and we're trying to explain like what a quick looks like, and please don't cut the quick, cut it this way, and we're trying to explain it and it's like 'I know you don't want to come into the clinic, but because I don't have somewhere to send you to visually see what it is, you're gonna have to come in for a visit so we can show you.' But if I had a video? I could just have him look at that.

A: I agree, but man, dog nails are tricky, especially if they're black. I mean, if you get the quick even a tiny bit, you need to break out the styptic sticks, or you'll have a bloody mess on your hands!

[B and A laugh]

B: Yep, just blood everywhere if you're not fast enough. But videos are great, and at some point, we'll have them on there.

A: Okay, let's see, since you don't have them on there yet, I can skip this next question. So the next question for you is: What does the practice hope that the audience remembers after visiting the website? And by audience, I mean both your clients and just random people who have found and are looking at your website.

B: That they learned something from it [laughs]. That they picked up, that they got some bit of information that they needed off of there.

A: Excellent. How is the success of the website measured in the practice? Do you pay attention to client retention, the draw of the website, increased phone traffic, that sort of thing?

B: You know right now, the main way we're gauging our website is if clients are coming in and telling us "Hey I found something useful on your website." And then the other way that we're able to track it is when we get new clients, noting how they found us and putting it into our computer so we can poll how people found us, and recently we've had a big jump just straight from the website; that's the reason they came to us, because they found us online and looked at our website and that's why they're coming here.

A: Impressive!

B: Yeah! So other than all that, I don't have any better tools to gauge it, but I kinda get an idea.

A: Well, that's all you can really do.

B: Yeah.

A: Let's see, now for a little something a bit more theoretical.

[B laughs]

A: Describe the perfect veterinary practice homepage; what vital material would be shown?

B: Okay.

[B and A laugh]

B: The perfect homepage? So, because I'm trying to think because I'm trying to update our website's homepage with all of it's tabs and things. Well on our homepage right now we have our mission statement, and I always think that that's a vital piece of information that you should have right off the bat so people know what you're about. Contact information, of course, and how to get to you. Your hours, all that normal stuff. Then the access to, wait, do you want tabs and everything?

A: Sure! You can describe as much as you like.

B: Tabs to paperwork, of course, that they might want to print off and do ahead of time, because it saves everybody time in the long run. I love it.

A: That's really clever, actually.

B: I love it, and more are practices are doing it to have your paperwork done ahead of time, to have your histories done ahead of time, it's fantastic, it cuts down on the client time in the clinic if they're in a hurry, so that's a big thing we have on our website. New client information, pet information, their history information, if they wanna do it ahead of time. Of course, client information and education, the pet care tips, the services, and I think detailed information is ideal. Because again, I've looked at other websites and they're like "yes, we do X-rays". Okay, great; do you do dental X-rays? Do you do digital radiography? Do you have all these other types of things? And clients are becoming more and more intelligent, they have the web, they can research anything and they know what you should have.

A: Yes, they know what you should have, and oh, there is lots and lots of judging if you don't.

[B and A laugh]

B: Yeah, and our clients are better educated than they have been, and they know what's out there, so you better be on the ball. So I think having that detailed service information on there is important. And then giving them access to recommendations, because we get requests for recommendations for kenneling, for grooming, for daycare, those types of things they always want to know. [Long pause] Trying to think of what else I've worked on with the website this week. [laugh] Because I've been looking at everybody's websites too. And then of course your team information, and that goes back to your clients wanting to know who you are, where you came from before you touch their pet.

A: Right, yeah, you can't really be an unknown entity if you're going to be handling their fur baby.

B: Their baby, right. So they always want to know who you are. I think that's all I can think of.

A: Yeah, that's pretty good. Let's see, you've said mission statement, contact info, hours, directions, and then tabs to access to paperwork, pet care tips, services, access to recommendations to kennel/grooming/daycare, and team info.

B: Yeah, I think that's most of what I have for our website.

A: And the button for your AAHA.

B: Yes, of course.

A: Okay, cool. Now, this is the last question. This is another slightly theoretical one. Where do you think all of this is going? Put in another way, what direction do you believe the website is headed?

B: I think [laughs] I have no idea where it's heading! I have no idea what it's doing. [laughs] But seriously, I think our website is going towards something where it's trying to ease things for our clients and make their lives easier. That's our goal, to be able to access information that they want on there, get paperwork that they want on there. Refilling medications if they want to on there, eventually. In some clinics, you're able to schedule your appointment yourself online if you want to.

A: That's interesting.

B: I know! I have no idea how that works, but I know that they can do that, or they can request specific times, and somebody contacts them back to schedule it, but there are some practices that are having the client scheduling their appointment, which is great because they can get up at midnight, which I have some clients who leave me phone messages at midnight, and if they want to do something at midnight, they can do it and I don't have to be open, the clinic doesn't have to be open to service you. So I think that's where the website is going, so that they have access to that information when you're not here, because we can't be here 24 hours a day.

A: Very good. Yeah, I've been looking into Web 2.0, which is the full interactive type of thing, and you have some of it with the access to paperwork type deal that you have, but there are websites where the paperwork is integrated into the website, and it's full of, it's basically boxes you fill in and then it's just saved to their server and it's all online and it's very interesting.

B: The way ours goes is that they can fill it out online if they choose to now, and it comes to us as an email to me, and I think there's other ways that are even better than that for your paperwork stuff online that can work in conjunction with whatever practice management software you have, and I'm like 'that would be awesome', because then I wouldn't have to copy and paste stuff; they just fill out stuff and then it's in there! [laughs]

A: That would be great.

B: Because that's the thing too with your website; you want to create less work for your client, but not create more work for your staff members too, because that's not what it's there for, it's to help everybody with stuff. But hopefully, someday.

A: Yeah. I do miss working in a veterinary clinic, but I don't know if I could be office manager again. That was a little too intense, even for the small clinic that I had, but it was fun and there was never a truly boring day.

B: Oh of course not, even when you think you're going to be, there's always something.

A: There's always something. There's always something that walks in 10 minutes before close, and it's always a dire situation, and so you'll get home about two hours later than you thought you would, but you did good work.

B: It's fulfilling; it's a fulfilling job.

A: Yep. Thank you very much!

B: Yes! Not a problem at all! I'm glad that I could help you out.

A: Of course, and you have helped me out.

B: Good! [laughs]

A: [speaking into recorder] So this is Alice Weaver, signing off.

[recording ends]

F.3 (6, Interview #3)

A = Alice Malia Weaver, Interviewer

J = Clinic Director of Practice J

Please Note: The background noise for this recording is the sound of three different dogs barking. Not all dogs bark at once all the time, but it is a constant noise in the background, due to the fact that the break room used to conduct the interview was next door to the dog kennel.

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### **Introduction/Demographics Section:**

[recorder is turned on]

A: [Spoken into recorder] This is Alice Weaver. It is September 9th, 2011. I am with Practice Code J and I am with the Clinic Director of the practice. [To J] As you read in the participation form, any question that you don't want to answer, you don't have to, that's perfectly fine, and for the ones you do want to answer, you can answer as completely as you want, and for as long as you want, but if you want to keep your answers short, that's fine too. I do have some demographics questions first, and first off the list, may I ask your age?

J: I am thirty-three.

A: Thirty-three. And you are female?

J: Yes. [laughs]

A: Okay. And earlier you said that you had a degree in journalism. Is that a Bachelor's Degree or a Master's?

J: Bachelor's.

A: Okay, and your official job title here is Clinic Director; is that your only title that you have?

J: I am also a co-owner.

A: Co-owner, alright, excellent. Let me write that down. And, let's see, how many years of experience do you have both as co-owner/clinic director and in the veterinary field total?

J: I've been the clinic director and co-owner since we purchased it in November of 2006. Prior to that, I have no experience in the veterinary medicine field.

A: Really? Awesome.

J: My degree is in journalism. I went to Texas A&M; I wanted to go into public relations, and at A&M, public relations is under the umbrella of journalism, so my background was in the corporate world and marketing and PR, so it's where I came from.

A: Okay, awesome. Yes, I saw the water bottles, because I was offered one and that is a wonderful little touch of marketing I have to say, because it's both marketing and positive reinforcement, and I love that, that is, that is very good. So, okay, demographics questions, check.

### **Interview Questions:**

A: Now for the actual interview questions. Some of these are very straight forward and some of them are kind of theoretical and philosophical in nature -

J: [giggles] Okay.

A: So we'll start off with the really easy ones. First of all, why does the clinic have a website?

J: Because it needs one. [laughs]

A: Simplest answer is always the best, isn't it? When was it realized that the practice needed a website?

J: As soon as we decided we were going to purchase the clinic.

A: Excellent. And how much time elapsed between the realization of needing a website and the actualization of having one up and operational?

J: It took a lot longer than expected, because I am very particular, I had an idea in my head about what I wanted, and what I wanted to incorporate, and finding a designer and a firm who could realize that and make it happen to the standard that I wanted was quite a difficult process. I went through, I can think of three different firms -

A: Wow.

J: -and the firm that we finally stuck with, we went through probably a dozen different designs.

A: Really?

J: Yeah, she was not getting, she was a very talented designer, she just wasn't, she was focusing 'cause our name is [name redacted to keep anonymity].

A: Oh, so she was focusing on trees instead of-

J: Yeah, she was focusing on trees! So she came over to my house, and we opened a bottle of wine and she brought her computer and we pounded it out.

A: Nice! About how long do you say that took you, from when you started to want the website to the time you had it up and running?

J: To the standard that I wanted, it probably took about a year.

A: Okay.

J: 'Cause you want, you say up and running, yes we had like a general website that was maybe one or two pages, when you say up and running, I assume you mean-

A: -To the standard that you wanted.

J: To the standard that I wanted, it had the full content, it was functional, it, yeah, it was probably about a year.

A: Nice. Okay, let's see. You said firm, so obviously the website was not created by a staff member. So it was contracted out to a website making company.

J: To, yes, it was. They did the design. Like the pet bios and stuff on there? That was one of the things I wanted to incorporate, that was something that people just weren't understanding what I was talking about when I said I wanted these little bios on there.

A: Yes, when it comes to veterinary websites, they are unique in the aspect of putting the pets up there right with the staff, so I get that. Let's see, and you already told me how the company was chosen, and let's see, were there any exemplary or model veterinary websites that influenced the look of your practice's website?

J: No.

A: No, you just knew exactly what you wanted and just went for it.

J: No, no, I'm a very outside the box person, and I want to know how other vet clinics are doing it, I don't want to be like every other vet clinic, I want to be my own.

A: And it shows, because your website is really, really nice.

J: Yeah, so I went out and I did, I knew I wanted to have the pictures of the animals with their little bios, I knew I wanted that, I knew I wanted it simple, clean, to the point, I knew what I wanted, and I went out and looked in other industries. I just looked for websites that I liked, I didn't care what industry it was.

A: Nice.

J: I mean, I went to other vet clinic websites, and then I told them I don't want paw prints, I don't it cliché, I don't want, this is what I don't want.

A: Excellent. Alright, what is the most important point of having a website for your practice?

J: The most important point of having a website. I'm not quite sure I understand.

A: It's one of those more philosophical questions where it's sort of like, if there was one point you wanted to get across to your clients, what would it be kind of thing.

J: Other than 'Come here'?

[both A and J laugh]

A: Yes.

J: Well, obviously, it's an informational website, you want to showcase the products and services. The problem that you get with veterinary practices, general veterinary practices is that all their services are generally the same. You can go to any vet clinic and get vaccinations, spay, neuter and dental, all that stuff, so what's important is to showcase how you're different, and one of the ways we're different is kind of our culture. We're very relaxed and laid back, loving, outside the box, and so we wanted to portray that in our website. So we do not have, it's a custom-built, we do not have a template website, which a lot of places do, we're very creative.

A: I totally love your waiting room, by the way, with all the, where you basically have your staff pictures and bios on the wall, that's amazing.

J: It's definitely, it's, yes, and that is actually quite an investment in time and energy and money to get that up there but people love it, clients love, they absolutely love it. We can't, 'cause at one point I wanted to take them down because it was costing us money, when we have staff turnover I have to have a photographer come in and get them printed, but no, can't do it.

A: Because it's so good; people know who your team is, they can tell them by name immediately, and they know exactly what they're about.

J: Yep. Well, and if somebody who comes up to help them who is not on the wall, people want to know why. Why aren't you on the wall? [laughs] Are you sure you work here? Yeah.

A: Awesome.

J: Yeah, so we want to be unique in every way.

A: Awesome. Obviously you're co-owner and clinic director, so I take it you are the one who ultimately decides what content goes on the website?

J: I guess technically, if you wanted to say that, yes. We have, we have a management team that's set up so I don't get to make all the decisions even though I'm one of the owners. But, people have to invest in where they work, they have to feel like their ideas matter, and they do, and I want people, I want their ideas, I want their creativity, so if they have ideas that I don't necessarily agree with, or think that they're great or whatever, I still feel it's important to run with it and see what happens. So if somebody has an idea of something that they want to put up there, it's gonna be the best, we're going to make sure it's done right, but, I mean, everybody gets input on everything that we do.

A: Good! That's really good!

J: I don't know if that answers your question or not.

A: That completely answers my question. Let's see, now the next couple of several questions go about decision-making processes that go into different content that gets on the website. So what

process went into deciding whether or not to use photos with the veterinary and staff mini-biographies?

J: What decision went into the what?

A: How did you decide to, whether or not to put pictures with your staff bios?

J: I don't [trails off]

A: Was it just like an automatic thing you did?

J: Yeah, there was no discussion. It was just something that you have to do, people want to know who they're gonna come see. And of course, you have to have your pet in there, it's a vet clinic cliché, they all do it, but yeah.

A: There is a definite connect where, you know, there is a different sort of thing that goes through people's heads when you see a veterinarian by themselves versus with their pet.

J: Yeah, you have to. There's certain things that you do have to do. I, the bios are short, very very short. Compared, if you go look at other people's, it goes into, I mean they're like pages, nobody reads that, in my opinion, it's too much.

A: So short and to the point.

J: Short and to the point, and obviously, we love animals. Everybody who works here loves animals, we wouldn't be in this industry if we didn't, so we wanted the bios to be something personal about them, not related to work, and if you read through that you can kinda see, you can get to know that person.

A: And I can do that just by seeing the pics and bios up on the wall.

J: Yeah. It's the same bio as on the website.

A: Same bio and picture, just bigger. [laughs]

J: Yeah, yeah, and they're written in a certain way, as well.

A: Okay, let's see...[trails off]

J: In fact, can I tell you a funny story? Dr. Bobby's bio, he, he loves, like, old cars. So I put on there that he was a classic car connoisseur, or something, I can't remember the adjective that I put on there. Everybody was talking to him, all these clients were talking to him about all these classic cars, like, in-depth you know, and he made me take it off because he didn't have enough, he couldn't converse intelligently with them. [A giggles, J laughs] About autos, about these cars, he's like, people have to stop asking me questions, because I don't know! He's just like, you have to take that off, I can't, so we had to change his bio. And to make sure when people come in I have to tell them, make sure that you can talk to people about the things we put on there, it can't just be oh I wish I did something because people will talk to you about stuff that's on there.

A: That is great.

J: And they will ask you questions.

A: Nice! What process went into deciding against putting a price list for services on the website?

J: They change.

A: They change.

J: There's certain things that we do put prices on there. We just started dog training, and so our prices for dog training are on there, and that was a very long discussion that we had on whether or not we were going to put them up there, but we felt like they were competitive enough that people want to know.

A: Yeah.



J: They're really good prices for what you get, so we did put those up there, and those are price-shopped a lot.

A: Nice.

J: So daycare is up there, that's price shopped a lot. And, what else is there? Boarding, as well.

A: Okay, awesome. And you spoke about change, so about how often is the website updated?

J: Constantly. You have to update it constantly. You can't, it has to do with the optimization, the search engine optimization. Google doesn't like it when you go stagnant.

A: Yeah.

J: So that hurts your search rankings, if it's stagnant, so it's constantly updated.

A: So, every couple of days, once a week, or just every day?

J: Well, not every day. At minimum, once a week. I'm on the website almost every day, looking to see what's up there. Yeah, at least change something once a week.

A: Nice!

J: Yeah, it's not, it's alive, you have to keep it alive if it's gonna work for you.

A: I love these answers, honestly. [J laughs] I love these answers, because you get it, you understand.

J: Yes. It's because I'm not from the veterinary field, it's my background.

A: Yeah, more power to the public communication and technology people

J: [laughs] Yes, brevity is the key to communication, people don't understand that.

A: As far as client education material, what process went into selecting that?

J: You know, I don't think, I don't think we're done with that process, that process is never over. We started out with, we have to get the basics up there, things that are price-shopped, things that people know they want, the preventative care, spays, neuters, all that kind of stuff. And then we just delved deeper into let's get more in-depth into dentals, so you just start out with the basics and then you keep going deeper. And we do, when we have our management meetings, Bobby and then everybody is trained to let me know, I want to know questions people ask us repeatedly. You know, when you're in the room, talking to people, what's the questions that you hear over and over again, we need to address these on the website, we need to write an article, we need to put it on Facebook, something needs to happen with that. So it's constant, constant never-ending.

A: Awesome. Let's see. As far as the use of embedded videos, what process went into deciding whether or not to use them?

J: We don't have, oh, well, I guess we do have, we've been on the news a couple times, so obviously when CBS or somebody comes and does a story on us we're putting that on the website.

A: Of course, it's awesome publicity.

J: Yeah. We have not, I want to do more videos, specific to the clinic. Time and cost are an issue; I don't have the time to do it right. I don't want it done, I'm not going to do anything half-way.

A: Right.

J: If it's not going to be perfect, I'm not gonna do it.

A: Yeah, no amateur hour on your website.

J: Yeah, absolutely! So, I haven't figured out a way, 'cause I want the staff in there, it can not be centered on the doctor. A doctor-centered practice is a very bad management decision, it's not a

good business model, you have to have your team involved. But then that puts a life on the video as well, because you don't want a video up there that has outdated staff members. So, it's, we don't have a lot of turnover, but we do have it so I don't, I don't want to invest thousands of dollars into a video, and then, you know, in a year or two or whatever it's outdated.

A: Okay, I can see that.

J: So we're trying to, we've talked to a couple different firms on, okay, let's just do some, like, flip videos, that we don't have to produce, we can just have the intro and exit produced professionally and then we just put the middle in, so that takes a lot of time.

A: Yeah. Although, because I work, or well, not work, but because I'm still at CSU, I do know a couple people in my department who do documentary work. So I know how hour-intensive that is when you start editing.

J: It's like an hour per 30 seconds or per minute or something, yeah, it's very labour intensive.

A: Yeah. Okay, what does the practice hope the audience, oh I guess I kinda covered this already, but what does the practice hope that the audience remembers after visiting the website?

J: I want them to remember us as unique and special, someplace that they want to be.

A: That's very nice.

J: Yeah, it's the impression of the overall site, whether or not they remember exactly, here's our philosophy on dentals, here's what we say about this, you know, the specific content, yes it's good, it's necessary, all that stuff, but I want the overall impression to be left is the most important.

A: Good. [a louder and more numerous group of dogs starts barking furiously in the background] Ooh, somebody's riled.

J: Boarding. [A and J laugh]

A: Let's see. How is the success of the website measured in the practice? Do you go by client retention, draw, increased phone traffic, that sort of thing?

J: Yes.

A: To all of it?

J: Yes. [A and J laugh] Yeah, we obviously track where people come from. We want to know, you know, were they referrals, did they come from the website. I do track the Google analytics, so we actually track where they are on the website, what page they enter, what page they exit, where they go through the website. And then, you know, like, boarding, 80% of our traffic comes to the website for boarding. So we are in the process of optimizing for the veterinary side, because I want more traffic for the veterinary side. So we look at it, what pages are they going to for the boarding, and I want links somehow on those pages, we're gonna link them so they go further into the site, so that kinda, and like I said, it's alive, you have to track it.

A: It's so good to have this conversation. You're giving me hope! [J laughs]

A: Okay, let's see, now the last two are kind of philosophical in nature. Describe the perfect veterinary practice homepage. What vital material would be shown?

J: On the homepage?

A: On just the homepage.

J: Wow. Well, you have to have your logo. You have to have your phone number. It has to be visually appealing. It has to, it has to hit the emotions, whatever that is, cute, aaw. It has to make them go deeper into the site, it has, looks matter, it can't be boring. We accomplished that

through, you know, the collage of pictures. It has to have, I think it's important to have something that changes, something that's current on it, such as a 'What's Happening', something you can change on a daily basis that says, 'Yes, we pay attention to this site, the information is current', that sort of stuff.

A: Look at what happened in the news today for the veterinary world, that sort of thing.

J: Yes, yeah. I, obviously the navigation, you have to have the different headings, all that kind of stuff, but I think the mistake that a lot of people make is they kinda throw up on the homepage.

A: Thank you for saying that. [J laughs] Thank you for saying that so much.

J: Because it's true! It makes it too, it makes it too hard.

A: Oh, that is great. Okay.

J: I think the most important thing is to have it neat, clean and visually appealing. Obviously, the phone number, the logo, address, that's essential to have on every page.

A: Right, excellent.

A: And now for the last question. Where do you think this is all going? Put another way, what direction do you believe the website is headed?

J: It's going to be our main form of communication with existing and potential clients. We are in the process, I'm not renewing any of our Yellow Page ads, we'll get the free listing and that's it. So we're relying heavily, 'cause that's how people are getting their information. It's, it's vital, it's going to be your soul resource.

A: Yeah.

J: That's how people gather. All information is going through the internet.

A: I do so love the internet.

J: Yeah, yeah, and you have to be careful. I mean, you need to know, you have to understand how to market it, you have to understand what your, what your uplinks are, you have to go register with all the different search engines and, I mean, it's not just your website, it's how you market and optimize that website and how you utilize it. It's not enough just to have one.

A: Right. Awesome! Well, that was my last question.

J: Okay!

A: And I want to thank you again for helping with this.

J: You're very welcome!

A: And let me, let you make a copy of this [referring to consent form].

J: Do I need a copy of that?

A: If you don't want one, that's fine, I can give you my business card and my contact information is on there. 'Cause I do like to leave my contact information with people, even if they don't take a copy.

J: Yeah, that would be fine. I've got so much paper that I have to hang onto.

A: Okay. And let me just write down my professor's information on here, on the back so that you have his contact too. But I just wanted to thank you very much, again. [spoken directly into recorder] And this is Alice Weaver, signing off.

[recording ends]

F.4 (6, Interview #4)

A = Alice Malia Weaver, Interviewer

O = Practice Manager of Practice O

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**Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into recorder] This is Alice Weaver; it is September 29, 2011. I am with the Practice Manager of Practice code O. {To O} And I would like to thank you very much for participating in my thesis. As you read from this [indicating consent form], I'm just trying to get a sense of where everybody's coming from, when it comes to the creation and maintenance of their websites. So, of course, any question you do not feel the need to answer, you don't have to, and any question you do answer you can answer as little or as much as you like. Okay?

O: Okay.

A: First I have some demographics questions for you. If I may ask your age?

O: 45.

A: You don't look it.

O: You're so kind.

A: And you are female, correct?

O: Yes ma'am.

A: Okay, and what is the level of education that you have completed?

O: Bachelor's.

A: Bachelor's Degree. Was it in the veterinary field?

O: No ma'am.

A: Was it a Bachelor of Science or Arts?

O: Psychology.

A: Ooh, very nice! That's very impressive. And your job title here, as I've seen from your awesome name tag is Practice Manager?

O: Yes ma'am.

A: Are there any additional titles you have here?

O: Well, ultimately Practice Management, Practice Manager is hoped to be indicative of all-inclusive. I was a technician here for many years before I took on all the administrative, as well as anything else that needed doing.

A: Yeah.

O: Essentially, my position is anything that does not require the letters DVM behind it.

A: Awesome.

O: Anything else is me.

A: And you said you started out as a technician, so I'm going to ask: how many years of experience do you have as Practice Manager, and then as in the veterinary field total?

O: I've been here 17 years.

A: Wow.

O: And managed for, I guess 14 of those 17.

A: That's impressive, good for you! That's really awesome. Now that the demographics questions are done, and thank you for those.

**Interview Questions:**

A: Some of the interview questions are very straightforward, some are a little bit more philosophical in nature; for the ones more philosophical in nature, of course you can ask for clarification, 'cause sometimes they're a little out there. First of all, why does the practice have a website?

O: Because we wanted to be sure that we had an online presence.

A: Okay. When was it realized that the practice needed a website?

O: Well, it was needed, it was realized that the practice needed a website before [the answer is interrupted by Buddy, one of the office pets and the only dog] oh! Buddy, come here, Buddy, out!

A: Hi Buddy!

O: Buddy [snaps fingers] Buddy out. Buddy come here. [repeated several times, for about 30 seconds. Buddy whines and as memory serves, sits down on the other side of the room from the door, suddenly enamored with a (thankfully non-squeaky) chew toy]

A: I don't mind if he stays.

O: All right. [to Buddy] But if you stay, then you need to lay down. Stay. [To A] As I was saying, it was realized that the webs, that the practice was gonna need a website actually before we realized that we needed a website. And by that I mean our practice owner's husband, is in himself, a bit of a techno-geek, and long before we ever thought that we would ever care about or want a website, he was on board with the idea that he wanted to have one, and said 'No no, you girls will need one, trust me, you will'. So he recognized we needed a website just based on his foreseeing what the future was going to be holding with respect to internet usage long before we got on board with it. So we had a website, we owned the domain for [name redacted to keep anonymity] long before-

A: Before you had the website.

O: -we actually had everything put together. Right. So I guess I have to say we had a website before we believed we needed one.

A: Okay.

O: If that makes sense.

A: I get it. So how much time elapsed between the realization of needing a website and the actualization of having one up and running?

O: Probably, I would guess a couple of years.

A: Okay.

O: That was a long time ago, because our website has been established for, I don't know, maybe, maybe 12 years? Ten or 12 years, like, we've had it for a long time.

A: Nice.

O: And honestly, I don't really recall when we actually got it up and running, but I do vividly recall the conversations where we thought that he was out of his mind and we were never going to want that, and then realizing 'Oh look! Really, this is the way it is really all moving, so I guess we do want one.'

A: Okay, excellent. Was the website created by a staff member, or was it contracted out to a website making company?

O: Both.

A: Both?

O: We had a staff member directly involved, and a client who does, or did at the time, website design and maintenance, and so she helped us put it together, and taught the gal who maintains it the basics of what to do.

A: And for the client, did you contract her, or did she do it in trade?

O: I don't remember.

A: That's okay.

O: I honestly don't remember. I think that we talked about both, but I don't recall whether there were ramifications one way or the other, we may have decided to just write her a check.

A: Okay.

O: But I honestly, I don't remember.

A: It's okay; if you think you wrote her a check, that's fine. It's just that, from the other interviews that I've done, it go one way or the other, so yeah.

O: It seems to me that we had the conversation both ways, but I have this idea that, in addition to him being a bit of a techno-guy, our practice owner's husband is also a MBA, and fairly well-versed in tax and business financial...

A: He's a numbers guy.

O: He's a, exactly! And he may very well have said 'No, I don't want you to do the trade, I'd rather that you just write a check so it's all documented out and categorized appropriately.

A: Oh yeah. That sounds right.

O: And I don't remember whether, I remember we had the conversation both way but I don't recall which way the chips fell.

A: Okay, well, let's see. The next question that goes off of that is if the website was contracted out, how was the company chosen, but because it was a client, did she offer her services to you, or did you ask around your client base for help with the website?

O: You know, it so happens that with our client base, we're fairly intimately familiar with most of clients in some way, shape or form anyway. We'd known her for very many, for a long time, so we knew what she did. I suspect that we said to her 'We're ready to do this now, would you like to help us?'

A: Okay.

O: Again, it was long enough ago, I don't really recall exactly how that came down, but I can't imagine that she would have solicited us. It would have, it more would have been us saying 'We're ready to do this.'

A: Okay, excellent. Because your website is, was pretty well established before most others, I still have to ask, were there any exemplary or model veterinary practice websites, or websites in general that influenced the look of your practice's website?

O: Yes, but more in functionality than anything else, and that was directly guided, we were directly guided through that process by the gal who helped us implement the site itself.

A: Okay.

O: So it wasn't specifically a look that she was trying to emulate but there was a whole laundry list of things that she didn't want us to do. She felt strongly about making sure that buttons were, all key buttons were on the first page and easily accessible, and ones that we wanted to know about most were the ones that eyes were drawn to directly. And having things be listed to the left as opposed to the right and a lot of those things that she felt strongly about back then, probably don't have nearly as much relevance now because people are much more web-savvy

than they were then, and so the priority back then was to make it as easy to negotiate as possible, and keeping it fairly basic. And I, and we're actually in the process now of redoing and revamping so that we're more modern than, now we look terribly antiquated next to most of our counterparts, and it's because we haven't really done a whole lot to change the basic structure was from those early years.

A: Well, a lot of the basics still hold true today. You still want things that are easy to find, you still want things that are easy to get to, and you don't really, sometimes simple is a good thing, so that, you know, people don't get too lost in the visual shuffle. But for the most part, you're not the only people going through the modernization change, either.

O: Well, you look at the sites that are out there for other hospitals, and there's a lot more splash, a lot more -

A: Color, and pictures

O: - visual stimulation, and appeal than what we, and yeah now that you can incorporate Flash and moving pictures and, you know, all sorts of fancy things, we, you know, you pull us up and you go 'Wow, really?'. And I'm sure that you've checked out our website, and you're familiar with what I'm talking about.

A: Yeah, yes.

O: So I certainly can't name any of the websites that she was emulating, but she had very strong opinions about how it ought to be.

A: Okay, awesome. What is the most important point of having the website for you?

O: Well, the most important part, the most important point of having the website is so we have the presence that when people are searching, we show up.

A: Okay.

O: But second to that, would be that they can get the information that they care about when they get there. What animals do we treat? Do we have any specialties? Are our, who are our doctors? Who are the staff? Are the doctors male for female? The basic information about the practice that your average person looking for a new veterinarian would want to know before they would even bother calling. So having that basic information conveyed about who we are and what our philosophy is. [Referring to Buddy, who had come up to A for pets] He's pathetic.

A: He's adorable.

O: He's completely pathetic, and he won't actually, he will stay there until you tell him 'All Done'. The words 'All Done' and 'Go Lay Down' are your friends, because he will do that, but not until you've told him that he can't sit there anymore.

A: [To Buddy] Oh, you even have good breath.

O: Oh I would not agree [both A and O laugh], I would not agree.

A: Considering the kinds of dogs that I've come in contact with recently, yeah he's got good doggy breath. Such a good Buddy! [Buddy leaves A to circle table to get pets from O]

O: Uh-uh. All done. Go lay down. Hurry up. [A giggles] Good boy.

A: He's adorable. Let's see, who decides what goes on the website? Obviously, you have a large say in what goes on, but do you get input from other people in the clinic as well?

O: Well, in the original decision making for what would go on the website, it was the practice owner and myself, and the gal who was trained on how to create it, that made the original decisions for 'these are the basic things that we would like to have on there'. And I guess, the reality is we haven't strayed a lot from what those original decisions were, so new content

would go up, but it's all within the established framework that was originally determined. If there were something that, that she wanted to put up that fell outside what that established framework was, she would come to either myself or Dr. [name redacted to keep anonymity], or both of us, I would imagine.

A: Okay.

O: But it's also true that she's only reasonably comfortable with manipulating what's there, because she learned the basics of how to manage the website and doesn't really have much of the know-how to be able to do a lot of change, which is one of the reasons why we're revamping and heading into a different direction.

A: So, like, she knows basic HTML, or some frames?

O: She knows 'if I push this button and this button and this button, it will make this picture show up and then I can save it to the website'.

A: Ah, gotcha.

O: Or 'I can put this document up by hitting this, this and this; I can create a link to go to this document'. But she only knows the very specific details of how to do the individual tasks, but not the terminology you just put out.

A: So individual tasks, not actual creation.

O: Yeah, if you say HTML to her, the hair on the back of her neck stands up and she doesn't, she immediately says 'I'm not really sure what you're talking about'. She knows how to hit the buttons to make it so that what we already know how to do happens.

A: Ah, okay.

O: Which is why the website has not evolved any further than what it is. But again, we're in the process, as we speak we're in the process of rebuilding a new website that will, when it's all finished, all of this will...

A: Replace the current website.

O: Yeah. And the person, the idea here is the person who will be in charge of it from this point forward will be a little more tech-savvy and a little more comfortable in that realm than the gal who was originally working with it.

A: Okay, awesome. How often is the website updated?

O: Once every one to two months, probably.

A: Okay.

O: That may be a generous estimate. But again, the hope is to have someone who is more comfortable. I don't know how that fits with your study, since your study is what's existing as opposed to what the intention is.

A: I'm also interested in intentions if people are revamping their website.

O: So, you know, the hope is that once we have the new website put together, the biggest reason it doesn't get updated any more frequently than it does is because we don't really know how to do much. You know, there's only so many pictures that are worth replacing that often, or the bios are our bios and what they are is what they are, and yes, should they have picture attached to them and they don't yet?

A: Yes.

O: And you know, they're those little things, but in the big picture, once we have someone who's more comfortable with the ins-and-outs and how to make all that happen, then I would hope that the website will be, will be maintained in a more frequent basis, maybe even have that



being a once a week thing, because someone will be at an upstairs desk and be able to mess with that more frequently.

A: Okay, good plan. And since you did talk about the bios and photographs, when you first conceived of the whole staff and bios page sort of deal, did you originally want pictures with that?

O: No.

A: No?

O: No, it was emphatically no.

A: Really?

O: That was, that's the reason why there are no pictures there, but you need to understand that when our website went up, 10 or 12 years ago, whenever that was? Long before the advent of Facebook; long before email was proliferative, and the idea of having a headshot or a photo of me or of the people that you worked with actually online? Freaked everybody out. Nobody underneath the building wanted their name associated with their picture on the web for people to be able to, for, for creepy stalkers to be able to access and have issues with, and people felt, the staff specifically felt really strongly about it in the early days. So the bios went up with just a name associated with them. And now, of course, it's commonplace, and everyone has 500 pictures of themselves posted.

A: That, and over a decade ago, the time it would take to load a page that was full of pictures, was immense.

O: Right, right. There is also that, but that really isn't the reason why we didn't do it. We didn't do it because the people who worked here were completely freaked out by the idea of having their pictures online. In the same way that some people are really, adamantly opposed to having, say, their last name written on a name tag that people see frequently, people didn't want someone to be able to come through the door and then walk out and have a means of finding out anything about them personally, outside the scope of their work life. And the people that were here, at least in that point of time, felt very strongly about that.

A: Okay.

O: And, and there came a point in time where we recognized that that had all shifted, and we felt differently about it, and now for several years we've talked about the need to get head-shots out there and we'd like to have a picture of everyone with their furry families up to go with their bios, especially the doctors, but not just the doctors, I mean we would like to have the entire staff visible to the people who are looking at us online, and that's a complete 180 from where it had started.

A: Yeah, okay. The next couple of questions also talk about decision making processes. Let's see, what process went into deciding against putting up a price list for services on the website?

O: You know, I'm not sure that I would say there's any sort of a process that was involved in deciding against it; I don't know that we ever even considered it.

A: Okay.

O: Given that there is, there's an actual law regarding price setting, it's unspoken in this industry that, that you can't, that you can't try to cluster yourself overtly anyway. Now the reality is from clinic to clinic to clinic, most everybody has a pretty good idea of what everybody else is charging, and where they stand within all of that, but that's all, again, not something that's at all formalized.

A: Right, your prices are your prices.

O: And people do them all very differently too. I think that on the one hand, you could argue that it would be useful to have your prices on the website, so that people would know immediately what they're getting into before they ever come, but it's also true because of the way vet medicine is set up price structures vary vastly from place to place to place. You know, people charging for each individual line-item for things in a surgical procedure versus bundling everything together and calling it one procedure. Or people charging more for their, for their examination and not very much for their vaccinations, or charging not very much for their examination but charging much more for their vaccinations, and what goes in combination with what. Maybe they just charge for a distemper and they don't even include something that says exam in there, they just charge 56 dollars for their distemper, and it includes, it includes an annual exam, or whatever, you know I'm just saying, you know, here we charge for a physical exam, and we charge a nominal amount for the vaccination that goes in combination with an exam, but you would never just get just a vaccination; you can't get an annual vaccination without getting a comprehensive physical exam.

A: Exactly.

O: And it's because our pricing structure is set up that way, and that way you don't get charged for a whole other examination fee if you get a vaccination at the same time as a different procedure. It depends on how you're set up, so you know, it wouldn't do you any good to put your price listing online, unless you could actually explain what that entails and what that means.

A: Exactly. And, yeah, I totally get where you're coming from 'cause we had, when I used to be in Michigan, that's where I come from, before I came to grad school, I worked as an office manager at very small veterinary clinic. And we were in competition with all the other very small, and sometimes a couple very big veterinary clinics, and we all basically had the same services, but we all called it different things, and we all bundled it differently, so there was no real way for there to be any, like, pricing comparisons.

O: It's not apples to apples.

A: Yeah.

O: Or at least, it's not apples to apples without someone being savvy enough to know what questions to ask, and the same holds true here. You can call up and ask how much it'll cost to have a dental done, and some people will say 'It's 75 dollars for the dental', but they're not including the fact that there needs to be general anesthesia that needs to go with that dentistry, and that is a different price, you asked me what a dental cost, the dental costs 75 dollars, but the general anesthesia may cost 200. But then when you call someplace else, they may say that their dentistry runs between 200 and 400 dollars for a basic dentistry, and then there's the big gasp and the 'What do you mean, the guy down the street is doing dentals for 75 dollars'. Okay, but you didn't find out what all was included there. And, you know, I mean it's, there's too much variable associated with it.

A: I understand. Let's see, as far as client education material, what process went into selecting that?

O: As we came across topics that we decided we wanted in-house handouts on, as we, as we refined those in-house handouts, some of them we ended up putting onto the web. As they became timely, I remember when we finished our first heartworm handout, that was when the heartworm information went up on the website. That sort of thing.

A: Okay, awesome. I know that right now you don't really have any embedded videos, but for your future site, are you thinking of using them?

O: I don't know, it depends on how user friendly and how comfortable the gal we have working on it now becomes, is and becomes. I think that at this point, the possibilities are sort of endless out there for what you can do with your site. I mean, now that people are comfortable with surfing the web, they're far more comfortable with getting further and further inside a website to get to different places that they're interested in seeing, and you can still have the basic information that is important that people care about immediately readily available but for those people who want more, you could have infinite possibility for what you could do in there, and you could link to, you know, you could embed videos, or have links to, I mean the possibilities are sort of limitless. How much money am I going to agree to put into that, and paying someone to put in more than will be regularly used by most clients who are just looking for a veterinarian in their area? It remains to be seen; it just depends on how easy it is.

A: Okay.

O: I'm still of the mindset that while it's important, and I want to have a strong online presence, and I feel like that will only become more important, I'm certainly not in the place where I feel like I'm going to spend multiple thousands of dollars a month in maintenance and upkeep to have that happen, if that makes sense.

A: Okay. That makes perfect sense. Let's see, what the practice hope the audience remembers after visiting the website?

O: We hope that the audience remembers or walks away from the website with a feeling that, a feeling of warmth, and welcome. Particularly in a town like Fort Collins, that's as veterinary saturated as it is, and with the teaching hospital local, you're hard-pressed to find a practice in Fort Collins that is not practicing quality medicine. There are a few of them out there, but really, for the most part, the vast majority of the practices that you'll find here are practicing quality medicine and quality care. So if there's something you're gonna do to be different or stand out, you would be smart to have your emphasis not strictly be on quality medicine and quality care, because you can get that most places. And the vision here, quite specifically, was to make people feel as comfortable and as at ease as they could feel, because this is often a stressful experience, and our founding doctor's vision, quite specifically, was that she wanted people to feel more like they were coming to a friend's house than going to the sterile environment of the poke-poke, prod-prod, out the front door experiences that she had experienced with her own animals prior to becoming a vet. She wanted it to be a more personal experience, and in the early days when we were small, it was very personal, because we knew everyone and that was something that we were very good at. And now, inherently you lose some of that as you get larger; I no longer know everyone that walks through the front door when they walk through the front door, but I'll treat everyone the way that, I'll, I'll treat everyone as though I do, so we've tried very hard to maintain that feel, even though we don't know everyone. And there are still, we still know quite a number of, I mean, we know quite a number of people very well. And some of those people have been with us for all the years that I've been here too. You know, for some of those people, we're on round three of animals that started as babies and got old and went the way that all old animals do, and you know, that's happened twice over and now we're on the third set.

A: Yep.

O: You know, it's been a long time; it's an honor.

A: Yeah, I really like it when you can get that sort of sense of, not just friends, but family that goes on, because really, they're our fur-children. [O laughs] And we really have to get that sense of belonging when it comes to taking somebody to, to trust them with your little furry children.

O: Right.

A: Yeah, I totally get that. How is the success of the website measured in the practice? Do you look for client retention, draw, increased phone traffic, all of the above?

O: Really the only tracking that we have right now, that we pay any attention to is referral information with new clients.

A: Nice.

O: How did you hear about us. The vast majority of our business comes from word-of-mouth referral, as tracked by that determining factor with new clients. But the next highest, the next two highest new client came from indicators are drive-by, seeing the practice, seeing the sign, because we have a highly visible and attractive appearance from the street.

A: Yes you do.

O: After that it's finding us on the web.

A: Okay. The last two questions are more philosophical in nature and sort of theoretical. Describe the perfect veterinary practice homepage. What vital material would be shown?

O: In my mind, particularly for this practice, but maybe not so for all practices, the perfect homepage has a really beautiful, lovely photograph of our locale and the building, because it's an attractive building in an attractive place, and the drive-by recognition is significant. But it also contains pictures of animals appearing comfortable and at ease and happy here, to draw the correlation between the practice and the pets. It also has all the pertinent information about the hospital, things like small animal hospital, address, easily contact us, staff, doctors, specialties, all of those links easily available right there at the front page, which takes you directly into bio information and more specialized information about the practice.

A: Awesome. Last question. Where do you think all this is going? Put another way, what direction do you believe the website is headed?

O: I believe the website will ultimately be headed towards the direction of having equal weight, or perhaps outweighing phonebook presence, and will at some point become probably the main point of advertising for the hospital. And in that, I guess it's important to note that for this particular hospital, our philosophy is that in general we don't advertise. So the only advertisement that we have with any sort of consistency is our Yellow Pages ad, which over the years has gotten consistently smaller, as opposed to larger. So given that we're a practice that doesn't advertise elsewhere, pouring that into website design and maintenance and search engine drive -

A: optimization?

O: Yes, that will eventually probably replace phonebook presence, I would guess.

A: Okay, awesome. Well, that is all of my questions, and I would like to thank you again for agreeing to be interviewed.

O: You're welcome.

A: It is going to help me out a lot.

O: Sure, no worries.

A: And did you want to make a copy of this for your records [referring to consent form]?

O: Yep, I will pop a copy of that.

A: Alright, excellent. And I also wanted to thank you for introducing me to your wonderful animals here [indicating not only Buddy, but the two cats in attendance in the room].

O: [laughs] Yeah, it occurred to me as we got up here that I hadn't asked if you were allergic; this is a bad place to be if you're allergic.

A: No, no, no; I've worked in a veterinary setting before, and before the veterinary clinic, I actually worked at the humane society that was near my place. So I am not allergic by any means.

O: Good deal.

A: Alright. [Into recorder] This is Alice Weaver, signing off.

[recording ends]

F.5 (6, Interview #5)

A = Alice Malia Weaver, Interviewer

H = Practice Manager/Head Technician of Practice H

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### **Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into recorder] This is Alice Weaver; it is October 24, 2011. I am with the Practice Manager of Practice code H. [To H] Thank you very much for agreeing to be interviewed; it helps me out a lot with my thesis. As you read in the consent form, I'm just going to ask you a series of questions. You can answer any questions you want. Any questions you don't know, you can just say 'I don't know', it's cool. If you don't want to answer a question at all, that's fine too, no pressure. However, for the questions that you do want to answer, you can answer as much as you would like. First I have some demographics questions.

H: Mmhmm.

A: If I may ask your age?

H: 46. Just turned 46.

A: You do not look it at all.

H: Thank you.

A: And you're female.

H: Yes. Wait, [giggles] yes.

A: And if I may ask your highest education level that you completed?

H: Tech school.

A: Tech school. I'm going to assume it's veterinary tech school?

H: Yes.

A: And your title here is Practice Manager?

H: Head Technician and Practice Manager. Get 'em both, I work it.

A: Okay, Head Technician and Practice Manager. Awesome. And how many, how long have you been Head Technician and Practice Manager?

H: Probably four years; been here five. About four years.

A: And you've been at the practice five?

H: Mmhmm.

A: And how many years total do you have in the veterinary industry?

H: Ten.

A: Ten? Awesome.

H: Went to school late.

A: I don't really believe there is such a thing as going to school late.

H: True; I had kids and then went back to school.

A: Okay, so demographics questions, check!

### **Interview Questions:**

A: The rest of these interview questions, some of them are going to be straightforward, some are going to be a little bit more philosophical in nature, so we'll start off with the easy ones first.

H: Okay.

A: Why does the practice have a website?

H: God, we're terrible on this. We have one to hopefully to get new clients.

A: Okay, and when was it realized that the practice needed a website?

H: Doctor doesn't really feel he needs it.

A: Really?

H: Yep.

A: Interesting.

H: He's old school.

A: Awesome.

H: I mean, we'd like it to be more, but, you know, it's not what we focus on doing. Too small of a practice.

A: I understand that.

H: Mmhmm.

A: How much time elapsed between the time where somebody said 'Hey we should have a website' and the actualization of actually having the website up?

H: I'd say we're still in the process; we got one guy who started it, and that's really all that's been done. We're in the process of trying to find someone else to take it over.

A: Oh, okay, so work in progress.

H: That's the best way to describe that one for ya. [Both H and A laugh]

A: Alright. Now was the original website created by a staff member, or did you farm it out to a website making company?

H: The accountant, our ex-accountant, took it, who does website, you know, webpages.

A: Okay, so former staff member?

H: If you count the accountant as a staff member, I don't consider it a staff member.

A: Alright, let's see. So the original website that the ex-accountant made, was it, the one that's up there right now, it looks like basic HTML, do you know?

H: [giggles, shrugs, throws hands up in air]

A: No clue? That's fine. [giggles]

H: Like I said, as far as the doctor's concerned, word of mouth is his best.

A: Word of mouth is your best? Hmm.

H: But we get a lot of good reviews on it, people tell us they love it.

A: Yeah, for, it is a very aesthetically pleasant website, and so a lot of people like it.

H: That's interesting.

A: Yeah.

H: Just something simple to communicate.

A: Yeah, it's simple and very aesthetically pleasant with the color choices and everything.

H: Hmm.

A: As far as, you already said that getting new clients was the reason to have the website. For you, what is the most important point of having a website, other than new clients?

H: I would like it to have it to give, you know, information for our clients. Show what, you know, seasonally, with heartworm coming up in springtime, and what to look for in the winter months, so...[trails off]

A: And, um, about how often is the website updated?

H: [laughs]. Zero! It's not being updated right now. Like I said, he's asked my twin brother to take it on, and right now we're just in the process of deciding if he has the time. I'm totally going to be the opposite of your study, I promise you.

A: Actually, this is not as off as you would think.

H: You mean someone's worse?

A: No, there are a lot of people going through a sort of changing of hands, as far as who's doing what with the website, and a lot of people are remodeling.

H: Okay.

A: So whenever you have updated the content of the website, who was mostly in charge of overseeing said content before it went up?

H: Would be [name redacted for anonymity], the doctor. Dr. [name redacted].

A: Okay. So, the next couple of questions are going to be about what sort of process went into deciding whether to put certain things up onto the website or not

H: Okay.

A: The first one is, how did you figure whether or not you were going to put photographs with your veterinarian and staff bios?

H: How would we come across, how did we come to decide to put them in?

A: Yeah.

H: Well, of course you want to show who your doctor is, be proud of your staff at the same time.

A: And what process went into deciding against putting up a price list for services?

H: 'Cause things can change.

A: Change.

H: Yeah, change, as quick as we order it.

A: And of course there's always something new and there's always -

H: Yeah! Are we trying something else out, are we doing something new.

A: And repackaging of deals, stuff like that.

H: Yeah, and then the gas goes up, so everybody wants to raise their prices, which in turn we gotta raise ours. Domino effect.

A: Oh the lovely economy.

H: I know. Be grateful we have a job, right?

A: Oh yeah. Okay, let's see; what process went into selecting client education material?

H: It wouldn't be so much a process. As I said, seasonally there'd be a reason why we'd give a customer information. I mean, I don't really know how to answer that one. We've got pamphlets on things that people commonly, questions people ask us, so that would be the reason of putting one thing up over another.

A: Right. I've seen, I took a look around your waiting room, and you have a lot of pamphlets!

H: Yes we do.

A: That is a lot of education material.

H: And they still don't get it.

A: I'm just happy that you guys have it! [A and H laugh]



H: Thank you!

A: Yeah, I used to be a Practice, er, Office Manager for a veterinary practice.

H: So you know my frustration.

A: Yes, yes I do.

H: Mmhmm.

A: Let's see; I know you don't really have any embedded videos on your website, but for-

H: -I have them on my phone and I'm just waiting to load them up, it's funny you would say that.

A: Oh, yeah! So you are going to add embedded videos?

H: Yeah, he got an iPhone for me.

A: Excellent.

H: So I've been videotaping clients coming in, and I'm going to try and get that up there.

A: Oh that's cute!

H: Yeah, I'm trying. Just not enough hours in the day.

A: I completely understand.

H: This and I board dogs in my house.

A: Wow; that's a lot on your plate.

H: Yes.

A: So as far as the embedded videos go, are they going to be more advertising, or are they going to be more educational?

H: Educational, by all means.

A: Okay. And now for, let's see. What does the practice hope the audience remembers after visiting the website?

H: How compassionate we are, but it's hard to show that online. 'Cause updated ain't what we're lookin' for [laughs]. Except for the iPhone, I don't even have a digital camera. Just, compassionate, and, and, man, I should have prepared for this.

A: Take your time.

H: Tryin' to think of a word, and I can't think of it. Just compassionate and, what's the word, and conservative. The doctor is very conservative, I don't know if that shows on the website, but when we show all the rescues we've working with, and [giggles, lowers voice] and we can't pay the bills because he keeps working with more of them, helping them out. [voice resumes normal volume] So, that's what I'd like them to remember.

A: Well, you can actually come across as, the conservative can sort of come across from the way you put up the website as far as form. And I would say, from the very linear, sort of block pattern that you have on there that that would come across as conservative.

H: And I mean that's one of his main things, people don't want the fancy clinic, they don't want to have to pay for the doctor's medical equipment back there, you know, and that's really what it comes down to.

A: Yeah.

H: He's been in practice long enough that it's word-of-mouth for him. I've tried doing advertising, I've tried just doing radio, he's like, nope. He said that for five years he put his name on the carts for the golf thing here? Never once got a call. How more convenient can you be?

A: Yeah.

H: So I see his point, but nowadays technology takes you to the computer, so you have to go with it, whether you want to or not.

A: This is true.

H: If we put enough, just to get 'em in, just to call us; I just want them to call us. Get that phone number, call us. Because once they speak to myself or one of our receptionists, we're, we've got 'em. Whoever answers the phone better grab that person, and that's our first contact. So as much as people say the website is, a lot more has to do with voice, that tone of voice as soon as you get that client on the phone.

A: Yeah, this kind of leads into the next question, which is: how is the success of the website measured in the practice? Is it with client retention, new client draw, increased phone traffic?

H: I'd say that, definitely increased phone traffic. 'Cause we'll definitely get people who say 'oh I saw your website', and I'm like 'oh you did? how's it look?' [laughs]. 'Refresh my memory, please.' And they say they find us on something else, I can't even remember and I've tried pulling it up, and I can't find it, and it's just what people write in about us.

A: Oh yeah, basic reviews.

H: He said that people just love us. And I'm just like 'well they don't tell us that, it'd be nice if we knew that', 'cause I keep strugglin' with work.

A: Sometimes, if you Google a practice -

H: Maybe that's what they're doing.

A: -then under your listing there, it'll have 'Review this practice' or 'Read the reviews'. So maybe that's what people are doing.

H: I really should find out.

A: Now the next two questions are kind of philosophical in nature. Describe the perfect veterinary practice homepage. What vital material would be shown?

H: Experience of the doctor, years of practice, what breeds he works with, small animal or large, get to the point. Say the question again?

A: Describe the perfect veterinary practice homepage. What vital material would be shown?

H: And what did I say so far?

A: Experience of the doctor, years of practice, type of customer...

H: Type of customer, phone number.

A: Phone number.

H: I mean, that's all you can really put up there without gettin' tacky.

A: Alright, and now the last question.

H: Drumroll! [taps on desk]

A: Yeah. Where do you think all this is going? Put in another way, what direction do you believe the website is headed?

H: I'm hoping a better direction to grab more clients for us, but that means putting in more time ourselves. [whispers] They don't pay me enough. Do you hear that? [giggles, voice returns to normal] Sorry.

A: No, it's cool. Grab more clients.

H: That's the bottom line, really, especially in this town. You've got students coming and going.

A: Oh yeah, and it's an almost constant state of flux kind of thing.

H: I mean, he's got his clients that he's had for 20-some-odd years, but we also, we can say 'we've got all these clients', but we also lose them in two, three years once they've graduated, you know.

A: And because Fort Collins is so competitive as a veterinary town.

H: It's crazy. I don't know if I'd have gone to tech school, knowing that when I moved here.

A: Yeah, well, if you wanted less competition, you could always move, go to another town.

H: Well, it's more like you'd have to go to another state, that's how bad it is. Trying to find a tech job right now, thank God I'm not looking.

A: Yeah.

H: I'm comfortable for now.

A: Alright.

H: Probably wasn't a lot of help.

A: No, actually, this was a lot of help, because every single person I interview, more information is always better.

H: Very true, very true.

A: So I wanna thank you very much, for agreeing to the interview.

H: Good luck with your study, keep us posted.

A: I will. And you still have my card? 'Cause I dropped one off.

H: It's still up there, but I'm gonna be honest with you; when I came back from vacation, everything was being painted, and so can I just have another one?

A: Sure; would you like to make a copy of this as well? [meaning the consent form]

H: I don't think I need to, do I need to? I don't think I need to.

A: Then I'll just give you my card, so that you can contact me if you need to.

H: I don't think I said anything incriminating.

A: No.

H: [slightly louder] I love my boss! [H and A laugh]

A: Alright, my professor's number is on the back, mine's on the front, obviously, I always like to leave contact info with my interviewees.

H: Okay. I'm sure it's up there, but now I have this and I'll know exactly where it is.

A: Good. I've actually found that a lot of people don't want a copy of the consent form, so I just, I always like to leave my contact information.

H: Yeah, I'll come back after you if I do.

A: [laughs]

H: No, I'm kidding.

A: Alright, well, I want to say thank you again, I hope you have a very good day, [into recorder] and this is Alice Weaver, signing off.

[recording ends]

F.6 (6, Interview #6)

A = Alice Malia Weaver, Interviewer

R = Practice Coordinator of Practice R

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### **Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into recorder] Hello, this is Alice Weaver. It is November 4th, and I am at Practice R. [To R] Thank you very much for [recording fades, stops].

*[Please note: I checked the battery before the interview and it was fine, but the batteries failed here. I only got a little bit into the interview before I noticed what had happened. I replaced the batteries and tried again.]*

[recorder is turned on again] Yeah, okay, take two of the interview with Practice R. This is Alice Weaver, it is November 4th, so far we have already covered demographics questions for age, gender, education level, and we were about to get to job title. Just so that I can transcribe this later, 47, female, Bachelor of Arts, Sociology and Women's Studies and minor in History and Music. Okay!

[R laughs]

A: Now that I've caught myself up, I'm sorry for that little glitch.

R: Not a problem. [laughs again]

A: What is your official job title or job titles?

R: My official title is Hospital Coordinator.

A: Hospital Coordinator.

R: Yep, that's my job title. Do you need to know what my job entails?

A: No, but I do need to know how many years you've been at the Hospital Coordinator position, and how many years you've had in the veterinary industry.

R: They're the same answer; two-and-a-half years.

A: Two-and-a-half years.

R: I've been a client here for 22.

A: Nice! Okay, demographics questions, check!

### **Interview Questions:**

A: Now some of these interview questions, some are very straightforward, some of them are a little more philosophical in nature.

R: No problem.

A: So we'll start off with the straightforward, easy ones first.

R: 'Kay.

A: Why does the practice have a website?

R: I think it pretty goes without saying that we're living in a virtual internet kind of world now, and I think the majority of people use internet instead of phonebooks, so a website is an easy way to be out there.

A: Mmhm, excellent.

R: Also, it's a fluid market; it's not print, so you can change it as you need to.

A: Exactly.

A: When was it realized that the practice needed a website?

R: I don't know exactly, except when I started the website we had was very, how do I put it, not very artistic, not creative in my opinion, so it was obviously-

A:-kinda basic?

R: Yeah, just kinda put up there beforehand, and I decided we needed to make this an appealing, interactive website.

A: Okay. Yeah, I do like your website now. It's very cute; I like it.

A: Do you happen to know how much time elapsed between them realizing they needed a website and them having a website?

R: No idea.

A: Okay. About how much time elapsed between you seeing the website as it was when you came on and you renovating it?

R: Probably about three, four months because of the learning curve. I tried to use the old format and decided that just wasn't gonna happen, and I needed to go with a different approach so, once I did that, we were up and running within two weeks.

A: Awesome. Two-week turnaround is really good.

R: It was a template based program, so I have complete control over it, and a lot of the stuff is just plug and play, so for somebody who'd never done websites before, it was really nice.

A: Yes! Isn't plug and play amazing? And if I could spell, this would be even better. [A and R laugh as A takes notes]

A: Let's see; you're the one who created the website as it is now.

R: I'm also the one that manages it.

A: And you manage it, which is awesome, I have to say. So I guess I can skip the question of if the website was contracted out, since it wasn't.

R: It's not.

A: So what kind of programming do you use?

R: I do it through the Intuit website. That's actually where our server is, and where our basic template comes from, but it's complete control; I don't have to send them anything. I can manipulate it as I want.

A: Sweet. Don't you love it when other people make it easy?

R: Oh yeah. I have to thank my husband; he's the one who went 'There's this company you should look into', and I was like 'Oh my god this is so much easier! I am in there!'.

A: So obviously Intuit was the easy choice, 'cause it made everything easy.

R: And it's very reasonably priced for what you get. Even some of the template companies, you have to submit everything to them and this one I don't; I have complete control. I can mix and match and move it around, change colors, I mean it's so easy!

A: Nice!

R: So you get the best of both; control as well as format.

A: Were there any exemplary or model veterinary practice websites that you used while you were renovating?

R: We did look at a couple of other practices in which the veterinary staff liked their website, I don't know if I'm allowed to mention them by name.

A: You can.

R: Chappelle, we looked at their website. We liked the fact that it was animated, it was one of the big things. And then I looked at South Mesa, just because [redacted; could be used to identify] and wanted to see what they were doing. And then we did look at Banfield, just because corporate with a large budget, and we wanted to see what they're producing.

A: Yeah, and those guys are huge. When I first started this project, I thought, oh well you know, they have this thing with PetSmart.

R: I'm not convinced they have the best website though. From the budget they have I think they could do much better.

A: They're actually an international chain now, because they have a site in Mexico and also a site, I believe, in England. So I was like, 'wow, really'?

R: I know, right?

A: For you, what is the most important point of having a website?

R: Again, I think it's a fluid communication tool. When I look at my statistics, I'm seeing exactly what I expect; about half of my visitors are new people and half of them are existing clients. The clients are looking, and we use it to keep our clients, keeping us in the forefront of their thoughts. Looking for a special, looking for a change in office hours, looking for what's new in the hospital, so I look at it as dual; attracting new clients but also as an educational piece that's fluid for our clientele. Resources in the library page, videos and articles that might be of interest to them.

A: Mmhm.

R: Wish I had more time to dedicate to it; I could do more with it, but it's part of a larger job.

A: Yep, you do what you can.

R: Yeah.

A: And you already said that you decide what content goes on the website.

R: Yes, it's kind of a discussion piece. I mean, the owner and lead veterinarian, Doctor...am I allowed to say his name?

A: You can, I'll just write 'redacted' so he'll remain anonymous when I transcribe this.

R: Dr. [redacted], I work with him on a weekly basis and so it's a discussion. He'll say 'Hey, I really want to see this on the website, or I give him an idea of 'I'd like to do this, I'd like to change this', so it's sort of the administrative and veterinary staff that talk about it. Occasionally our staff members will make a suggestion of something they'd like to see on there, but for the most part it's my decision.

A: Okay, awesome.

A: Let's see; how often is the website updated?

R: I check into it once a week. I definitely make changes at least once a month, but sometimes more often. I check in once a week to see if there's something I want to update or change.

A: Okay, at least once a month updates. Very good.

R: Even if it's just changing our banner, scrolling, just something because you want to be able for them to see something a little bit different.

A: Yeah. Let's see; you're the one who's in charge of updating the content.

A: The next several questions are about the sort of decision-making processes that go into putting stuff in or taking stuff off the website, or just not putting it on there in the first place.

The first is: what process goes into deciding whether or not to use photographs with the veterinarian and staff mini-biographies?

R: We used to have pictures, actually; I pulled them out for several reasons. I was able to get biographies on there in a more timely fashion, so as soon as a staff member comes on board, the very first day they're already on the website, it's from the day I hire. So if I have to wait for a picture, it takes time and if you're uploading pictures, there's nothing worse than 'that's a crappy picture of me' and so part of it was time, another part was space. I felt that when I added photographs it made the staff page way too long. Now that we do Facebook, and having some more pictures of staff up on Facebook, so I kinda feel that if they really want to see what we look like in our normal habitat here, they can look at some photographs on Facebook. So I didn't feel it was needed on the website; I also feel like their qualifications are more important than what they look like, and not everybody is Glamour Shots, so, you know what I mean?

A: Yeah.

R: I don't want any pre-conceived ideas in somebody's mind about somebody, so I really felt like just their biographical information was really important to me.

A: Exactly. Alright, I understand that.

R: We still hope to get a nice staff picture with everybody on it, and we can put that on the website as a group, but I don't know that I like individual shots.

A: Okay, excellent.

A: What process went into deciding against putting up a price list for services on the website?

R: I absolutely don't agree with that, because there is so much information behind just a price, and it does not give us an opportunity to have a relationship discussion with our clients. My philosophy is this: Facebook is the party, our webpage is our home, but our office is our people. So I don't want people price shopping off of words, because it's not a whole picture.

A: Right.

R: I want them to call us, and we work on a relationship with them and the pricing is appropriate to their particular animal.

A: Right.

R: The closest we get to pricing without actually listing pricing is our spay and neuter program. I have a page dedicated to that, that specifically says what or pricing includes, so if they are price shopping, they're comparing apples to apples, not apples to oranges. But prices change, I don't think they give the full picture, just, don't feel on board with that.

A: Okay.

R: And price, for me, isn't the reason that people come to our practice. They come because the quality of services we provide, and we price competitively.

A: Excellent. Yeah, I've been, I was an office manager at a veterinary clinic myself, so I know why people are very, very not into the price list thing.

R: It's just not how we run business.

A: Yeah. There were so many different reasons for it when I was working in Michigan that when I had the option to make my own questions for this, I was like 'I have to know'.

R: Yeah, I just feel like, what happens is people start to shop for services based on price, and as everybody knows, the most expensive may not be the best and the least expensive may not be the right choice either. So it's the wrong criteria; you should be coming because it's the right experience and credentials and relationship for you and your pet, and price shouldn't be your primary reason. Which oddly enough, we just finished a client survey and our clients told us

the same thing; it's not about money, it's about the right service. So obviously our philosophy is getting out there with our clients.

A: Nice.

R: And there are some people that it's totally about price and that's fine, but maybe they're not the right clients for us.

A: This is true.

A: Let's see; what process went into selecting your client education material?

R: I came in with a background in marketing, fundraising and HR, so I approached this in a very different manner than a traditional veterinary clinic. Nothing goes out, in my opinion, unless it's professional, written that a lay-person can understand and not make, you know, talking above their head. Helping them set priorities, so any literature will say 'Yeah, this is important, and this is the minimum, and this is the luxury'. So giving them options in all of our literature and education. We also try to focus on something different every month, so that's not overwhelming for clientele, so my approach is a little bit, I don't know if you want to use the word less scientific, and more user friendly, so that's what we're doing as a hospital now.

A: Very good.

R: That's partially why I was brought in, trying to get a different perspective.

A: And I do have to say, I really do like your waiting room, with all the client education material that you have out there. I really approve of that.

Vet Technician: Do you guys mind if I vacuum back here?

A: This [indicating recorder] is really good, so even if you vacuum, it'll still pick up voices, so that's cool.

Vet Technician: Okay; let me know if it gets to be too loud. Should be really quick, I promise.

A: Okay, thank you.

R: Thanks, [redacted Vet Technician's name].

[Please note that for the next several minutes, the vacuum can be heard in the background.]

A: Let's see; you do have videos on your website.

R: Mmhm.

A: Okay, what process went into choosing those?

R: Well, we try to pick videos that we know are of good quality, so I do check with the veterinarian. There are certain sites that we just know are better than others, and connections with different veterinarian videos that we like, so that's first of all they have to be credible. But also we try to pick a variety of topics that we think would be, especially for new clients that may be looking at our website, some topics that may be of interest to them. Not, trying not to pick promotional things for them, so education on heartworm, obviously, because that's a big deal, but we have how to trim your dog's nails, you know, how to litter box train your cat; even if you're not a client of us, that could be great help to you.

A: Oh yeah.

R: So we try to put a variety of things out there. I know a lot of practices have a problem with other company's videos or other veterinarian's videos on there, I mean, half these veterinarians are in another part of the country, so what do I care? You know? We're all dealing with the same kinds of issues, so that's, we pick a variety of issues and I try to pick things that are



seasonally appropriate for what we're doing that season. If it's heartworm season we have something on heartworm, if it seems to be puppy season we'll have something on puppies, and I do try to make a balance of puppies and cats, because we'll often get stuck on only dogs, because we have a lot of dogs.

A: Yeah.

R: But, just kinda try to change it around a little bit.

A: Okay.

R: Nothing too controversial, I think anyway.

A: Alright, excellent.

R: We always have something on dental care, because we just really believe in that, so, that's always on there.

A: Oh yeah.

A: Let's see; what does the practice hope that the audience remembers after visiting the website?

R: Kind of a dual question. Of course, the first thing you hope they remember is your name and where the heck you're located, because that's the primary reason you're out there. Do they remember you?

A: Yeah.

R: What was the name of that hospital and where were they? Especially since we have a pretty good drive-by location, so it's good for them to remember that. The next thing would be little bit less solid; I'd hope they'd come away feeling like it's a family sort of approach to business. I mean it's one thing that makes us different from a lot of large hospitals; we have a very personal and intimate relationship with all of our clients and their pets and that they get that feeling that it's not, you're not a number. And we even use the terminology 'family' in a couple places because we do consider our clients as a kind of our family. I mean we have clients, I'm not kidding, we just had a client survey, we have clients that have been here over 15 years, and a whole bunch of them.

A: Nice!

R: It's nice to know they've been here with us all those years, and they do feel like family. They come in and chat with us like we're family, so [R and A laugh]. They get a new pet, we're their first stop on the way home. 'You gotta see who we just got!' [R and A laugh again]. It's nice; it's definitely a close, intimate kind of impression that I hope they leave with.

A: Very good.

A: Okay, how is the success of the website measured in the practice? Do you go by client retention, draw, increased phone traffic, any of that?

R: I do look at, the one thing Intuit does for us is they actually do an analysis for us. They'll tell us how many clients have come that are repeat customers, first-time customers, how many pages they looked at when they came, what page they came in on, how long they stayed on every page, so that's a lot of where we find success.

A: Wow, that's really good.

R: Yeah, the number of hits we're getting, and then what percentage of those are new hits versus existing hits, 'cause we really are looking for both, I don't just want new hits.

A: Right.

R: And are they looking, we're hoping that our clients are looking at least two of the five pages they have. Did they just come in on the front page and leave, or does that entice them to go one more step?

A: Right.

R: So I kinda look at those statistics, then the goal is obviously to ever increase those numbers.

A: And you did say that you had a client survey?

R: We did do, through Survey Monkey, we did a client survey. It was not an objective survey, it was a subjective survey, in that we hand-picked who we sent it to, but we sent it to the oldest 100 clients we have, let me put it that way, the ones that are still in the area.

A: Yeah.

R: But, so, we expected them to be long-term, but were surprised that out of that survey, that 60% of them had been here over 15 years.

A: Wow! That's really good.

R: Yeah, we had a pretty good response rate for surveys; I mean, we had a 43% response rate with a 4% return rate, which isn't bad. I don't know if you've done a lot of survey work, but it's a pretty decent return.

A: I've helped with a lot of survey work, and yeah, that's actually pretty good.

R: And we only gave them a 30 day window to do it in, so it wasn't too bad.

A: Oh, well then that's excellent.

R: Yeah, I'm pretty impressed. And we had some surprises on the answers, so that was good, but it was, and of course now the next thing is we're going to go on the other end, and that's our newest clients, and do a comparison. So what are the new people thinking of us versus what old people.

A: When you did that survey, did you ask, you know, how did you come to know us?

R: We asked 'how did you come here?', 'do you own dogs, cats, others?', 'how many years have you been here?', we had them rate the facility, we asked them what the top three most important reasons they came and stayed were, 'how are we meeting those expectations?'; it was like 10 questions, it was pretty short and sweet and definitely did some matrix answers.

A: Nice.

R: Got some good returns; I just now finished the summaries.

A: Excellent.

[Vacuum sound in the background stops]

A: Alright, now the last two questions are gonna be a little bit philosophical.

R: 'Kay.

A: This one is I'd like you to describe the perfect veterinary practice homepage. What vital material would be shown?

R: Mission statement, absolutely. I think what I've got on my page. Who they are and when they're open, who are the main players, so the veterinarian for sure, and I think a synopsis of the type of business it is. And of course, the more appealing it is, the better. I mean, black and white is kind of boring. I'm not saying mine's perfect, but an improvement over what we had.

A: Yep. Okay, Must be appealing.

A: And now, the last question; drumroll!

[R laughs]

A: Where do you think all of this is going? Put in another way, what direction do you believe the website is headed?

R: For our practice specifically?

A: Mmhm.

R: I definitely think we're headed toward an interactive feedback capability; I would like to see, in the long-term, where people could not necessarily make appointments for their animals but could definitely put requests in for that. I mean, we already have our email address on it, we already have a lot of people email us and say 'I need an appointment on Saturday between Ten and One and get him in', and we'll email them back, so we see a lot of people not using the phone, but I'd like to see it be more interactive, where clients can participate in the website. I have a feeling this link with Facebook is going to, maybe a combination between the two that makes that happen. I'd like to see it be updated more, I'd like to see where you'd go and look at it every Friday and you would see something new; that would be my long-term goal for it, that you truly, as part of checking your email on Friday, you're gonna check our website and see what we got going new this week.

A: Sweet.

R: And we do have some plans to have some things available in the new year that would encourage people to do that.

A: Very cool.

R: Got some weekly things that you'd start looking to see if they changed every week, and Monday Madness, that's what it's going to be, so that's where I think I see it heading, more existing clients using it as a tool. I'd like to see more links on ours as well; linking with community partners that we feel are important. Like one that came to me in the middle of the night is we don't have our emergency links; we have two places we recommend for after-hours emergencies, and I should have that information on our website, but we don't. It's advertising for somebody else, but it's who we would refer to, so why not?

A: Exactly, and, and if you have a cat or dog that's, you know, horking up blood at three in the morning, and, you know, where do you go? It's immediately online.

R: And they call us to get that information on the phone, but I think we should be putting everything we do on the phone should be available on the website too.

A: Especially since the smartphones with internet capability, it's just as easy for people to grab their smartphone and dial the number as it is to grab up their smartphone and get on the internet.

R: Even so far as, you know, it's mappable. So, you know, who are they recommending after-hours, and now I can just map it, Google Map it, on my smartphone and get there instead of getting the number from the phone and having to call them and say 'where are you located?', and so yeah, I'd like to see it be more of an interactive tool in that respect.

A: Alright. Interactive tool.

R: Source of information. I don't know, sometimes I think websites are always geared towards 'I'm new to the business', but I really think, especially in veterinary where, you know, at least you're only here once a year. You should be, I'd like to see our clients have more contact with us, and a website would be a great way to encourage that.

A: Yes. I can see that. Especially with a place like Fort Collins, because it is so competitive in the veterinary industry, and there are so many veterinary clinics!

R: I mean I'd like to see our clients have us on their favorites, you know, just check in, what are we doing this week, what's going on this month here. And I think links to other community

partners is important, I mean, we've been in this community a long time, so I think it's important that we kind of include ourselves in the extended family.

A: Nice. Excellent, well that is the last question that I have for you.

R: Yeah, it wasn't painful at all! [R and A laugh] I'm sorry, it just that I've been so busy, and I [redacted, as activity could identify participant].

A: Don't worry, I completely understand.

[conversation redacted as activity is further explained]

A: Well, I want to thank you again for participating.

R: No problem!

A: [into recorder] This is Alice Weaver, signing off.

F.7 (6, Interview 7)

A = Alice Malia Weaver, Interviewer

Y = Vet Technician of Practice Y

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**Introduction/Demographics Section:**

[recorder is turned on]

A: [speaking directly into the recorder] This is Alice Weaver. It is November 28th, 2011, and I am at Practice Code Y. [To Y] Thank you very much for agreeing to be interviewed.

Y: No problem.

A: As you saw in the consent form, you're going to be anonymous in the study, any questions that I ask you, if you're not comfortable answering them, you don't have to. If you do answer a question, you can answer as much or as little as you want. I do have to set off the interview with just a few demographics questions.

Y: Sure.

A: If I may ask your age?

Y: 30.

A: And you are male, correct?

Y: I am male.

A: And what is your highest education level?

Y: Masters.

A: Masters. And what was your Masters in?

Y: Biomedical Sciences.

A: Biomedical?

Y: Biomedical Sciences.

A: Biomedical Sciences? That's really impressive!

Y: Thank you.

A: And your job title is Vet Tech?

Y: Mmhm.

A: Those are some very nice scrubs, by the way.

Y: Thank you.

A: Actually embroidered and everything? Very nice. Do you have any other job titles here?

Y: No.

A: No, okay. And what are, well, I should back up and ask this: how many years have you worked in the veterinary industry?

Y: 15.

A: 15. And how many years have you been a vet tech here?

Y: Five.

A: Five. That's impressive, you started when you were 15?

Y: Mmhm.

A: That's pretty awesome! I was an office manager at a veterinary clinic when I lived in Michigan.

Y: Were you? Nice.

A: So that's kind of why I'm interested in this topic of veterinary clinics and how they use their websites.

Y: Sure. I'm from Michigan too.

A: Really? What part?

Y: Southwest corner; about an hour south of Kalamazoo.

A: Ah, yes. I'm from a little place about, oh, ten miles as the crow flies from Ann Arbor.

Y: Okay.

A: So yay! Someone else from Michigan.

[Y laughs]

A: Okay, demographics questions, check!

### **Interview Questions:**

A: Some of these questions are going to be very straightforward, some are going to be a bit more theoretical in nature. Starting off easy, why does the practice have a website?

Y: To get customers in the door.

A: And when was it realized that the practice needed a website?

Y: Before I started working here. When it was realized that we needed a new website, it'd be two years ago, and we've been kinda slowly working towards where we're hoping to have the new site up by January.

A: Okay, awesome.

A: And between the realization and the actualization of either having the first website or the new website, about how long has it taken?

Y: About a year and a half for the new website; I don't know about the old one.

A: Alright.

Y: We've had a website for a long time.

A: Okay, let's see; I don't have all of these memorized.

Y: I don't need to look at them.

A: Okay, was the website created by a staff member, or was it contracted out to a website making company?

Y: Contracted.

A: And how did you select who was going to be doing your website?

Y: We got quotes from five different companies, and talked to them about what we wanted, and kinda their vision for it, and we went with a mix between the best vision and the best price.

A: Very nice.

Y: Fortunately it was the same people.

A: [laughs] It's always good when that happens, isn't it?

Y: Yeah!

A: Let's see; were there any exemplary or model veterinary practice websites that influenced the look of your practice's website?

Y: I don't really wanna say.

A: Okay.

A: For you, what is the most important point of having a website for the practice?

Y: So our customers get a feel for what it's like here, and want to bring their animals here. Every page on our website, what they want them to do is stop reading the website and call us and schedule an appointment. That's what every page is focused towards.

A: Okay.

A: How often is the website updated?

Y: We'll say three times a year.

A: Three times a year.

Y: It's mostly updated for staff pictures, or pictures of deceased pets; we have a memorial section.

A: Yeah, I saw that the last time I looked at your site; that's really sweet.

A: Let's see; who decides what content goes onto the website?

Y: I do, and the practice owner. We sit down and talk about it, go through a couple of revisions, make sure we're saying exactly what we want in our articles.

A: Okay, awesome.

A: And who is in charge of updating the content?

Y: Generally, it is our, the company, I guess our office manager usually does the pictures and things, and the company updates it for us.

A: Okay, now the next several questions basically go into decision-making processes for certain content.

Y: Okay.

A: First off, what process went into deciding whether or not to use photographs with the veterinarian and staff biographies?

Y: We wanna use photographs because everybody that comes in we want them to feel like they're a part of the family. And if they can put a face to the name, and they can come in and see that face, there's that recognition that kind of like 'we already know this person'.

A: Alright.

A: What process went into deciding against putting up a price list for services on the site?

Y: We'd rather have them call, to explain the value of those services to them. If they're price shopping against somebody who, for example, doesn't do things under anesthesia that we do, we'll be able to explain that to them rather than have them just make a numbers comparison.

A: Right, because it's usually apples to apples, it's apples to oranges.

Y: Yes, exactly.

A: I have come across that a lot with veterinarians, just because, you know, some people package things much differently than others.

Y: Right.

A: So, I gotcha.

A: Let's see; what process went into selecting the client education material?

Y: Just things we thought our clients needed, and we are going to put more of that on our new site, just to hopefully get more traffic.

A: Okay, excellent.

A: And what process went into deciding whether or not to use embedded videos?

Y: We're going to have one embedded video, and again, just the family aspect; we want them to get to know us better. And sometimes, you know, people don't want to watch a video. So we're selling more of a feeling than a business.

A: Okay, excellent.

A: Let's see, you just kinda answered both of those two questions at once; awesome. that's done with the process part. What does the practice hope that the audience remembers after visiting the website?

Y: Our phone number.

A: Very good. Anything else?

Y: Nope, just how to get a hold of us. That's it, we just want them to call.

A: Okay.

A: And how is the success of the website measured in the practice? Client retention, draw, increased phone traffic, that sort of thing?

Y: Generally it's increased phone traffic. Every, every new client that comes in we have them fill out an information sheet; how they heard about us, and based on that we see how well our Yellow Pages ad is doing versus how well our website is doing versus how well our referrals are doing. So that's basically what we look at.

A: Okay, excellent.

A: And the next two are the theoretical questions.

Y: Okay.

A: Describe the perfect veterinary practice homepage; what vital material would be shown?

Y: A sense of, a feeling of 'I want to be a part of this family', and info, contact information. That's really what all of our pages are geared towards, having them contact, having an email link on there, send us an email or call in or whatever they need.

A: Okay, excellent.

A: And the last question: where do you think all this is going? Put another way, what direction do you believe the website is headed?

Y: I think we're heading towards a much more professional-looking website with more of a modern look and feel and a sense of family. Somewhere where someone wants to bring their pet, you know, just on their day off to say hi.

A: Excellent. That took a lot less time than I thought it would. [Y and A laugh]

Y: I hope I gave you what you needed.

A: Yes, it did. I'm always looking for more information, and thank you so much for doing this.

Y: Yeah, not a problem!

A: I guess that concludes it.

Y: Perfect.

A: [into the recorder] And this is Alice Weaver, signing off.

[recording ends]



F.8 (6, Interview #8)

A = Alice Malia Weaver, Interviewer

M = Practice Manager of Practice M

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### **Introduction/Demographics Section:**

[recorder is turned on]

[Please note: the environment the interview was held in was part break room, part cat lodge. There were three cats in the room with us, and they were quite active in their 'apartments', meowing and playing. This is the background noise that can be intermittently heard throughout the interview.]

A: [speaking directly into the recorder] Hello, this is Alice Weaver. It is December 19th, 2011, and I am at Practice M. [To M] Thank you very much for being able to be interviewed, or acquiescing to be interviewed, I should say.

M: My pleasure.

A: The questions here are just going to be a few demographics questions to start out with, and then the interview questions are going to go from pretty straight-forward to sort of philosophical, theoretical in nature.

M: Okay.

A: So if I may ask your age?

M: 21.

A: And you are male?

M: Yes. [laughs]

A: And what is your highest level of education?

M: Associate's in science.

A: Any particular branch of science?

M: No, it's a general degree.

A: Okay, awesome. And what is your job title here?

M: Veterinary Assistant.

A: Okay, any other titles you go by here?

M: Handyman. [laughs]

A: [laughs] Awesome. And how many years, or months/years have you been a veterinary assistant?

M: Close to eight.

A: Eight...years?!

M: Yeah, eight years. Started volunteering when I was 12.

A: Sweet! And that's how long you've been a veterinary assistant?

M: Mhm.

A: Awesome, and that's also when you started in the veterinary industry, so

M: Killed two birds with one stone.

A: Yes. Okay, demographics questions, check!

### **Interview Questions:**

A: Now for the interview questions, and these are going to be all about the website themselves, or I should say, itself.

M: Okay.

A: Why does the practice have a website?

M: Advertising, more, just trying to get our name out there, and also to list our services that we can render. Those are our two big ones, and our future goals would be to make it just more accessible, I guess.

A: Nice.

M: Yeah, help people get their information, or their pet records, whenever they want.

A: Very good.

A: When was it realized that the practice needed a website?

M: As soon as it opened [M and A laugh]

A: Very good.

A: And about how long between the realization and the actualization of having a website?

M: It was at least a few months. Two.

A: Two months about?

M: Two months, yeah. It took me that long to figure it out.

A: Nice. Yeah, I made my own clinic's website too, and that took a little.

M: So you know.

A: Yeah; isn't it great to know HTML?

M: Oh yeah, and all the other programs too.

A: So I do have to ask, was the website as it is now created by a staff member, or did you contract out to a website making company?

M: All by me.

A: You did it all by yourself, excellent!

A: Okay, and what programming did you use?

M: We used Coffeecup.

A: Coffeecup?

M: Yeah, and Dreamweaver.

A: Okay, awesome.

A: Let's see, were there any exemplary or model veterinary practice websites that influenced the look of your practice's website?

M: Can I say the practice names?

A: Oh yeah.

M: We based our off of Garden Grove and VCA, a little bit.

[one of the cats starts meowing, M and A laugh]

A: So cute!

A: Okay, let's see; for you, what is the most important point of having a website for the practice?

M: It would be to advertise.

A: Just to advertise?

M: Yeah, we're contemplating changing it around in the near future.

A: Alright.

A: And who decides what content goes on the website?

M: It's kind of a split between the owner and myself. As far as information, the owner provides that as services, medical related things. As far as pictures, colors, that kind of thing, it's pretty much my decision.

A: Very good.

A: And about how often is the website updated?

M: I try to do it on a monthly basis, just depending on, and if not that, seasonal.

A: Okay.

M: You know, do something for fall, that sort of thing.

A: Just getting the big stuff out there.

M: Yeah, pretty much. [M and A laugh]

A: And, alright, the next couple of questions are going to go into, sort of, decision-making processes.

M: Okay.

A: What process went into deciding whether or not to use pictures with the veterinarian and staff mini-biographies?

M: That's a tough one. I mean, I kinda just put related pictures of animals. I don't know, I don't know how to answer that one.

A: That's all right. There's a plethora of reasons that you can either put pictures with the biographies or not.

M: Oh, okay. People who wanted me to take their pictures got it, people who didn't, didn't.

A: And that's one of those plethora of answers!

M: Okay then! [M and A laugh]

A: And let's see; what process went into deciding against putting a price list for services on the site?

M: Just because it's, our prices are ever-changing, especially in this field.

A: Mmhm.

M: I mean, one year, or even one day, one to the next.

A: Yeah, especially since you always have new stuff coming out, which changes the prices of everything you have already.

M: Exactly, yeah.

A: Yeah, I get it.

A: And what process went into selecting client education material?

M: That was more what the doctor was familiar with than most, he chose.

A: Okay.

A: And what process went into deciding whether or not to use embedded videos?

M: We currently don't have them, so we have really nothing to say about it. Doctor's decision, for the most part.

A: Do you think you ever could put embedded videos on there?

M: Oh yeah, mmhm.

A: Alright, and let's see. What does the practice hope the audience remembers after visiting the website?

M: The main thing is, like, our name at least and then our services, our big ones.

A: And how is the success of the website measured in the practice? Do you go by client retention, draw, increased phone traffic, any of those?

M: Referral, I guess? We do have a referral section and people have put down our website. Also would be, we, we get analytical stuff from the search engines we use, so we can kinda see how we do as far as page views, amount of time spent on page, and that's kinda how I see.

A: Very good.

A: Wow, we flew through these! Let me make sure we haven't missed any. [M laughs] Okay, the last two questions I've got here are kind of theoretical, philosophical in nature.

M: Okay.

A: Describe the perfect veterinary homepage. What vital material would be shown?

M: It would be name, information about the clinic as far as numbers, address. Maybe even a picture of our current doctor, or I should say our current main doctor. And then, whatever was vital to that month as far as promotions and/or client education about a certain disease, parasite of the month, that sort of thing.

A: Yeah, like heartworm.

M: Heartworm is a good one for a month, or season, I should say.

A: It's always a "insert thing of the month here". So it's Dental Month, or Teach People How to Trim Their Own Pet's Nails Month, and that sort of thing.

M: Yeah, yeah definitely on that line.

A: Okay, and last question: where do you think all of this is going? Put another way, what direction do you believe the website is headed?

M: A good direction? [M and A laugh] More options, I should say, as far as how clients can get their information, what information is available to the clients. And then also things like insurance quotes is what we're headed to too. Ordering would be a big thing too; refills and all that.

A: Oh yeah. I would have loved to have an ordering section on a website.

M: There's a lot of work behind it.

A: Yeah. And you guys do insurance quotes?

M: Yeah, through our advertising on our website, we can do insurance quotes.

A: Nice! Well, that is the last question.

M: Sweet.

A: And, I want to thank you for being so helpful. [M laughs] [A into recorder] And this is Alice Weaver, signing out.

[recording ends]

APPENDIX G (7)

*Ages:*

B: 30

H: 46

J: 33

M: 21

O: 45

R: 47

V: 34

Y: 30

*Genders:*

B: Female

H: Female

J: Female

M: Male

O: Female

R: Female

V: Male

Y: Male

*Highest Completed Level of Education:*

B: Bachelor's Degree

H: Veterinary Technician Degree

J: Bachelor's Degree

M: Associate's Degree

O: Bachelor's Degree

R: Bachelor's Degree

V: High School Diploma

Y: Master's Degree

*Official Title in Practice:*

B: Practice Manager

H: Head Technician & Practice Manager

J: Clinic Director

M: Veterinary Assistant

O: Practice Manager

R: Hospital Coordinator

V: Practice Manager

Y: Veterinary Technician

*Years in Position:*

B: 7

H: 4

J: 5

M: 8  
O: 14  
R: 2.5  
V: 4  
Y: 5

*Years in Practice/Veterinary Industry:*

B: 7  
H: 10  
J: 5  
M: 12  
O: 17  
R: 2.5  
V: 11  
Y: 15

**Question 1: Why does the practice have a Website?**

*B:*

We utilize it a lot for marketing of course, online as people are doing it through their search engines, we come up on veterinarian lists for the area. The other reason we have a website is so that our clients have access to information, paperwork that they might need for when they come in for an appointment, recommendations that we have here at the practice, and also we do articles every month that are informative for our clients so they have access. So a lot of it is just so we have information there for mainly our current clients. I'm working on another section that is for prospective clients, explaining our services, so that's another area too, so that we have an explanation of what we do here and who we are, basically.

*H:*

We have one to hopefully to get new clients.

*J:*

Because it needs one.

*M:*

Advertising, more, just trying to get our name out there, and also to list our services that we can render. Those are our two big ones, and our future goals would be to make it just more accessible, I guess. Yeah, help people get their information, or their pet records, whenever they want.

*O:*

Because we wanted to be sure that we had an online presence.

*R:*

I think it pretty goes without saying that we're living in a virtual internet kind of world now, and I think the majority of people use internet instead of phonebooks, so a website is an easy way to be out there. Also, it's a fluid market; it's not print, so you can change it as you need to.

V:

Okay, we have a website, well originally it was set up because obviously that's where people were going for their information was online. So basically it's used as an advertising tool just to get the name out there.

Y:

To get customers in the door.

**Question 2: When was it realized that the practice needed a Website?**

B:

I think from day one. Today is our seven year anniversary.

H:

Doctor doesn't really feel he needs it. He's old school. I mean, we'd like it to be more, but, you know, it's not what we focus on doing. Too small of a practice.

J:

As soon as we decided we were going to purchase the clinic.

M:

As soon as it opened.

O:

As I was saying, it was realized that the webs, that the practice was gonna need a website actually before we realized that we needed a website. And by that I mean our practice owner's husband, is in himself, a bit of a techno-geek, and long before we ever thought that we would ever care about or want a website, he was on board with the idea that he wanted to have one, and said 'No no, you girls will need one, trust me, you will'. So he recognized we needed a website just based on his foreseeing what the future was going to be holding with respect to internet usage long before we got on board with it. So we had a website, we owned the domain for [name redacted to keep anonymity] long before we actually had everything put together. Right. So I guess I have to say we had a website before we believed we needed one.

R:

I don't know exactly, except when I started the website we had was very, how do I put it, not very artistic, not creative in my opinion, so it was obviously-

A:-kinda basic?

Yeah, just kinda put up there beforehand, and I decided we needed to make this an appealing, interactive website.

V:

I would say probably six years ago.

Y:

Before I started working here. When it was realized that we needed a new website, it'd be two years ago, and we've been kinda slowly working towards where we're hoping to have the new site up by January.

**Question 3: How much time elapsed between the realization of needing a Website and the actualization of having the Website operational online?**

B:

I think it took us a couple of years; I can't remember how long our website's been active. We had our domain name for long before we even started the website. So it was probably 2006, 2007 when it finally went up. And part of that is because as a new practice, it takes a long time to get things situated before you start in on a big project like a website.

H:

I'd say we're still in the process; we got one guy who started it, and that's really all that's been done. We're in the process of trying to find someone else to take it over. That's the best way to describe that one for ya.

J:

It took a lot longer than expected, because I am very particular, I had an idea in my head about what I wanted, and what I wanted to incorporate, and finding a designer and a firm who could realize that and make it happen to the standard that I wanted was quite a difficult process. To the standard that I wanted, it probably took about a year. 'Cause you want, you say up and running, yes we had like a general website that was maybe one or two pages, when you say up and running, I assume you mean to the standard that I wanted, it had the full content, it was functional, it, yeah, it was probably about a year.

M:

It was at least a few months. Two. Two months, yeah. It took me that long to figure it out.

O:

Probably, I would guess a couple of years. That was a long time ago, because our website has been established for, I don't know, maybe, maybe 12 years? Ten or 12 years, like, we've had it for a long time. And honestly, I don't really recall when we actually got it up and running, but I do vividly recall the conversations where we thought that he was out of his mind and we were never going to want that, and then realizing 'Oh look! Really, this is the way it is really all moving, so I guess we do want one.'

R:

Probably about three, four months because of the learning curve. I tried to use the old format and decided that just wasn't gonna happen, and I needed to go with a different approach so, once I did that, we were up and running within two weeks. It was a template based program, so



I have complete control over it, and a lot of the stuff is just plug and play, so for somebody who'd never done websites before, it was really nice.

V:

I would say at least two years.

Y:

About a year and a half for the new website; I don't know about the old one.

**Question 4: Was the Website created by a Staff Member, or was it contracted out to a Website making company?**

B:

We have, well, a website making company, kind of; it's actually a client of ours that helped establish our computer system here in the practice. So he does all the content information; he'll give me input on what he wants, but a lot of the design and things is me. So, it's not contracted like, I know it's not very specific, here's my information, upload it into whatever you want to do, and that's not how ours is, it's here's exactly what I want, done for our website, this is what it should look like, and that's what he does. He gets paid to do it; we don't trade anything.

H:

The accountant, our ex-accountant, took it, who does website, you know, webpages. If you count the accountant as a staff member, I don't consider it a staff member.

J:

It took a lot longer than expected, because I am very particular, I had an idea in my head about what I wanted, and what I wanted to incorporate, and finding a designer and a firm who could realize that and make it happen to the standard that I wanted was quite a difficult process. I went through, I can think of three different firms and the firm that we finally stuck with, we went through probably a dozen different designs.

M:

All by me.

O:

Both. We had a staff member directly involved, and a client who does, or did at the time, website design and maintenance, and so she helped us put it together, and taught the gal who maintains it the basics of what to do.

R:

I'm also the one that manages it.

V:

It was actually created by a client who does web design. Well, knowing that she does web design, and she actually had some stuff that she needed done on her animals, it just worked out that we traded it in.

Y:  
Contracted.

**Question 5: If the Website was created by a Staff Member, what programming did you use? If the Website was contracted out, how was the company chosen?**

B:  
We looked at some other people, and looked at his availability to do things in the timeline that we needed, and so those are things that we looked at before we decided on him. It also helped that he knew our practice inside and out, because he was here setting things up before we even opened the doors, so he knew us. And I think a lot of it had to do with time constraints and if I send him stuff that I need done, he does it as soon as he can.

H: *[giggles, shrugs, throws hands up in air]*

J:  
To, yes, it was. They did the design. Like the pet bios and stuff on there? That was one of the things I wanted to incorporate, that was something that people just weren't understanding what I was talking about when I said I wanted these little bios on there.

M:  
We used Coffeecup. Yeah, and Dreamweaver.

O:  
You know, it so happens that with our client base, we're fairly intimately familiar with most of clients in some way, shape or form anyway. We'd known her for very many, for a long time, so we knew what she did. I suspect that we said to her 'We're ready to do this now, would you like to help us?'. Again, it was long enough ago, I don't really recall exactly how that came down, but I can't imagine that she would have solicited us. It would have, it more would have been us saying 'We're ready to do this.'.

R:  
It was a template based program, so I have complete control over it, and a lot of the stuff is just plug and play, so for somebody who'd never done websites before, it was really nice. I do it through the Intuit website. That's actually where our server is, and where our basic template comes from, but it's complete control; I don't have to send them anything. I can manipulate it as I want.

V:  
So the website we currently have is fairly basic, it just has a general information that's not real elaborate site, just because, again, I just wanted to have web presence, where the prior practice manager wanted that and all these little extra newsletters and things, these little fun things, and it was taking a really long time to put together, and finally when I took over I was just let's put something together and put it up.

Y:

We got quotes from five different companies, and talked to them about what we wanted, and kinda their vision for it, and we went with a mix between the best vision and the best price. Fortunately it was the same people.

**Question 6: Were there any exemplary or model veterinary practice websites that influenced the look of the practice's website?**

B:

Not in particular. You know, before I started our website, I looked at other practice websites to see what we didn't want it to look like [laughs]. Because there are ones out there that are you know, not great, but there are other websites that are fantastic. In fact, I'm uploading content stuff and I was just looking at Chappelle Animal Hospital has a beautiful website it's gorgeous! So they have a great one. Paws of the Rockies has a really nice website, Aspen Grove has a really nice website, so those ones. Our website, I looked at everybody else's, to see what everybody else was doing, and when you see those websites, you know how you would feel when you walked in the practice, and when you look at our website, that's what I want is that it looks like our practice, it feels like our practice and I think that that's what it does.

H: I don't know.

J:

No. No, no, I'm a very outside the box person, and I want to know how other vet clinics are doing it, I don't want to be like every other vet clinic, I want to be my own. I just looked for websites that I liked, I didn't care what industry it was. I mean, I went to other vet clinic websites, and then I told them I don't want paw prints, I don't it cliché, I don't want, this is what I don't want.

M:

We based our off of Garden Grove and VCA, a little bit.

O:

Yes, but more in functionality than anything else, and that was directly guided, we were directly guided through that process by the gal who helped us implement the site itself. So it wasn't specifically a look that she was trying to emulate but there was a whole laundry list of things that she didn't want us to do.

R:

Chappelle, we looked at their website. We liked the fact that it was animated, it was one of the big things. And then I looked at South Mesa, just because [redacted; could be used to identify] and wanted to see what they were doing. And then we did look at Banfield, just because corporate with a large budget, and we wanted to see what they're producing.

V:

I would say initially, no. Essentially, again, the client just basically took our brochure and put together a very brief website.

Y: I don't really wanna say.

**Question 7: What is the most important point of having a Website for the practice?**

B:

I think information, I guess.

H:

I would like it to have it to give, you know, information for our clients.

J:

Other than 'Come here'? Well, obviously, it's an informational website, you want to showcase the products and services. We're very relaxed and laid back, loving, outside the box, and so we wanted to portray that in our website.

M:

It would be to advertise. Yeah, we're contemplating changing it around in the near future.

O:

Well, the most important part, the most important point of having the website is so we have the presence that when people are searching, we show up. But second to that, would be that they can get the information that they care about when they get there. What animals do we treat? Do we have any specialties? Are our, who are our doctors? Who are the staff? Are the doctors male for female? The basic information about the practice that your average person looking for a new veterinarian would want to know before they would even bother calling. So having that basic information conveyed about who we are and what our philosophy is.

R:

Again, I think it's a fluid communication tool. When I look at my statistics, I'm seeing exactly what I expect; about half of my visitors are new people and half of them are existing clients. The clients are looking, and we use it to keep our clients, keeping us in the forefront of their thoughts. Looking for a special, looking for a change in office hours, looking for what's new in the hospital, so I look at it as dual; attracting new clients but also as an educational piece that's fluid for our clientele. Resources in the library page, videos and articles that might be of interest to them.

V:

I would say the most important point is essentially to get the name out there, who we are and what we do. That's why we're redesigning, because what we currently have is nice looking, but it's very basic. It doesn't express any level of competency in what we offer, so that's what we're striving for, something that's a little more edgy and more obvious to the client as they look at it that we are a competent practice.

Y:

So our customers get a feel for what it's like here, and want to bring their animals here. Every page on our website, what they want them to do is stop reading the website and call us and schedule an appointment. That's what every page is focused towards.

**Question 8: Who decides what content goes on the Website?**

*B:*

The majority of the time, it would be me, and then I usually have a meeting with our owner, Dr. [name withheld].

*H:*

Would be [name redacted for anonymity], the doctor. Dr. [name redacted].

*J:*

We have, we have a management team that's set up so I don't get to make all the decisions even though I'm one of the owners. But, people have to invest in where they work, they have to feel like their ideas matter, and they do, and I want people, I want their ideas, I want their creativity, so if they have ideas that I don't necessarily agree with, or think that they're great or whatever, I still feel it's important to run with it and see what happens. So if somebody has an idea of something that they want to put up there, it's gonna be the best, we're going to make sure it's done right, but, I mean, everybody gets input on everything that we do.

*M:*

It's kind of a split between the owner and myself.

*O:*

Well, in the original decision making for what would go on the website, it was the practice owner and myself, and the gal who was trained on how to create it, that made the original decisions for 'these are the basic things that we would like to have on there'. If there were something that, that she wanted to put up that fell outside what that established framework was, she would come to either myself or Dr. [name redacted to keep anonymity], or both of us, I would imagine.

*R:*

Yes, it's kind of a discussion piece. I mean, the owner and lead veterinarian, Doctor...am I allowed to say his name? Dr. [redacted], I work with him on a weekly basis and so it's a discussion. Occasionally our staff members will make a suggestion of something they'd like to see on there, but for the most part it's my decision.

*V:*

Myself and the business owners; we actually have four practices. Yeah, and then there's a primary doctor who owns the majority of four of the practices and then there's an associate who's kind of the lead doctor in each facility, that is actually a partner in the business, so those owners as a whole as well as myself decide what goes on the website. It's mostly me, but it's always run by them first.

Y:  
I do, and the practice owner.

**Question 9: How often is the Website updated?**

B:  
Every month it gets something, every month it will have an updated article on there and then I check it, usually every month to see if we need to update or change things, and then of course as needed, because information is always changing, so you know, boarding facilities change requirements so we need to keep it updated on a regular basis. Yeah, and also as staff changes, because we have a staff page on there and we need to update that and sometimes I lag behind it on that one, but we do our best.

H:  
[laughs]. Zero! It's not being updated right now.

J:  
Constantly. You have to update it constantly. Well, not every day. At minimum, once a week. I'm on the website almost every day, looking to see what's up there. Yeah, at least change something once a week. Yeah, it's not, it's alive, you have to keep it alive if it's gonna work for you.

M:  
I try to do it on a monthly basis, just depending on, and if not that, seasonal.

O:  
Once every one to two months, probably. That may be a generous estimate. So, you know, the hope is that once we have the new website put together, the biggest reason it doesn't get updated any more frequently than it does is because we don't really know how to do much. You know, there's only so many pictures that are worth replacing that often, or the bios are our bios and what they are is what they are, and yes, should they have picture attached to them and they don't yet?

R:  
I check into it once a week. I definitely make changes at least once a month, but sometimes more often. I check in once a week to see if there's something I want to update or change. Even if it's just changing our banner, scrolling, just something because you want to be able for them to see something a little bit different.

V:  
Currently? Not that frequently. Currently that's an issue; we contact the web designer with changes we want, and it takes a few months to get the stuff done, get in contact with her essentially, and then we get the changes made. So, infrequently it is updated.

Y:  
We'll say three times a year. It's mostly updated for staff pictures, or pictures of deceased pets; we have a memorial section.

**Question 10: Who is in charge of updating the content?**

*B: [didn't ask directly; partially answered in a previous question]*

*H: [didn't ask directly; partially answered in a previous question]*

*J: [didn't ask directly; partially answered in a previous question]*

*M: [didn't ask directly; partially answered in a previous question]*

*O: [didn't ask directly; partially answered in a previous question]*

*R: [didn't ask directly; partially answered in a previous question]*

*V: [didn't ask directly; partially answered in a previous question]*

Y:

Generally, it is our, the company, I guess our office manager usually does the pictures and things, and the company updates it for us.

**Question 11: What process went into deciding whether or not to use photographs with the Veterinarian and Staff mini-biographies?**

B:

I don't really think we had a decision making process, it was just that I made the decision [laughs]. That that's what we were gonna have on there, because I know some clinics don't do their photo-bio and things like that together. We have always been at this practice, again it goes back to your website should feel how your practice feels, that our staff wants to be part of your family and that our clients want to be part of our family, so it goes back to that home feeling again.

H:

Well, of course you want to show who your doctor is, be proud of your staff at the same time.

J:

Yeah, there was no discussion. It was just something that you have to do, people want to know who they're gonna come see. And of course, you have to have your pet in there, it's a vet clinic cliché, they all do it, but yeah. There's certain things that you do have to do. I, the bios are short, very very short. Short and to the point, and obviously, we love animals. Everybody who works here loves animals, we wouldn't be in this industry if we didn't, so we wanted the bios to be something personal about them, not related to work, and if you read through that you can kinda see, you can get to know that person.

M:

That's a tough one. I mean, I kinda just put related pictures of animals. People who wanted me to take their pictures got it, people who didn't, didn't.

O:

That was, that's the reason why there are no pictures there, but you need to understand that when our website went up, 10 or 12 years ago, whenever that was? Long before the advent of Facebook; long before email was proliferative, and the idea of having a headshot or a photo of me or of the people that you worked with actually online? Freaked everybody out. Nobody underneath the building wanted their name associated with their picture on the web for people to be able to, for, for creepy stalkers to be able to access and have issues with, and people felt, the staff specifically felt really strongly about it in the early days. So the bios went up with just a name associated with them. And now, of course, it's commonplace, and everyone has 500 pictures of themselves posted. We didn't do it because the people who worked here were completely freaked out by the idea of having their pictures online. In the same way that some people are really, adamantly opposed to having, say, their last name written on a name tag that people see frequently, people didn't want someone to be able to come through the door and then walk out and have a means of finding out anything about them personally, outside the scope of their work life. And the people that were here, at least in that point of time, felt very strongly about that. And, and there came a point in time where we recognized that that had all shifted, and we felt differently about it, and now for several years we've talked about the need to get head-shots out there and we'd like to have a picture of everyone with their furry families up to go with their bios, especially the doctors, but not just the doctors, I mean we would like to have the entire staff visible to the people who are looking at us online, and that's a complete 180 from where it had started.

R:

We used to have pictures, actually; I pulled them out for several reasons. I was able to get biographies on there in a more timely fashion, so as soon as a staff member comes on board, the very first day they're already on the website, it's from the day I hire. So if I have to wait for a picture, it takes time and if you're uploading pictures, there's nothing worse than 'that's a crappy picture of me' and so part of it was time, another part was space. I felt that when I added photographs it made the staff page way too long. Now that we do Facebook, and having some more pictures of staff up on Facebook, so I kinda feel that if they really want to see what we look like in our normal habitat here, they can look at some photographs on Facebook. So I didn't feel it was needed on the website; I also feel like their qualifications are more important than what they look like, and not everybody is Glamour Shots, so, you know what I mean? I don't want any pre-conceived ideas in somebody's mind about somebody, so I really felt like just their biographical information was really important to me. We still hope to get a nice staff picture with everybody on it, and we can put that on the website as a group, but I don't know that I like individual shots.

V:

Originally, there was no thought as to who went where, essentially we just put pictures up. That was the original website. [...Talking about website to be...] So that's the plan, and then as far as staff photos, what we've done now is we're also throwing that little caveat of caring into it, so



there are staff photos with their pets and they wrote their own bios, as far as what they wanted on them.

Y:

We wanna use photographs because everybody that comes in we want them to feel like they're a part of the family. And if they can put a face to the name, and they can come in and see that face, there's that recognition that kind of like 'we already know this person'.

**Question 12: What process went into deciding against putting a price list for services on the site?**

B:

You know, I don't think we ever even have discussed that, I know that other practices will put pricing up on there, I think that Dr. [name withheld] and I's consensus is that your pricing can change on a regular basis, and again that we want people to call us or email us to get pricing information so we can give them and explanation of why it is what it is. Yes, so it's not so cut and dried. And again, websites are great, the Internet is great, but our practice is built on contact with people and pets, so that gets them to call us or contact us.

H:

'Cause things can change. Yeah, change, as quick as we order it. Are we trying something else out, are we doing something new. Yeah, and then the gas goes up, so everybody wants to raise their prices, which in turn we gotta raise ours. Domino effect.

J:

They change. There's certain things that we do put prices on there. We just started dog training, and so our prices for dog training are on there, and that was a very long discussion that we had on whether or not we were going to put them up there, but we felt like they were competitive enough that people want to know. They're really good prices for what you get, so we did put those up there, and those are price-shopped a lot. So daycare is up there, that's price shopped a lot. Boarding, as well.

M:

Just because it's, our prices are ever-changing, especially in this field.

O:

You know, I'm not sure that I would say there's any sort of a process that was involved in deciding against it; I don't know that we ever even considered it. Given that there is, there's an actual law regarding price setting, it's unspoken in this industry that, that you can't, that you can't try to cluster yourself overtly any way. Now the reality is from clinic to clinic to clinic, most everybody has a pretty good idea of what everybody else is charging, and where they stand within all of that, but that's all, again, not something that's at all formalized. And people do them all very differently too. I think that on the one hand, you could argue that it would be useful to have your prices on the website, so that people would know immediately what they're getting into before they ever come, but it's also true because of the way vet medicine is set up price structures vary vastly from place to place to place. You know, people charging for each individual line-item for things in a surgical procedure versus bundling everything together and calling it one procedure. Or people charging more for their, for their examination and not very much for their vaccinations, or charging not very much for their examination but charging much more for their vaccinations, and what goes in combination with what. Maybe they just charge for a distemper and they don't even include something that says exam in there, they just charge 56 dollars for their distemper, and it includes, it includes an annual exam, or whatever, you know I'm just saying, you

know, here we charge for a physical exam, and we charge a nominal amount for the vaccination that goes in combination with an exam, but you would never just get just a vaccination; you can't get an annual vaccination without getting a comprehensive physical exam. And it's because our pricing structure is set up that way, and that way you don't get charged for a whole other examination fee if you get a vaccination at the same time as a different procedure. It depends on how you're set up, so you know, it wouldn't do you any good to put your price listing online, unless you could actually explain what that entails and what that means. It's not apples to apples. Or at least, it's not apples to apples without someone being savvy enough to know what questions to ask, and the same holds true here. You can call up and ask how much it'll cost to have a dental done, and some people will say 'It's 75 dollars for the dental', but they're not including the fact that there needs to be general anesthesia that needs to go with that dentistry, and that is a different price, you asked me what a dental cost, the dental costs 75 dollars, but the general anesthesia may cost 200. But then when you call someplace else, they may say that their dentistry runs between 200 and 400 dollars for a basic dentistry, and then there's the big gasp and the 'What do you mean, the guy down the street is doing dentals for 75 dollars'. Okay, but you didn't find out what all was included there. And, you know, I mean it's, there's too much variable associated with it.

R:

I absolutely don't agree with that, because there is so much information behind just a price, and it does not give us an opportunity to have a relationship discussion with our clients. My philosophy is this: Facebook is the party, our webpage is our home, but our office is our people. So I don't want people price shopping off of words, because it's not a whole picture. I want them to call us, and we work on a relationship with them and the pricing is appropriate to their particular animal. The closest we get to pricing without actually listing pricing is our spay and neuter program. I have a page dedicated to that, that specifically says what or pricing includes, so if they are price shopping, they're comparing apples to apples, not apples to oranges. But prices change, I don't think they give the full picture, just, don't feel on board with that. And price, for me, isn't the reason that people come to our practice. They come because the quality of services we provide, and we price competitively. It's just not how we run business. Yeah, I just feel like, what happens is people start to shop for services based on price, and as everybody knows, the most expensive may not be the best and the least expensive may not be the right choice either. So it's the wrong criteria; you should be coming because it's the right experience and credentials and relationship for you and your pet, and price shouldn't be your primary reason. And there are some people that it's totally about price and that's fine, but maybe they're not the right clients for us.

V:

There is a very competitive market, especially in Fort Collins as far as pricing and that sort of thing, so if people just look at prices they're not going to call, they're not going to see what they get for those prices, where if you call in, you're going to get someone that's going to explain to you what is involved, what is included in those prices, and show you a level of customer service that we have, versus just showing you how much it will be. If you're not creating that contact, you're likely not going to get, that human contact you're likely not getting that client. If they're just price shopping, they're going to be price shopping. Our practice, well, practices a very high level of animal medicine and we definitely spend the time with our clientele, we really focus on client education, and we realize that we aren't necessarily the best for everyone. We're definitely at the level of caring for people whose pets are their children. And so, we're not the people that it's just a dog, and it's going to be cheap and I want it as cheap as possible because I'm not gonna do a whole lot, you know, so that's another reason you don't want to put the price list out there. As well as the, the laws against it. I can't remember the name of it, but price sharing amongst veterinarians and businesses in general as far as creating monopolies. Because if you set the same prices or you start competing, there's a lot of ways that posting a price list can get you in trouble. It would also be illegal for us make a phone call to another practice and say "Hey this is [Practice V], I'm calling to see

how much you charge for this." I'm pretty sure that's a federal law. So I'm sure that plays into that pricing and posting of price lists as well.

Y:

We'd rather have them call, to explain the value of those services to them. If they're price shopping against somebody who, for example, doesn't do things under anesthesia that we do, we'll be able to explain that to them rather than have them just make a numbers comparison.

### **Question 13: What process went into selecting client education material?**

B:

Sometimes what it is is what have we been seeing a lot of in the clinic lately; right now, we're seeing a high prevalence of leptospirosis cases, so I wouldn't be surprised if we see Dr. [name withheld] writing an article about leptospirosis for the month of August. So sometimes the decision is what have we seen a lot of, or what have we been discussing a lot of, and do we need to do a bigger education on that? Other times it's new things that came out on the market that we want to educate people about, and then another part of that decision making process is there is of course something every month like there's Microchip Month, there's Technician Month, there's Dental Month, so we fall into one of those, sometimes we do articles to them. Yeah, so lately it's been a lot more of what have we been seeing a lot of, what do we need to discuss. Microchips, we did an article on microchips because we had pets that were being lost and found by their microchips, and we had a couple of cases where they were found miles away. So those types of things influence those articles.

H:

It wouldn't be so much a process. As I said, seasonally there'd be a reason why we'd give a customer information. I mean, I don't really know how to answer that one. We've got pamphlets on things that people commonly, questions people ask us, so that would be the reason of putting one thing up over another.

J:

You know, I don't think, I don't think we're done with that process, that process is never over. We started out with, we have to get the basics up there, things that are price-shopped, things that people know they want, the preventative care, spays, neuters, all that kind of stuff. And then we just delved deeper into let's get more in-depth into dentals, so you just start out with the basics and then you keep going deeper. And we do, when we have our management meetings, [name redacted] and then everybody is trained to let me know, I want to know questions people ask us repeatedly. You know, when you're in the room, talking to people, what's the questions that you hear over and over again, we need to address these on the website, we need to write an article, we need to put it on Facebook, something needs to happen with that. So it's constant, constant never-ending.

M:

That was more what the doctor was familiar with than most, he chose.

O:

As we came across topics that we decided we wanted in-house handouts on, as we, as we refined those in-house handouts, some of them we ended up putting onto the web. As they became timely, I remember when we finished our first heartworm handout, that was when the heartworm information went up on the website. That sort of thing.

R:

I came in with a background in marketing, fundraising and HR, so I approached this in a very different manner than a traditional veterinary clinic. Nothing goes out, in my opinion, unless it's professional, written that a lay-person can understand and not make, you know, talking above their head. Helping them set priorities, so any literature will say 'Yeah, this is important, and this is the minimum, and this is the luxury'. So giving them options in all of our literature and education. We also try to focus on something different every month, so that's not overwhelming for clientele, so my approach is a little bit, I don't know if you want to use the word less scientific, and more user friendly, so that's what we're doing as a hospital now. That's partially why I was brought in, trying to get a different perspective.

V:

Basically, we, because there's tons of materials out there [laughs]. One, we need to make sure that we agree with what it is portraying and we want to make sure that it's the best recommendation for the animal, we want to make sure it's a product that we're comfortable using, that we know works, that sort of thing. And then, we often times really focus on multi-modal learning, so things are comprehensive as far as colors and photographs and verbage and that sort of thing, and it's also explained. We really focus in our practice on repetitiveness, so that basically, people need to hear things three times before they actually hear them. And so, we really focus on that in our practices.

Y:

Just things we thought our clients needed, and we are going to put more of that on our new site, just to hopefully get more traffic.

**Question 14: What process went into deciding whether or not to use embedded videos? What process went into deciding which videos would be embedded in the website?**

B:

Right now, because we don't have videos on there, we have discussed putting them on there and I think the discussion that we've had with Dr. [name withheld] is that she wants people to be able to visually, like, see a process from start to finish. So one of the videos that we are in the process of putting up would be like 'How to Pill Your Pet', 'How to Wash Your Dog's Ears Out', you know, some of those simple things that some people are like "I don't, I don't know how to do that! I don't know how to put ointment in my dog's eye, what are you trying to make me do?!" So again, because we are visual people here, and a lot of people are visual learners, is that we do want to have those on our website. So that was kind of our discussion in deciding. For example, we just had a client call and ask how to trim his dog's nails over the phone, which we had shown him once, like three months before, and now he's gonna do it, and he forgot how to do it, and we're trying to explain like what a quick looks like, and please don't cut the quick, cut

it this way, and we're trying to explain it and it's like 'I know you don't want to come into the clinic, but because I don't have somewhere to send you to visually see what it is, you're gonna have to come in for a visit so we can show you.' But if I had a video? I could just have him look at that. But videos are great, and at some point, we'll have them on there.

*H:*

I have them on my phone and I'm just waiting to load them up, it's funny you would say that. So I've been videotaping clients coming in, and I'm going to try and get that up there. Just not enough hours in the day.

*J:*

We don't have, oh, well, I guess we do have, we've been on the news a couple times, so obviously when CBS or somebody comes and does a story on us we're putting that on the website. We have not, I want to do more videos, specific to the clinic. Time and cost are an issue; I don't have the time to do it right. If it's not going to be perfect, I'm not gonna do it. So, I haven't figured out a way, 'cause I want the staff in there, it can not be centered on the doctor. A doctor-centered practice is a very bad management decision, it's not a good business model, you have to have your team involved. But then that puts a life on the video as well, because you don't want a video up there that has outdated staff members. So, it's, we don't have a lot of turnover, but we do have it so I don't, I don't want to invest thousands of dollars into a video, and then, you know, in a year or two or whatever it's outdated. So we're trying to, we've talked to a couple different firms on, okay, let's just do some, like, flip videos, that we don't have to produce, we can just have the intro and exit produced professionally and then we just put the middle in, so that takes a lot of time.

*M:*

We currently don't have them, so we have really nothing to say about it. Doctor's decision, for the most part.

*O:*

I don't know, it depends on how user friendly and how comfortable the gal we have working on it now becomes, is and becomes. I think that at this point, the possibilities are sort of endless out there for what you can do with your site. I mean, now that people are comfortable with surfing the web, they're far more comfortable with getting further and further inside a website to get to different places that they're interested in seeing, and you can still have the basic information that is important that people care about immediately readily available but for those people who want more, you could have infinite possibility for what you could do in there, and you could link to, you know, you could embed videos, or have links to, I mean the possibilities are sort of limitless. How much money am I going to agree to put into that, and paying someone to put in more than will be regularly used by most clients who are just looking for a veterinarian in their area? It remains to be seen; it just depends on how easy it is. I'm still of the mindset that while it's important, and I want to have a strong online presence, and I feel like that will only become more important, I'm certainly not in the place where I feel like I'm going to spend multiple thousands of dollars a month in maintenance and upkeep to have that happen, if that makes sense.

R:

Well, we try to pick videos that we know are of good quality, so I do check with the veterinarian. There are certain sites that we just know are better than others, and connections with different veterinarian videos that we like, so that's first of all they have to be credible. But also we try to pick a variety of topics that we think would be, especially for new clients that may be looking at our website, some topics that may be of interest to them. Not, trying not to pick promotional things for them, so education on heartworm, obviously, because that's a big deal, but we have how to trim your dog's nails, you know, how to litter box train your cat; even if you're not a client of us, that could be great help to you. So we try to put a variety of things out there. I know a lot of practices have a problem with other company's videos or other veterinarian's videos on there, I mean, half these veterinarians are in another part of the country, so what do I care? You know? We're all dealing with the same kinds of issues, so that's, we pick a variety of issues and I try to pick things that are seasonally appropriate for what we're doing that season. If it's heartworm season we have something on heartworm, if it seems to be puppy season we'll have something on puppies, and I do try to make a balance of puppies and cats, because we'll often get stuck on only dogs, because we have a lot of dogs. But, just kinda try to change it around a little bit. Nothing too controversial, I think anyway. We always have something on dental care, because we just really believe in that, so, that's always on there.

V:

You know what? We never even considered it before. It is something that we may do in the future, but right now we aren't doing it either. I'm not sure that the consumer spends a lot of time looking at things on veterinary websites; I think they go there to get information and move on about their business. [laughs] So on the flip of this, I would be interested in seeing what consumers do have to say with your project.

Y:

We're going to have one embedded video, and again, just the family aspect; we want them to get to know us better. And sometimes, you know, people don't want to watch a video. So we're selling more of a feeling than a business.

**Question 15: What does the practice hope that the audience remembers after visiting the website?**

B:

That they learned something from it [laughs]. That they picked up, that they got some bit of information that they needed off of there.

H:

How compassionate we are, but it's hard to show that online. 'Cause updated ain't what we're lookin' for [laughs]. Except for the iPhone, I don't even have a digital camera. Just, compassionate, and, and, man, I should have prepared for this. Just compassionate and, what's the word, and conservative. The doctor is very conservative, I don't know if that shows on the website, but when we show all the rescues we've working with. So, that's what I'd like them to remember. And I mean that's one of his main things, people don't want the fancy clinic, they don't want to have to pay for the doctor's medical equipment back there, you know, and that's

really what it comes down to. He's been in practice long enough that it's word-of-mouth for him. So I see his point, but nowadays technology takes you to the computer, so you have to go with it, whether you want to or not. If we put enough, just to get 'em in, just to call us; I just want them to call us. Get that phone number, call us. Because once they speak to myself or one of our receptionists, we're, we've got 'em. Whoever answers the phone better grab that person, and that's our first contact. So as much as people say the website is, a lot more has to do with voice, that tone of voice as soon as you get that client on the phone.

*J:*

I want them to remember us as unique and special, someplace that they want to be. Yeah, it's the impression of the overall site, whether or not they remember exactly, here's our philosophy on dentals, here's what we say about this, you know, the specific content, yes it's good, it's necessary, all that stuff, but I want the overall impression to be left is the most important.

*M:*

The main thing is, like, our name at least and then our services, our big ones.

*O:*

We hope that the audience remembers or walks away from the website with a feeling that, a feeling of warmth, and welcome. Particularly in a town like Fort Collins, that's as veterinary saturated as it is, and with the teaching hospital local, you're hard-pressed to find a practice in Fort Collins that is not practicing quality medicine. There are a few of them out there, but really, for the most part, the vast majority of the practices that you'll find here are practicing quality medicine and quality care. So if there's something you're gonna do to be different or stand out, you would be smart to have your emphasis not strictly be on quality medicine and quality care, because you can get that most places. And the vision here, quite specifically, was to make people feel as comfortable and as at ease as they could feel, because this is often a stressful experience, and our founding doctor's vision, quite specifically, was that she wanted people to feel more like they were coming to a friend's house than going to the sterile environment of the poke-poke, prod-prod, out the front door experiences that she had experienced with her own animals prior to becoming a vet. She wanted it to be a more personal experience, and in the early days when we were small, it was very personal, because we knew everyone and that was something that we were very good at. And now, inherently you lose some of that as you get larger; I no longer know everyone that walks through the front door when they walk through the front door, but I'll treat everyone the way that, I'll, I'll treat everyone as though I do, so we've tried very hard to maintain that feel, even though we don't know everyone. And there are still, we still know quite a number of, I mean, we know quite a number of people very well. And some of those people have been with us for all the years that I've been here too. You know, for some of those people, we're on round three of animals that started as babies and got old and went the way that all old animals do, and you know, that's happened twice over and now we're on the third set. You know, it's been a long time; it's an honor.

*R:*

Kind of a dual question. Of course, the first thing you hope they remember is your name and where the heck you're located, because that's the primary reason you're out there. Do they remember you? What was the name of that hospital and where were they? Especially since we

have a pretty good drive-by location, so it's good for them to remember that. The next thing would be little bit less solid; I'd hope they'd come away feeling like it's a family sort of approach to business. I mean it's one thing that makes us different from a lot of large hospitals; we have a very personal and intimate relationship with all of our clients and their pets and that they get that feeling that it's not, you're not a number. And we even use the terminology 'family' in a couple places because we do consider our clients as a kind of our family. I mean we have clients, I'm not kidding, we just had a client survey, we have clients that have been here over 15 years, and a whole bunch of them. It's nice to know they've been here with us all those years, and they do feel like family. They come in and chat with us like we're family, so [R and A laugh]. They get a new pet, we're their first stop on the way home. 'You gotta see who we just got!' [R and A laugh again]. It's nice; it's definitely a close, intimate kind of impression that I hope they leave with.

V:

Essentially, what I would want it to portray is that we're competent, compassionate, caring, all those things we want to get out there. I'm not sure, well I'm actually positive that our current site does not do that, and that's why we're redoing it.

Y:

Our phone number. That's it, we just want them to call.

**Question 16: How is the success of the Website measured in the practice? Client retention, draw, increased phone traffic, etc.?**

B:

You know right now, the main way we're gauging our website is if clients are coming in and telling us "Hey I found something useful on your website." And then the other way that we're able to track it is when we get new clients, noting how they found us and putting it into our computer so we can poll how people found us, and recently we've had a big jump just straight from the website; that's the reason they came to us, because they found us online and looked at our website and that's why they're coming here. So other than all that, I don't have any better tools to gauge it, but I kinda get an idea.

H:

I'd say that, definitely increased phone traffic. 'Cause we'll definitely get people who say 'oh I saw your website', and I'm like 'oh you did? how's it look?' [laughs]. 'Refresh my memory, please.' And they say they find us on something else, I can't even remember and I've tried pulling it up, and I can't find it, and it's just what people write in about us. He said that people just love us. And I'm just like 'well they don't tell us that, it'd be nice if we knew that', 'cause I keep strugglin' with work.

J:

Yes. [A and J laugh] Yeah, we obviously track where people come from. We want to know, you know, were they referrals, did they come from the website. I do track the Google analytics, so we actually track where they are on the website, what page they enter, what page they exit, where they go through the website. And then, you know, like, boarding, 80% of our traffic



comes to the website for boarding. So we are in the process of optimizing for the veterinary side, because I want more traffic for the veterinary side. So we look at it, what pages are they going to for the boarding, and I want links somehow on those pages, we're gonna link them so they go further into the site, so that kinda, and like I said, it's alive, you have to track it.

M:

Referral, I guess? We do have a referral section and people have put down our website. Also would be, we, we get analytical stuff from the search engines we use, so we can kinda see how we do as far as page views, amount of time spent on page, and that's kinda how I see.

O:

Really the only tracking that we have right now, that we pay any attention to is referral information with new clients. How did you hear about us. The vast majority of our business comes from word-of-mouth referral, as tracked by that determining factor with new clients. But the next highest, the next two highest new client came from indicators are drive-by, seeing the practice, seeing the sign, because we have a highly visible and attractive appearance from the street. After that it's finding us on the web.

R:

I do look at, the one thing Intuit does for us is they actually do an analysis for us. They'll tell us how many clients have come that are repeat customers, first-time customers, how many pages they looked at when they came, what page they came in on, how long they stayed on every page, so that's a lot of where we find success. Yeah, the number of hits we're getting, and then what percentage of those are new hits versus existing hits, 'cause we really are looking for both, I don't just want new hits. And are they looking, we're hoping that our clients are looking at least two of the five pages they have. Did they just come in on the front page and leave, or does that entice them to go one more step? So I kinda look at those statistics, then the goal is obviously to ever increase those numbers. We did do, through Survey Monkey, we did a client survey. It was not an objective survey, it was a subjective survey, in that we hand-picked who we sent it to, but we sent it to the oldest 100 clients we have, let me put it that way, the ones that are still in the area. But, so, we expected them to be long-term, but were surprised that out of that survey, that 60% of them had been here over 15 years. Yeah, we had a pretty good response rate for surveys; I mean, we had a 43% response rate with a 4% return rate, which isn't bad. I don't know if you've done a lot of survey work, but it's a pretty decent return. And we only gave them a 30 day window to do it in, so it wasn't too bad. Yeah, I'm pretty impressed. And we had some surprises on the answers, so that was good, but it was, and of course now the next thing is we're going to go on the other end, and that's our newest clients, and do a comparison. So what are the new people thinking of us versus what old people. We asked 'how did you come here?', 'do you own dogs, cats, others?', 'how many years have you been here?', we had them rate the facility, we asked them what the top three most important reasons they came and stayed were, 'how are we meeting those expectations?'; it was like 10 questions, it was pretty short and sweet and definitely did some matrix answers. Got some good returns; I just now finished the summaries.

V:

I would say we definitely see, well, we do ask when we have new clients come in how they found us. The website is one of the options of course, and people have found us via our website, by Google or whatever search engine, again that's why we're trying to bump up our SEO. I wouldn't necessarily say that our website has anything to do with client retention, necessarily, but we also don't track how many people visit it or anything; there's not a lot of time spent on that.

Y:

Generally it's increased phone traffic. Every, every new client that comes in we have them fill out an information sheet; how they heard about us, and based on that we see how well our Yellow Pages ad is doing versus how well our website is doing versus how well our referrals are doing. So that's basically what we look at.

**Question 17: Describe the perfect veterinary practice homepage. What vital material would be shown?**

B:

The perfect homepage? Well on our homepage right now we have our mission statement, and I always think that that's a vital piece of information that you should have right off the bat so people know what you're about. Contact information, of course, and how to get to you. Your hours, all that normal stuff. Then the access to, wait, do you want tabs and everything? Tabs to paperwork, of course, that they might want to print off and do ahead of time, because it saves everybody time in the long run. I love it. I love it, and more are practices are doing it to have your paperwork done ahead of time, to have your histories done ahead of time, it's fantastic, it cuts down on the client time in the clinic if they're in a hurry, so that's a big thing we have on our website. New client information, pet information, their history information, if they wanna do it ahead of time. Of course, client information and education, the pet care tips, the services, and I think detailed information is ideal. Because again, I've looked at other websites and they're like "yes, we do X-rays". Okay, great; do you do dental X-rays? Do you do digital radiography? Do you have all these other types of things? And clients are becoming more and more intelligent, they have the web, they can research anything and they know what you should have. Yeah, and our clients are better educated than they have been, and they know what's out there, so you better be on the ball. So I think having that detailed service information on there is important. And then giving them access to recommendations, because we get requests for recommendations for kenneling, for grooming, for daycare, those types of things they always want to know. And then of course your team information, and that goes back to your clients wanting to know who you are, where you came from before you touch their pet.

H:

Experience of the doctor, years of practice, what breeds he works with, small animal or large, get to the point. Type of customer, phone number. I mean, that's all you can really put up there without gettin' tacky.

J:

Well, you have to have your logo. You have to have your phone number. It has to be visually appealing. It has to, it has to hit the emotions, whatever that is, cute, aaaw. It has to make them

go deeper into the site, it has, looks matter, it can't be boring. We accomplished that through, you know, the collage of pictures. It has to have, I think it's important to have something that changes, something that's current on it, such as a 'What's Happening', something you can change on a daily basis that says, 'Yes, we pay attention to this site, the information is current', that sort of stuff. I, obviously the navigation, you have to have the different headings, all that kind of stuff, but I think the mistake that a lot of people make is they kinda throw up on the homepage. Because it's true! It makes it too, it makes it too hard. I think the most important thing is to have it neat, clean and visually appealing. Obviously, the phone number, the logo, address, that's essential to have on every page.

M:

It would be name, information about the clinic as far as numbers, address. Maybe even a picture of our current doctor, or I should say our current main doctor. And then, whatever was vital to that month as far as promotions and/or client education about a certain disease, parasite of the month, that sort of thing. Heartworm is a good one for a month, or season, I should say.

O:

In my mind, particularly for this practice, but maybe not so for all practices, the perfect homepage has a really beautiful, lovely photograph of our locale and the building, because it's an attractive building in an attractive place, and the drive-by recognition is significant. But it also contains pictures of animals appearing comfortable and at ease and happy here, to draw the correlation between the practice and the pets. It also has all the pertinent information about the hospital, things like small animal hospital, address, easily contact us, staff, doctors, specialties, all of those links easily available right there at the front page, which takes you directly into bio information and more specialized information about the practice.

R:

Mission statement, absolutely. I think what I've got on my page. Who they are and when they're open, who are the main players, so the veterinarian for sure, and I think a synopsis of the type of business it is. And of course, the more appealing it is, the better. I mean, black and white is kind of boring. I'm not saying mine's perfect, but an improvement over what we had.

V:

Up front, it should portray competency, first and foremost, so it should be attractive, there should be a photograph that is actually portraying some level of competency. A veterinarian and a client interacting with a pet or something like that, showing that little detail of bond or something. We're in the process of creating that, so [laughs]. Phone number, contact information, and how they're gonna find us, and primarily the ideal homepage should at least have those. The other thing, and this new mobile world makes it need to be visible on mobile devices. Well, a menu of other items listed on the side so you can get to resources, obviously. I believe that our new websites are going to have immediately, I don't know if the main site will but the micro-sites will have buttons immediately for making an appointment, filling a prescription. And then, there are a couple other things. The main pages need to show immediate functionality. That noise is the dental machine, we need to release the air out of the compressor once we're done using it.

Y:

A sense of, a feeling of 'I want to be a part of this family', and info, contact information. That's really what all of our pages are geared towards, having them contact, having an email link on there, send us an email or call in or whatever they need.

**Question 18: Where do you think this is all going? Put another way, what direction do you believe the Website is headed?**

B:

I think [laughs] I have no idea where it's heading! I have no idea what it's doing. [laughs] But seriously, I think our website is going towards something where it's trying to ease things for our clients and make their lives easier. That's our goal, to be able to access information that they want on there, get paperwork that they want on there. Refilling medications if they want to on there, eventually. In some clinics, you're able to schedule your appointment yourself online if you want to. I have no idea how that works, but I know that they can do that, or they can request specific times, and somebody contacts them back to schedule it, but there are some practices that are having the client scheduling their appointment, which is great because they can get up at midnight, which I have some clients who leave me phone messages at midnight, and if they want to do something at midnight, they can do it and I don't have to be open, the clinic doesn't have to be open to service you. So I think that's where the website is going, so that they have access to that information when you're not here, because we can't be here 24 hours a day. The way ours goes is that they can fill it out online if they choose to now, and it comes to us as an email to me, and I think there's other ways that are even better than that for your paperwork stuff online that can work in conjunction with whatever practice management software you have, and I'm like 'that would be awesome', because then I wouldn't have to copy and paste stuff; they just fill out stuff and then it's in there! [laughs] Because that's the thing too with your website; you want to create less work for your client, but not create more work for your staff members too, because that's not what it's there for, it's to help everybody with stuff. But hopefully, someday.

H:

I'm hoping a better direction to grab more clients for us, but that means putting in more time ourselves. That's the bottom line, really, especially in this town. You've got students coming and going. I mean, he's got his clients that he's had for 20-some-odd years, but we also, we can say 'we've got all these clients', but we also lose them in two, three years once they've graduated, you know.

J:

It's going to be our main form of communication with existing and potential clients. We are in the process, I'm not renewing any of our Yellow Page ads, we'll get the free listing and that's it. So we're relying heavily, 'cause that's how people are getting their information. It's, it's vital, it's going to be your soul resource. That's how people gather. All information is going through the internet. Yeah, yeah, and you have to be careful. I mean, you need to know, you have to understand how to market it, you have to understand what your, what your uplinks are, you have to go register with all the different search engines and, I mean, it's not just your website,

it's how you market and optimize that website and how you utilize it. It's not enough just to have one.

M:

A good direction? [M and A laugh] More options, I should say, as far as how clients can get their information, what information is available to the clients. And then also things like insurance quotes is what we're headed to too. Ordering would be a big thing too; refills and all that. There's a lot of work behind it. Yeah, through our advertising on our website, we can do insurance quotes.

O:

I believe the website will ultimately be headed towards the direction of having equal weight, or perhaps outweighing phonebook presence, and will at some point become probably the main point of advertising for the hospital. And in that, I guess it's important to note that for this particular hospital, our philosophy is that in general we don't advertise. So the only advertisement that we have with any sort of consistency is our Yellow Pages ad, which over the years has gotten consistently smaller, as opposed to larger. So given that we're a practice that doesn't advertise elsewhere, pouring that into website design and maintenance and search engine drive [optimization]. Yes, that will eventually probably replace phonebook presence, I would guess.

R:

I definitely think we're headed toward an interactive feedback capability; I would like to see, in the long-term, where people could not necessarily make appointments for their animals but could definitely put requests in for that. I mean, we already have our email address on it, we already have a lot of people email us and say 'I need an appointment on Saturday between Ten and One and get him in', and we'll email them back, so we see a lot of people not using the phone, but I'd like to see it be more interactive, where clients can participate in the website. I have a feeling this link with Facebook is going to, maybe a combination between the two that makes that happen. I'd like to see it be updated more, I'd like to see where you'd go and look at it every Friday and you would see something new; that would be my long-term goal for it, that you truly, as part of checking your email on Friday, you're gonna check our website and see what we got going new this week. And we do have some plans to have some things available in the new year that would encourage people to do that. Got some weekly things that you'd start looking to see if they changed every week, and Monday Madness, that's what it's going to be, so that's where I think I see it heading, more existing clients using it as a tool. I'd like to see more links on ours as well; linking with community partners that we feel are important. Like one that came to me in the middle of the night is we don't have our emergency links; we have two places we recommend for after-hours emergencies, and I should have that information on our website, but we don't. It's advertising for somebody else, but it's who we would refer to, so why not? And they call us to get that information on the phone, but I think we should be putting everything we do on the phone should be available on the website too. Even so far as, you know, it's mappable. So, you know, who are they recommending after-hours, and now I can just map it, Google Map it, on my smartphone and get there instead of getting the number from the phone and having to call them and say 'where are you located?', and so yeah, I'd like to see it be more of an interactive tool in that respect. Source of information. I don't know, sometimes I

think websites are always geared towards 'I'm new to the business', but I really think, especially in veterinary where, you know, at least you're only here once a year. You should be, I'd like to see our clients have more contact with us, and a website would be a great way to encourage that. I mean I'd like to see our clients have us on their favorites, you know, just check in, what are we doing this week, what's going on this month here. And I think links to other community partners is important, I mean, we've been in this community a long time, so I think it's important that we kind of include ourselves in the extended family.

V:

Essentially, again, what we're doing now is creating a new tool. That's my main goal; I want it to be a user-friendly tool for our clients. I want it to be, well, as it is right now, it's a main focus of advertising, and that's where people are going to find you, they're going to see immediately who you are, what you do, so that's kind of an open door portrayal of 'if you can't come to my building, this is where I am and this is what we do'. But primarily, I'd have to say one, an advertising tool and two, it's needs to be and it's going to be a functional tool for our clients to use. Education, and then, again, scheduling appointments, filling prescriptions, stuff like that.

Y:

I think we're heading towards a much more professional-looking website with more of a modern look and feel and a sense of family. Somewhere where someone wants to bring their pet, you know, just on their day off to say hi.

APPENDIX H (8)

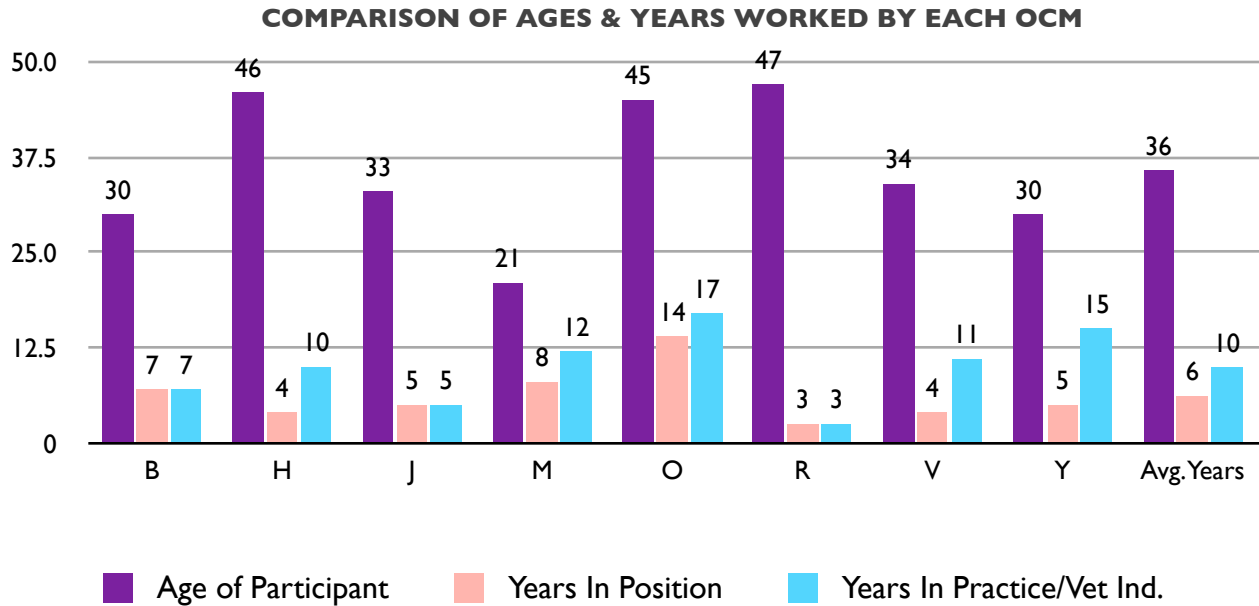
H.1 (8.1) - Demographics Charts

COMPARISON OF YEARS WORKED FOR EACH OCM

NAME: Alice M. Weaver    DATE: May 1, 2012    Demographics Information

Summary of Ages & Years Worked by Online Content Managers (OCMs)

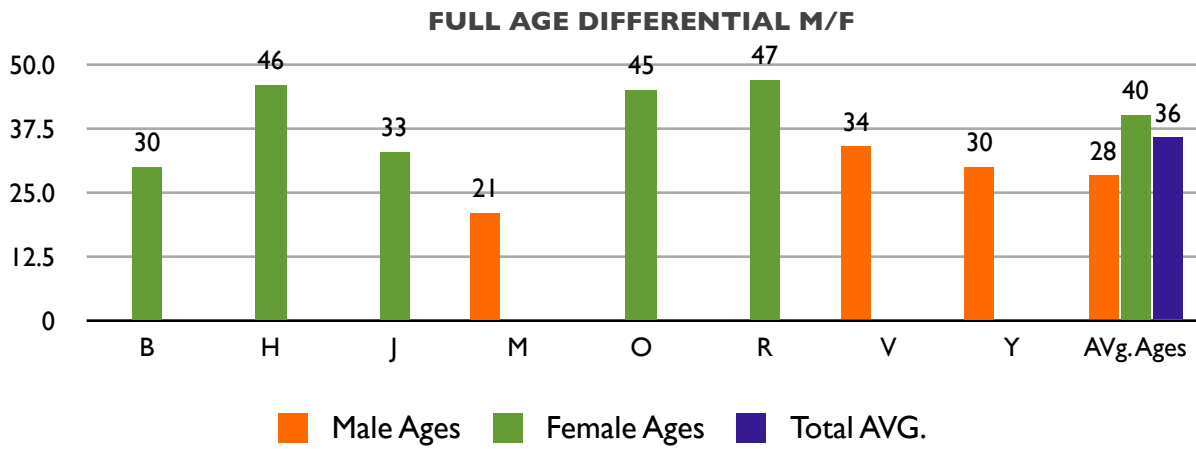
PRACTICE CODE	B	H	J	M	O	R	V	Y	AVG. YEARS
AGE OF PARTICIPANT	30	46	33	21	45	47	34	30	35.75
YEARS IN POSITION	7	4	5	8	14	2.5	4	5	6.19
YEARS IN PRACTICE/VET IND.	7	10	5	12	17	2.5	11	15	9.94



# AGE DIFFERENTIAL BETWEEN GENDERS, PERCENTAGE M/F

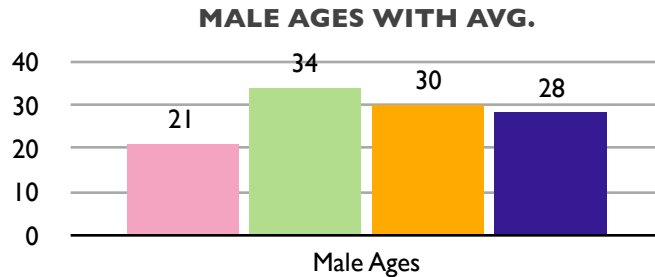
**NAME:** ALICE M.WEAVER    **DATE:** MAY 1, 2012    DEMOGRAPHICS INFORMATION

PRACTICE CODE	B	H	J	M	O	R	V	Y	AVG. AGES
MALE AGES				21			34	30	28.33
FEMALE AGES	30	46	33		45	47			40.20
TOTAL AVG.									35.75



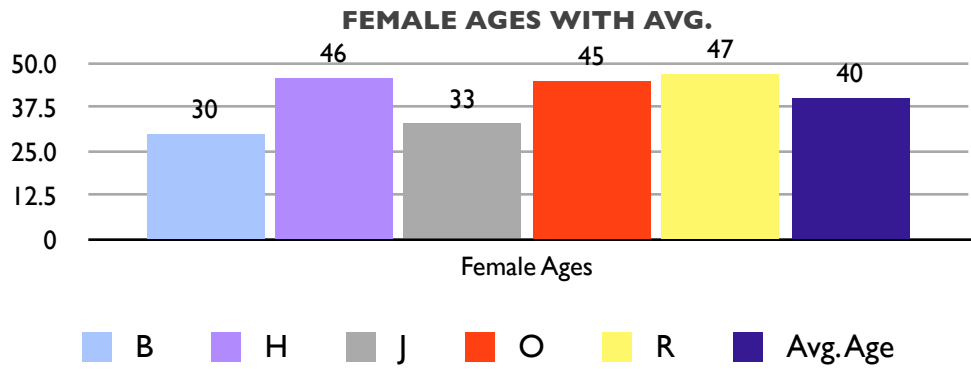
	M	V	Y	AVG. AGE
MALE AGES	21	34	30	28.33

Legend: M (Pink), V (Light Green), Y (Orange), Avg.Age (Purple)



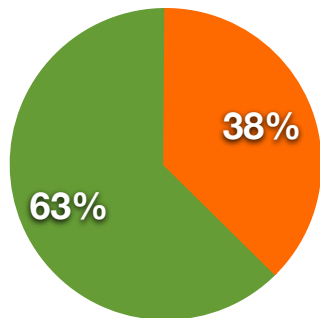


	B	H	J	O	R	AVG. AGE
FEMALE AGES	30	46	33	45	47	40.2



	MALE	FEMALE
GENDER	3	5

**GENDER OF PARTICIPANTS**



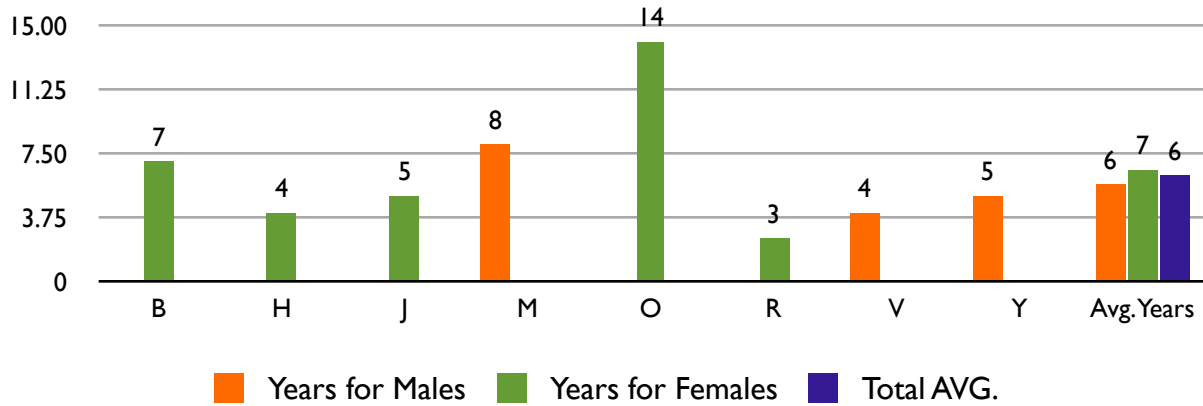
● Male ● Female

# YEARS IN POSITION DIFFERENTIAL BETWEEN GENDERS

**NAME:** ALICE M.WEAVER    **DATE:** MAY 1, 2012    **DEMOGRAPHICS INFORMATION**

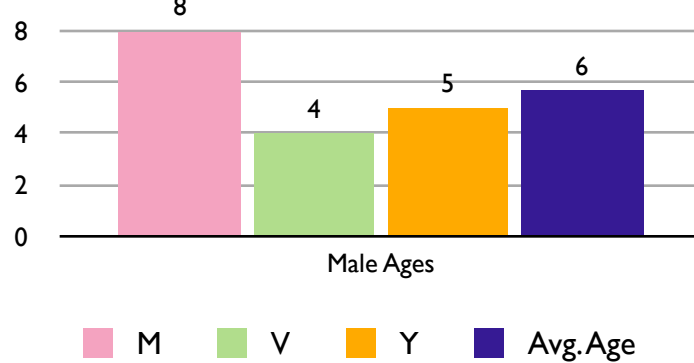
PRACTICE CODE	B	H	J	M	O	R	V	Y	AVG. YEARS
YEARS FOR MALES				8			4	5	5.67
YEARS FOR FEMALES	7	4	5		14	2.5			6.50
TOTAL AVG.									6.19

**FULL YEARS IN POSITION DIFFERENTIAL M/F**

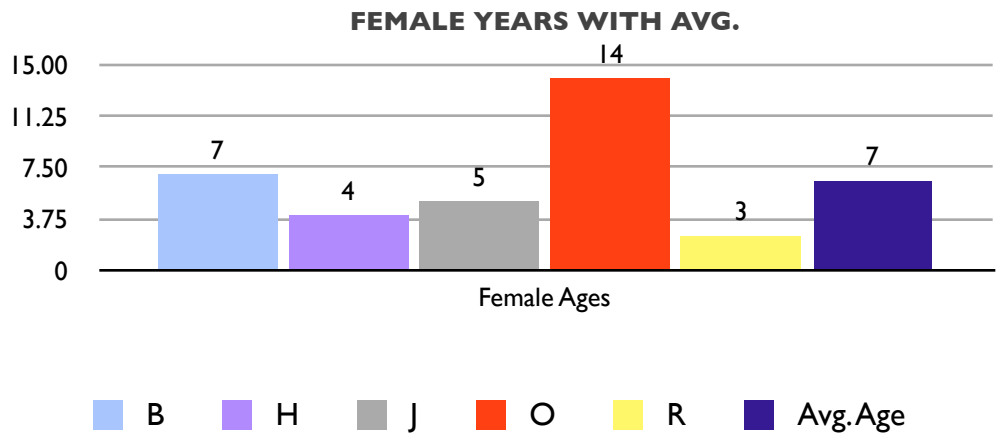


	M	V	Y	AVG. AGE
MALE AGES	8	4	5	5.67

**MALE YEARS WITH AVG.**



	<b>B</b>	<b>H</b>	<b>J</b>	<b>O</b>	<b>R</b>	<b>AVG. AGE</b>
FEMALE AGES	7	4	5	14	2.5	6.5

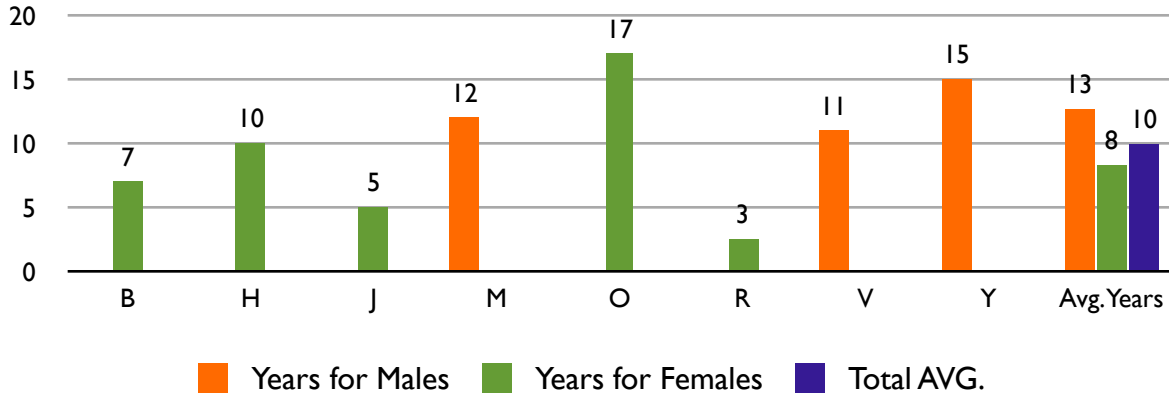


# YEARS IN PRACTICE/VET INDUSTRY DIFFERENTIAL BETWEEN GENDERS

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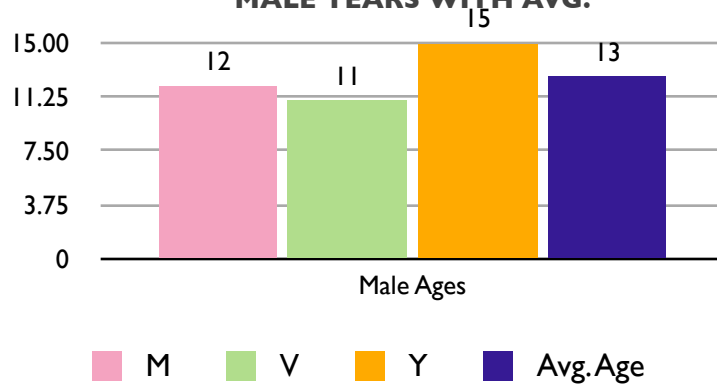
PRACTICE CODE	B	H	J	M	O	R	V	Y	AVG. YEARS
YEARS FOR MALES				12			11	15	12.67
YEARS FOR FEMALES	7	10	5		17	2.5			8.30
TOTAL AVG.									9.94

**FULL YEARS IN PRACTICE/VET INDUSTRY DIFFERENTIAL M/F**

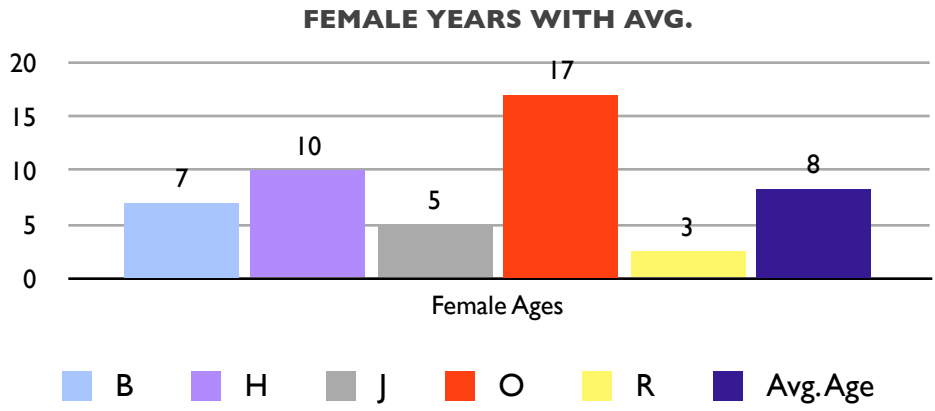


	M	V	Y	AVG. AGE
MALE AGES	12	11	15	12.67

**MALE YEARS WITH AVG.**



	B	H	J	O	R	AVG. AGE
FEMALE AGES	7	10	5	17	2.5	8.3

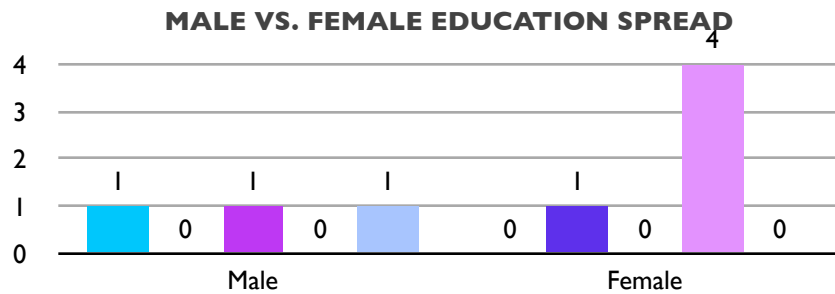


# EDUCATION & JOB TITLE DIFFERENTIAL BETWEEN GENDERS

**NAME:** ALICE M. WEAVER    **DATE:** MAY 1, 2012    **DEMOGRAPHICS INFORMATION**

EDUCATION	MALE	FEMALE
HIGH SCHOOL DIPLOMA	1	0
VETERINARY TECHNICIAN DEGREE	0	1
ASSOCIATE'S DEGREE	1	0
BACHELOR'S DEGREE	0	4
MASTER'S DEGREE	1	0

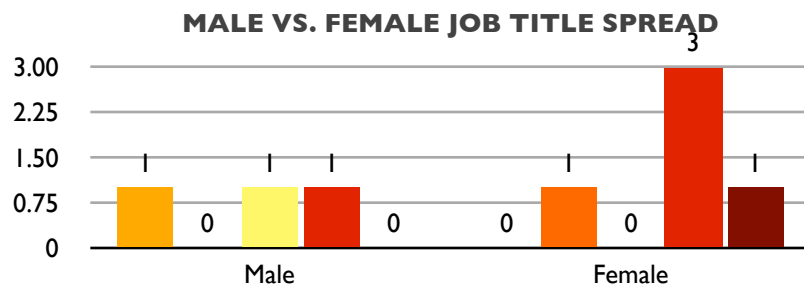
**MALE VS. FEMALE EDUCATION SPREAD**



■ High School Diploma    ■ Veterinary Technician Degree    ■ Associate's Degree  
■ Bachelor's Degree    ■ Master's Degree

OFFICIAL TITLE	MALE	FEMALE
VETERINARY ASSISTANT	1	0
HOSPITAL COORDINATOR	0	1
VETERINARY TECHNICIAN	1	0
PRACTICE MANAGER	1	3
CLINIC DIRECTOR	0	1

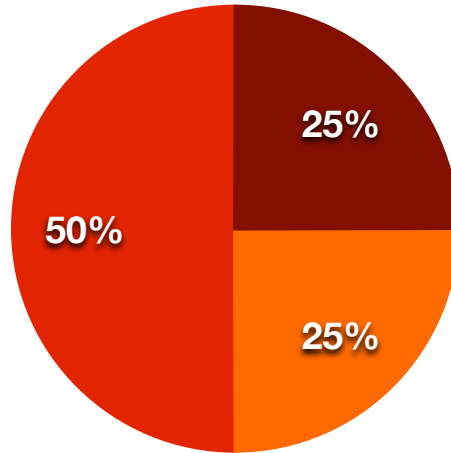
**MALE VS. FEMALE JOB TITLE SPREAD**



■ Veterinary Assistant    ■ Hospital Coordinator    ■ Veterinary Technician  
■ Practice Manager    ■ Clinic Director

	CLINIC DIRECTOR	HOSPITAL COORDINATOR	PRACTICE MANAGER
JOB TITLES	1	1	2

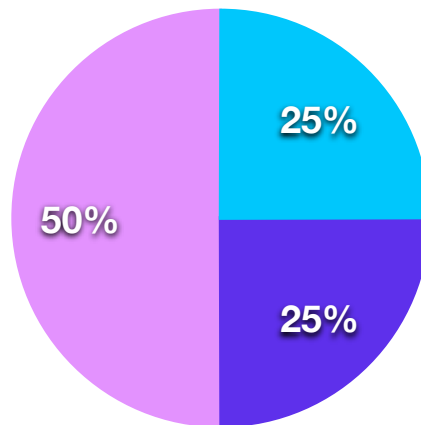
**JOB TITLES GIVEN TO BACHELOR'S DEGREE HOLDERS**



● Clinic Director ● Hospital Coordinator ● Practice Manager

	HS DIPLOMA	VET TECH DEGREE	BACHELOR'S DEGREE
EDUCATION	1	1	2

**EDUCATION SPREAD OF PRACTICE MANAGERS**



● HS Diploma ● Vet Tech Degree ● Bachelor's Degree

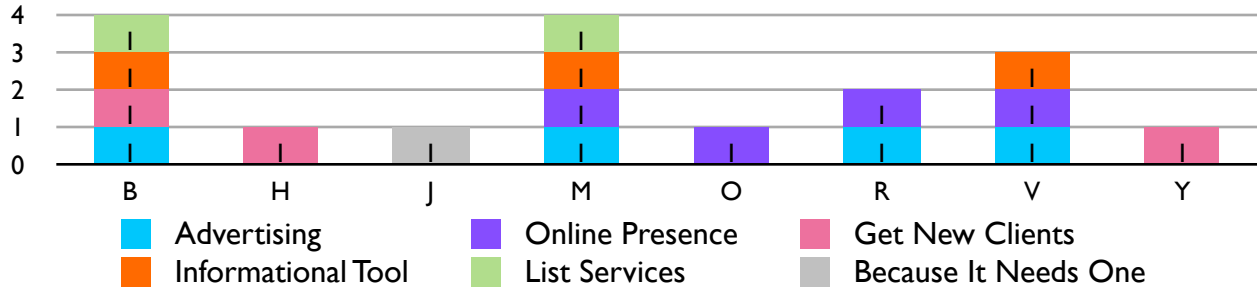
# INTERVIEW RESPONSES, QUESTION #1

NAME: Alice M. Weaver    DATE: May 1, 2012

QUESTION:  
Why does the practice have a website?

PRACTICE	B	H	J	M	O	R	V	Y
ADVERTISING	1			1		1	1	
ONLINE PRESENCE				1	1	1	1	
GET NEW CLIENTS	1	1						1
INFORMATIONAL TOOL	1			1			1	
LIST SERVICES	1			1				
BECAUSE IT NEEDS ONE			1					

RESPONSES GROUPED BY PRACTICE



RESPONSES GROUPED BY FREQUENCY





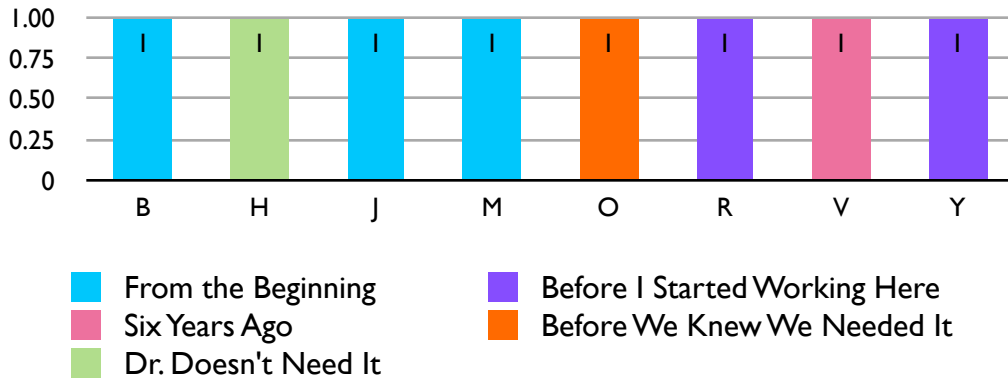
## INTERVIEW RESPONSES, QUESTION #2

**NAME:** Alice M. Weaver    **DATE:** May 1, 2012

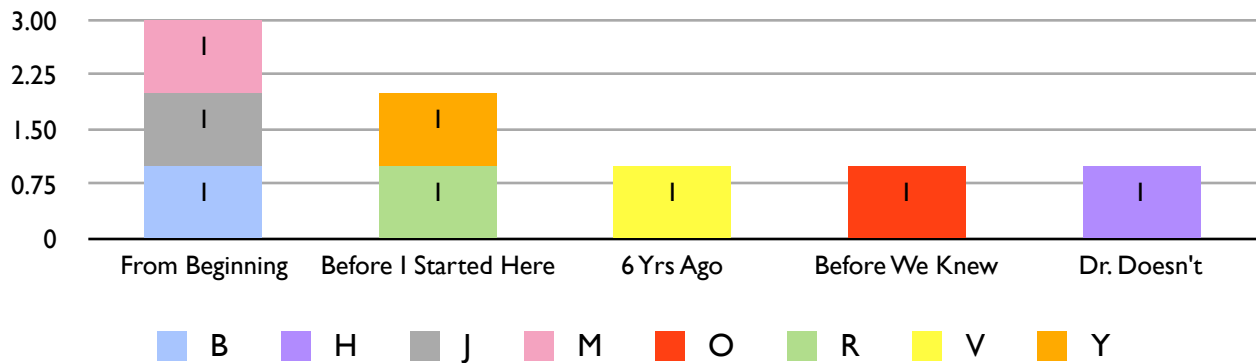
**QUESTION:**  
When was it realized that the practice needed a website?

PRACTICE	B	H	J	M	O	R	V	Y
FROM THE BEGINNING	1		1	1				
BEFORE I STARTED WORKING HERE						1		1
SIX YEARS AGO							1	
BEFORE WE KNEW WE NEEDED IT					1			
DR. DOESN'T NEED IT		1						

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #3

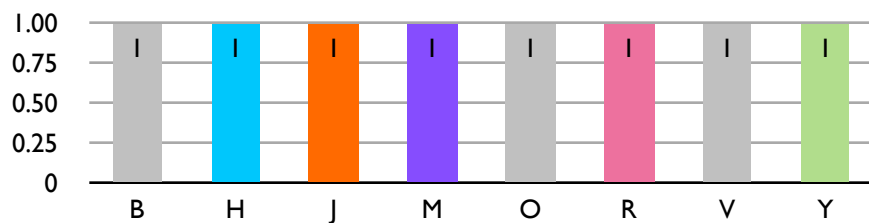
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

How much time elapsed between the realization of needing a website and the actualization of having the website operational online?

PRACTICE	B	H	J	M	O	R	V	Y
STILL IN THE PROCESS		1						
TWO MONTHS				1				
THREE TO FOUR MONTHS						1		
ONE YEAR			1					
18 MONTHS								1
TWO YEARS	1				1		1	

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #4

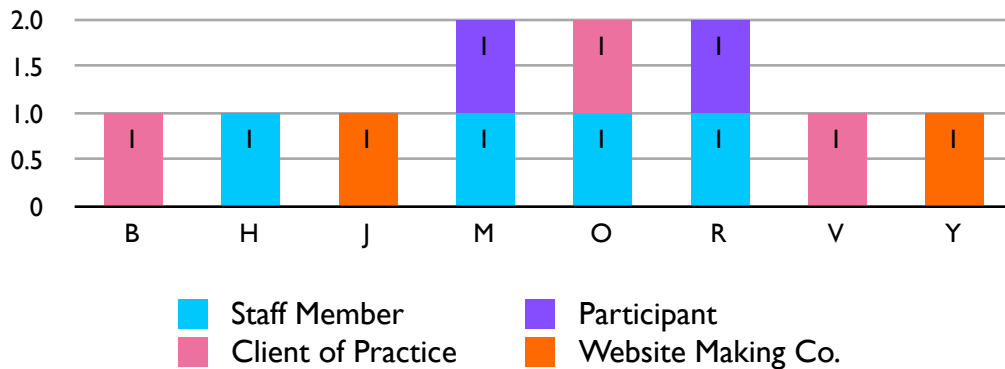
**NAME:** Alice M. Weaver    **DATE:** May 1, 2012

## QUESTION:

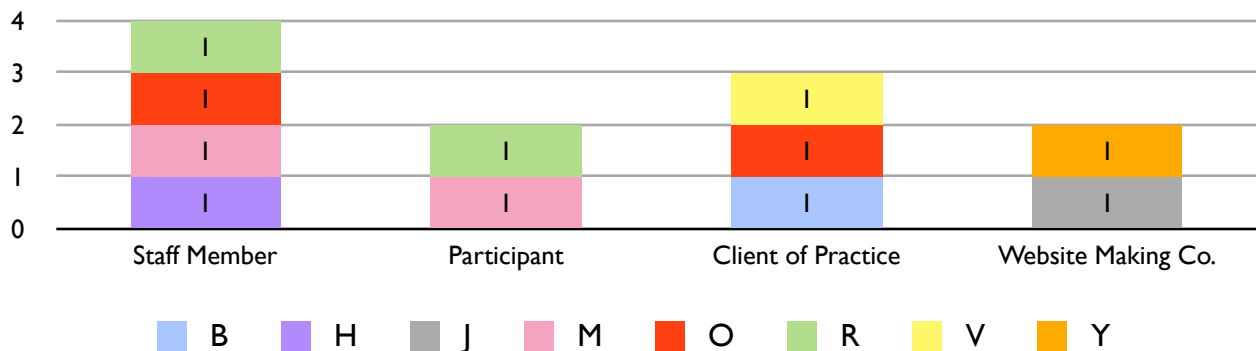
Was the website created by a Staff Member, or was it contracted out to a website making company?

PRACTICE	B	H	J	M	O	R	V	Y
STAFF MEMBER		1		1	1	1		
PARTICIPANT				1		1		
CLIENT OF PRACTICE	1				1		1	
WEBSITE MAKING CO.			1					1

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #5 (A&B)

**NAME:** Alice M. Weaver    **DATE:** May 1, 2012

## QUESTION:

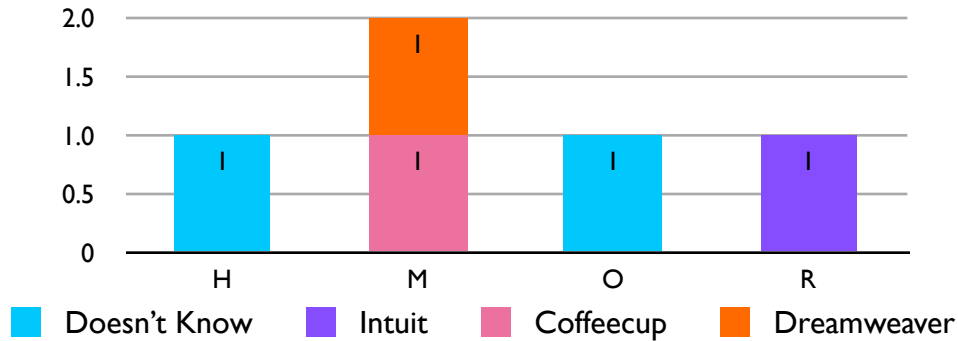
A: If the website was created by a Staff Member, what programming did you use?

B: If the website was contracted out, how was the company chosen?

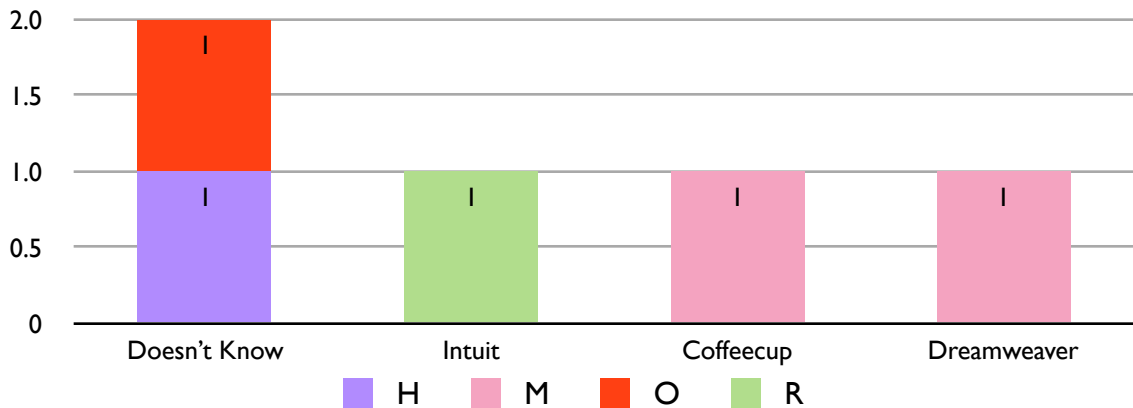
Summary of Responses to 5A

PRACTICE	H	M	O	R
DOESN'T KNOW	1		1	
INTUIT				1
COFFEECUP		1		
DREAMWEAVER		1		

RESPONSES TO 5A GROUPED BY PRACTICE



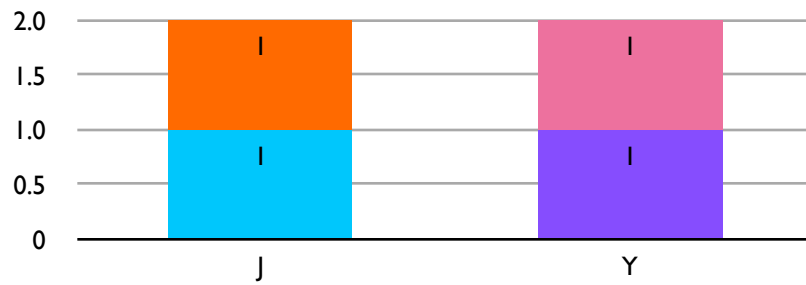
RESPONSES TO 5A GROUPED BY FREQUENCY



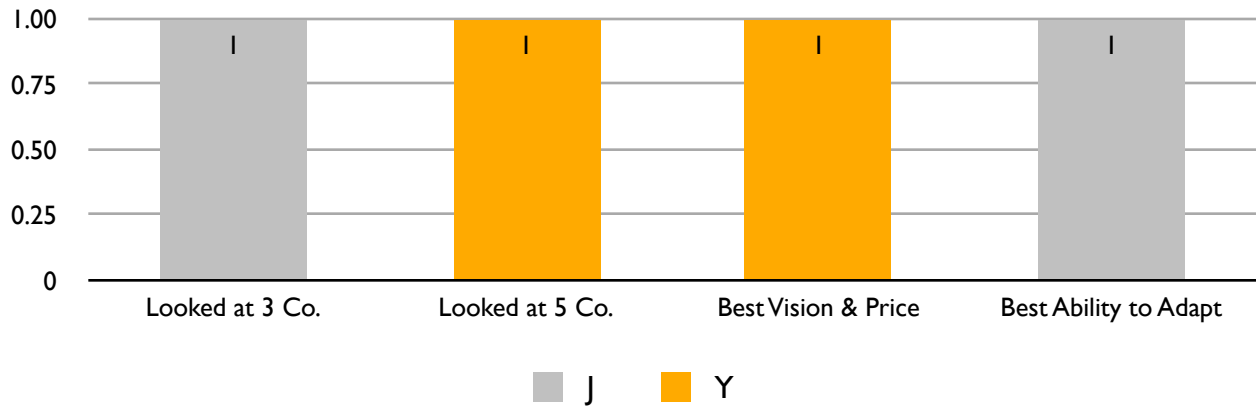
Summary of Responses to 5B

PRACTICE	J	Y
LOOKED AT 3 COMPANIES	1	
LOOKED AT 5 COMPANIES		1
BEST VISION & PRICE		1
BEST ABILITY TO ADAPT TO CLIENT'S VISION	1	

RESPONSES TO 5B GROUPED BY PRACTICE



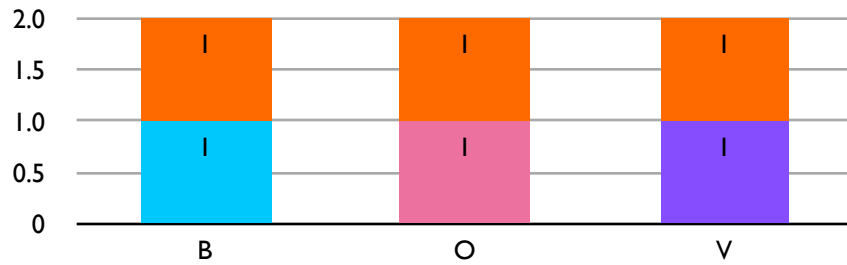
RESPONSES TO 5B GROUPED BY FREQUENCY



Summary of Responses for Practices with Client-Made Websites

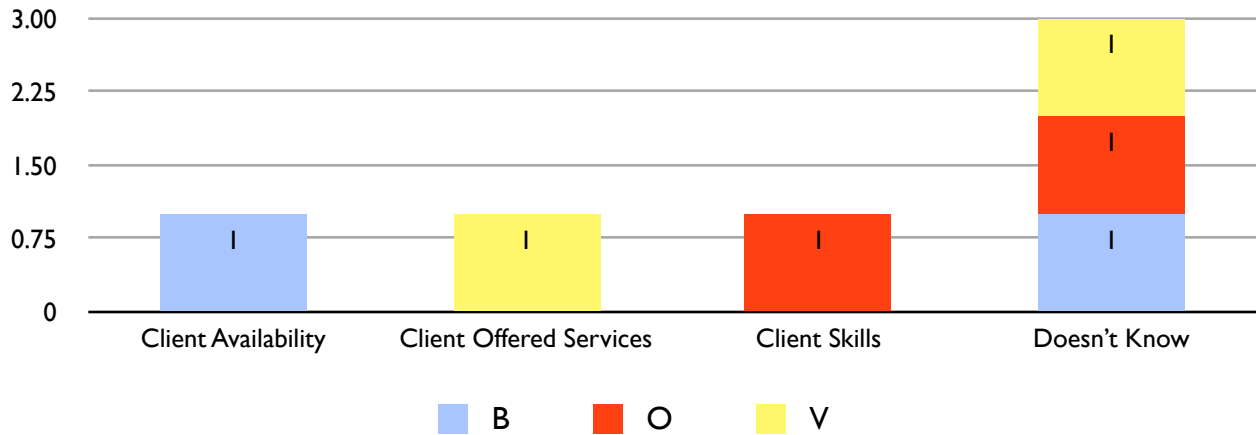
PRACTICE	B	O	V
CLIENT CHOSEN BY AVAILABILITY	1		
CLIENT OFFERED THEIR SERVICES			1
CLIENT CHOSEN BY SKILL		1	
DOESN'T KNOW THE PROGRAM USED BY CLIENT	1	1	1

**RESPONSES TO CLIENT-MADE WEBSITES BY PRACTICE**



- Client Chosen by Availability
- Client Offered Their Services
- Client Chosen by Skill
- Doesn't Know the Program Used by Client

**RESPONSES TO CLIENT-MADE WEBSITES BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #6

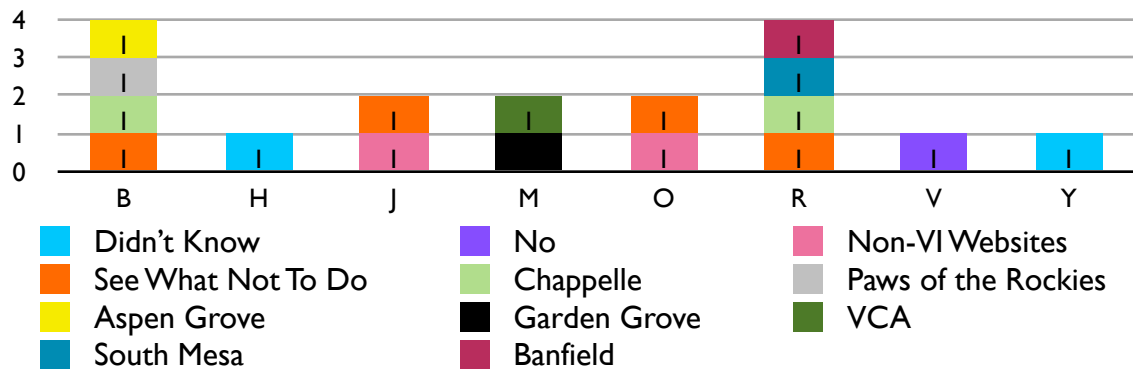
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

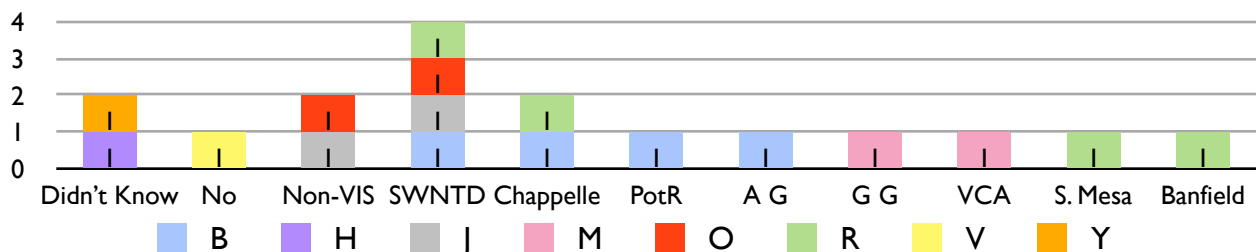
Were there any exemplary or model veterinary practice website that influenced the look of the practice's website?

PRACTICE	B	H	J	M	O	R	V	Y
DIDN'T KNOW		1						1
NO							1	
NON-VI WEBSITES			1		1			
SEE WHAT NOT TO DO	1		1		1	1		
CHAPPELLE	1					1		
PAWS OF THE ROCKIES	1							
ASPEN GROVE	1							
GARDEN GROVE					1			
VCA					1			
SOUTH MESA							1	
BANFIELD							1	

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #7

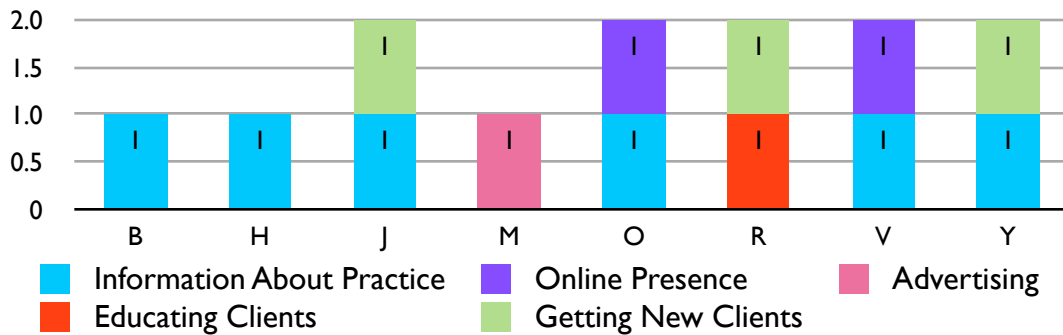
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

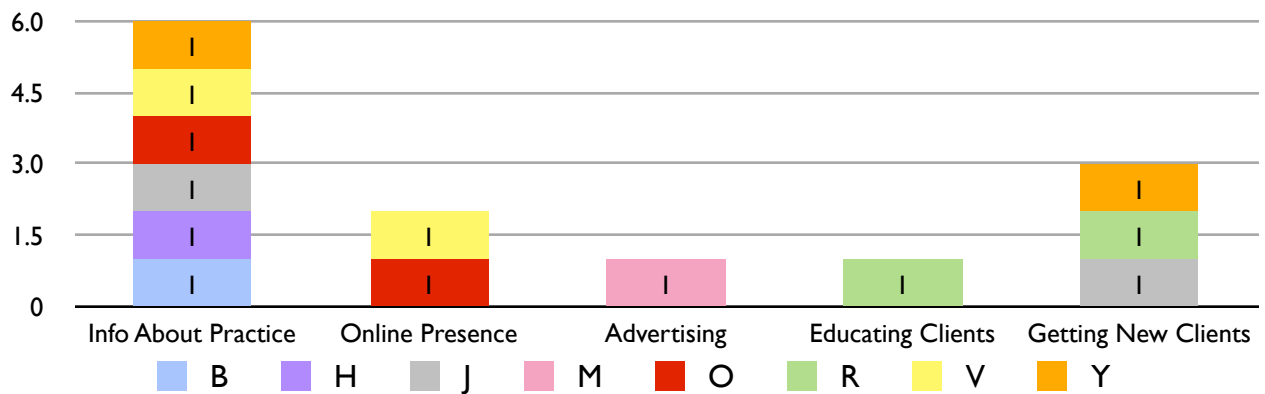
What is the most important point of having a website for the practice?

PRACTICE	B	H	J	M	O	R	V	Y
INFORMATION ABOUT PRACTICE	1	1	1		1		1	1
ONLINE PRESENCE					1		1	
ADVERTISING				1				
EDUCATING CLIENTS						1		
GETTING NEW CLIENTS			1			1		1

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**





# INTERVIEW RESPONSES, QUESTION #8

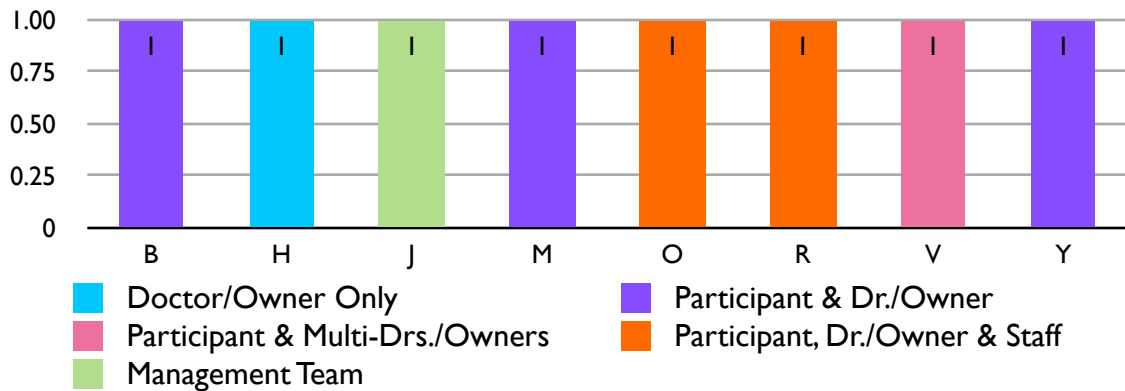
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

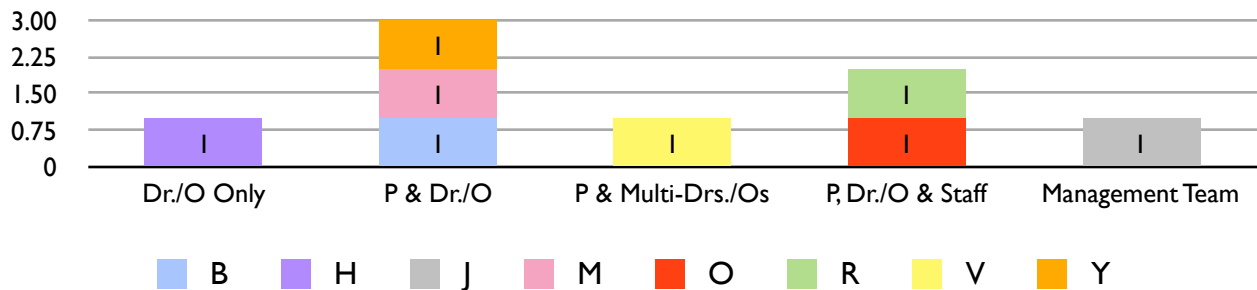
Who decides what content goes on the website?

PRACTICE	B	H	J	M	O	R	V	Y
DOCTOR/OWNER ONLY		1						
PARTICIPANT & DR./OWNER	1			1				1
PARTICIPANT & MULTI-DRS./OWNERS							1	
PARTICIPANT, DR./OWNER & STAFF					1	1		
MANAGEMENT TEAM			1					

RESPONSES GROUPED BY PRACTICE



RESPONSES GROUPED BY FREQUENCY



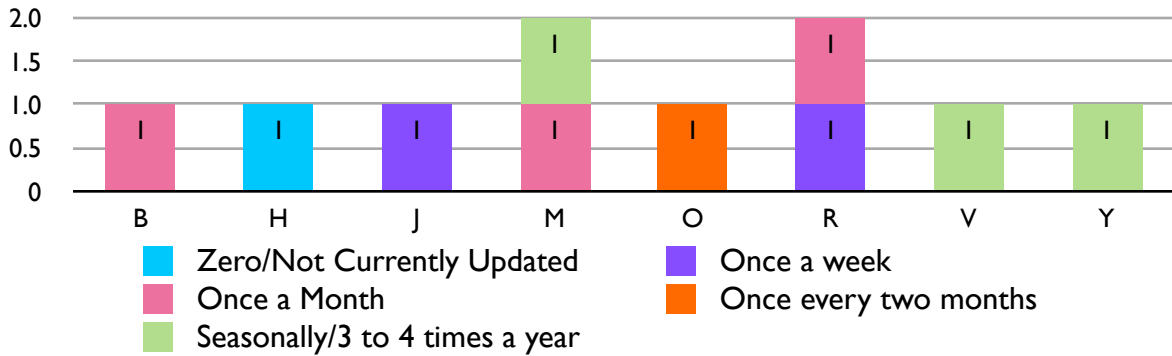
# INTERVIEW RESPONSES, QUESTION #9

**NAME:** Alice M. Weaver **DATE:** May 1, 2012

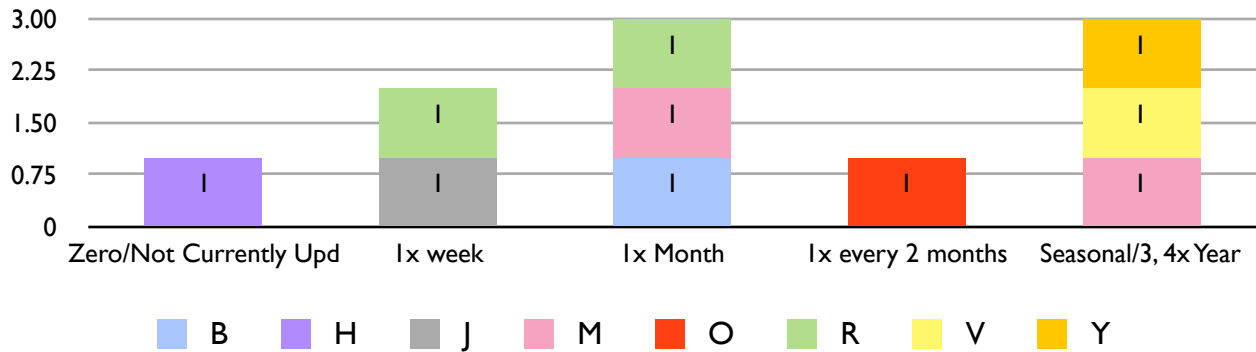
**QUESTION:**  
How often is the website updated?

PRACTICE	B	H	J	M	O	R	V	Y
ZERO/NOT CURRENTLY UPDATED		1						
ONCE A WEEK			1			1		
ONCE A MONTH	1			1		1		
ONCE EVERY TWO MONTHS					1			
SEASONALLY/3 TO 4 TIMES A YEAR				1			1	1

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #11

**NAME:** Alice M. Weaver

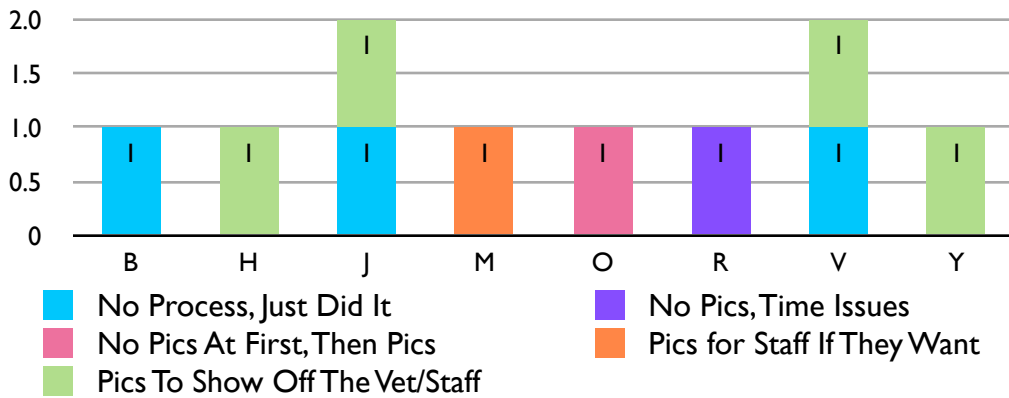
**DATE:** May 1, 2012

## QUESTION:

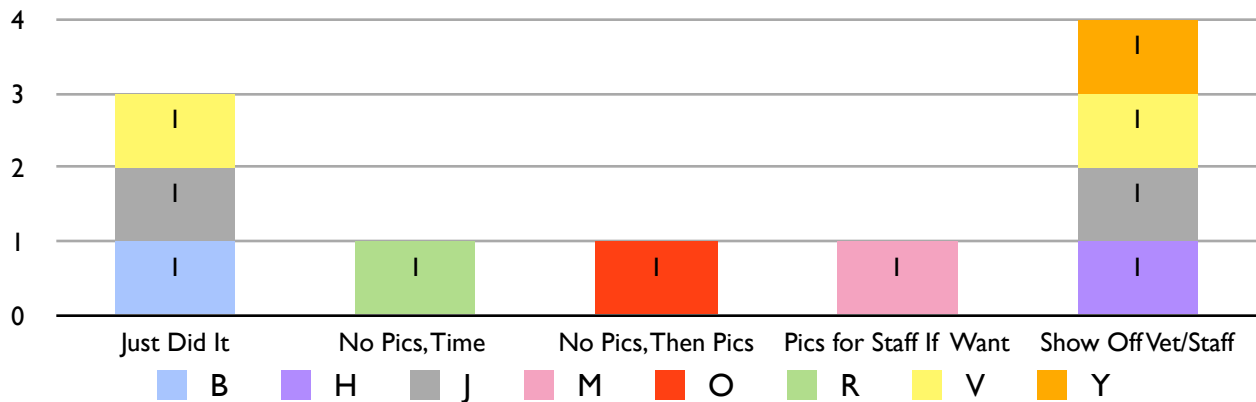
What process went into the deciding whether or not to use photographs with the veterinarian and staff mini-biographies?

PRACTICE	B	H	J	M	O	R	V	Y
NO PROCESS, JUST DID IT	1		1				1	
NO PICS, TIME ISSUES						1		
NO PICS AT FIRST, THEN PICS					1			
PICS FOR STAFF IF THEY WANT				1				
PICS TO SHOW OFF THE VET/STAFF		1	1				1	1

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #12

**NAME:** Alice M. Weaver

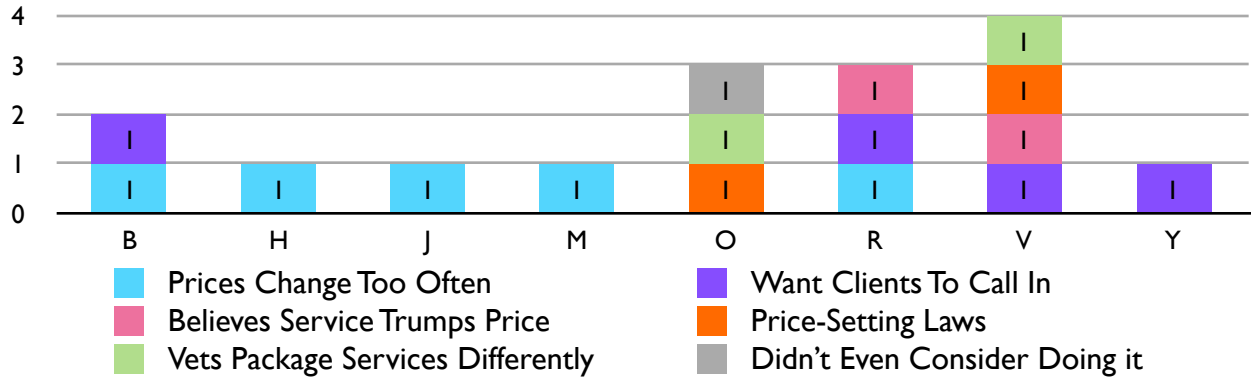
**DATE:** May 1, 2012

**QUESTION:**

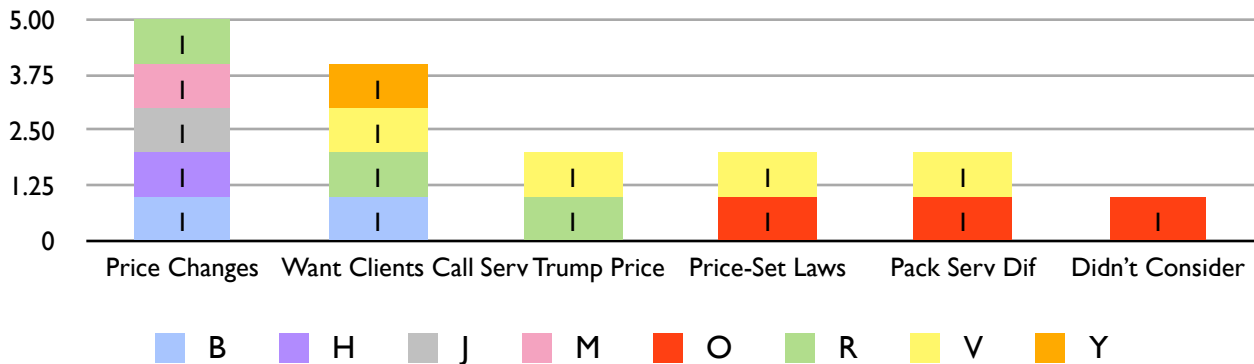
What process went into deciding against putting a price list for services on the site?

PRACTICE	B	H	J	M	O	R	V	Y
PRICES CHANGE TOO OFTEN	1	1	1	1		1		
WANT CLIENTS TO CALL IN	1					1	1	1
BELIEVES SERVICE TRUMPS PRICE						1	1	
PRICE-SETTING LAWS					1		1	
VETS PACKAGE SERVICES DIFFERENTLY					1		1	
DIDN'T EVEN CONSIDER DOING IT					1			

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #13

**NAME:** Alice M. Weaver

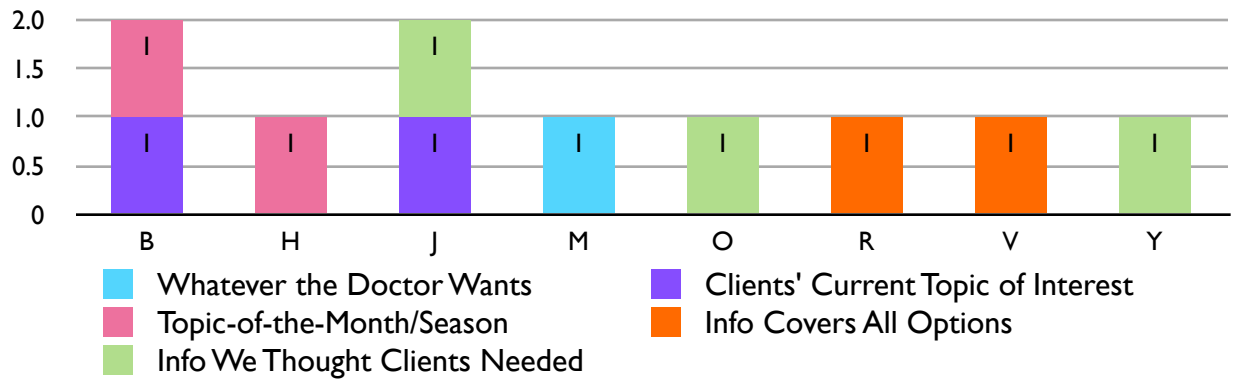
**DATE:** May 1, 2012

## QUESTION:

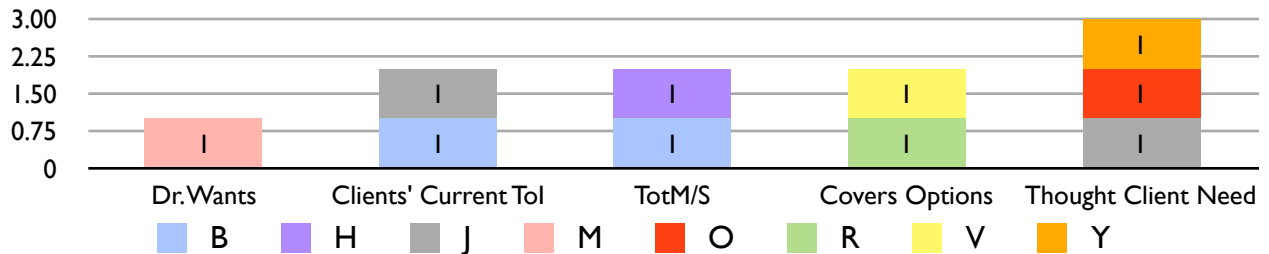
What process went into selecting client education material?

PRACTICE	B	H	J	M	O	R	V	Y
WHATEVER THE DOCTOR WANTS				1				
CLIENTS' CURRENT TOPIC OF INTEREST	1		1					
TOPIC-OF-THE-MONTH/SEASON	1	1						
INFO COVERS ALL OPTIONS						1	1	
INFO WE THOUGHT CLIENTS NEEDED			1		1			1

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #14 (A&B)

**NAME:** Alice M. Weaver

**DATE:** May 1, 2012

**QUESTION:**

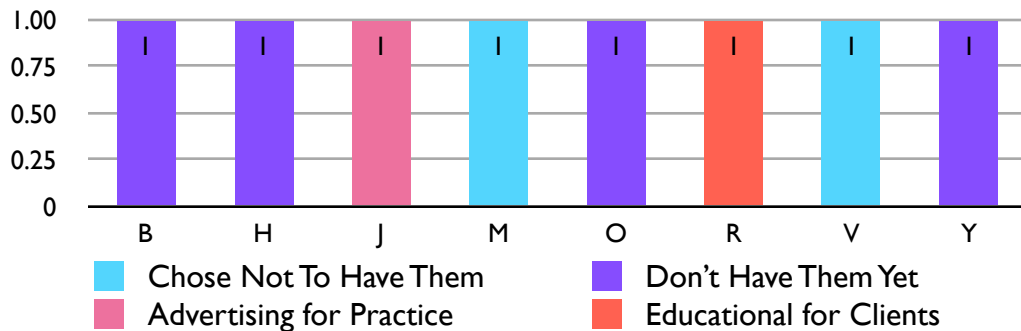
A: What process went into deciding whether or not to use embedded videos?

B: What process went into deciding which videos would be embedded in the website?

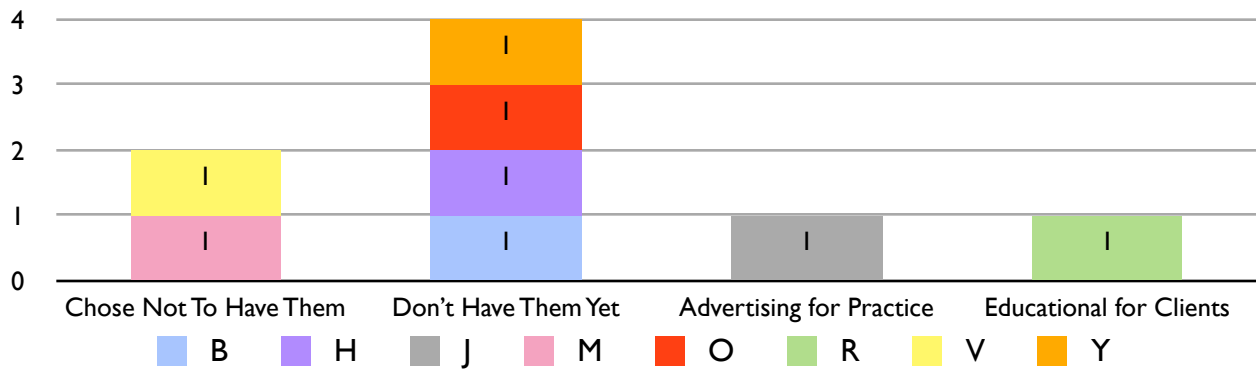
Summary of Responses to 14A

PRACTICE	B	H	J	M	O	R	V	Y
CHOSE NOT TO HAVE THEM				1			1	
DON'T HAVE THEM YET	1	1			1			1
ADVERTISING FOR PRACTICE			1					
EDUCATIONAL FOR CLIENTS						1		

RESPONSES TO 14A GROUPED BY PRACTICE



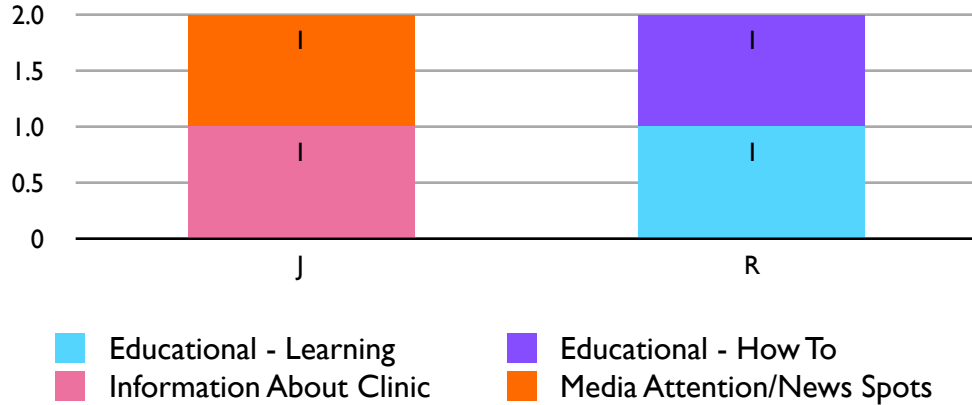
RESPONSES TO 14A GROUPED BY FREQUENCY



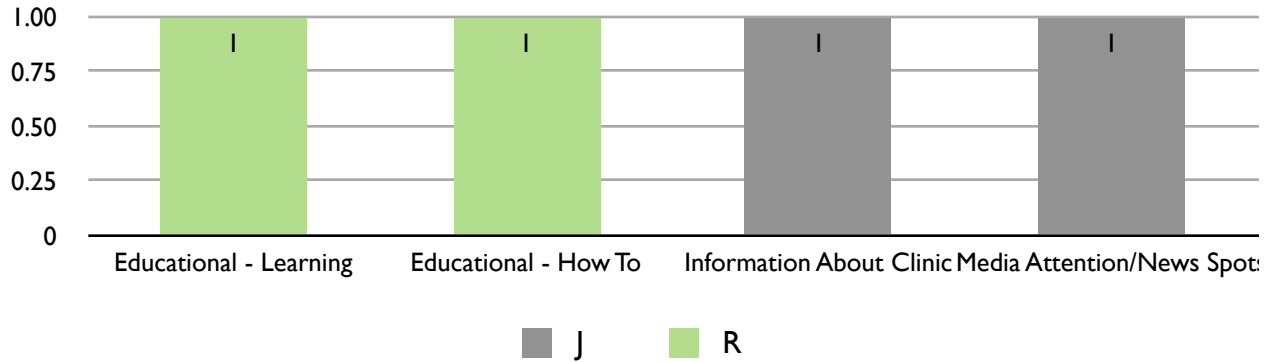
Summary of Responses to 14B

PRACTICE	J	R
EDUCATIONAL - LEARNING		1
EDUCATIONAL - HOW TO		1
INFORMATION ABOUT CLINIC	1	
MEDIA ATTENTION/NEWS SPOTS	1	

RESPONSES TO 14B GROUPED BY PRACTICE



RESPONSES TO 14B GROUPED BY FREQUENCY



# INTERVIEW RESPONSES, QUESTION #15

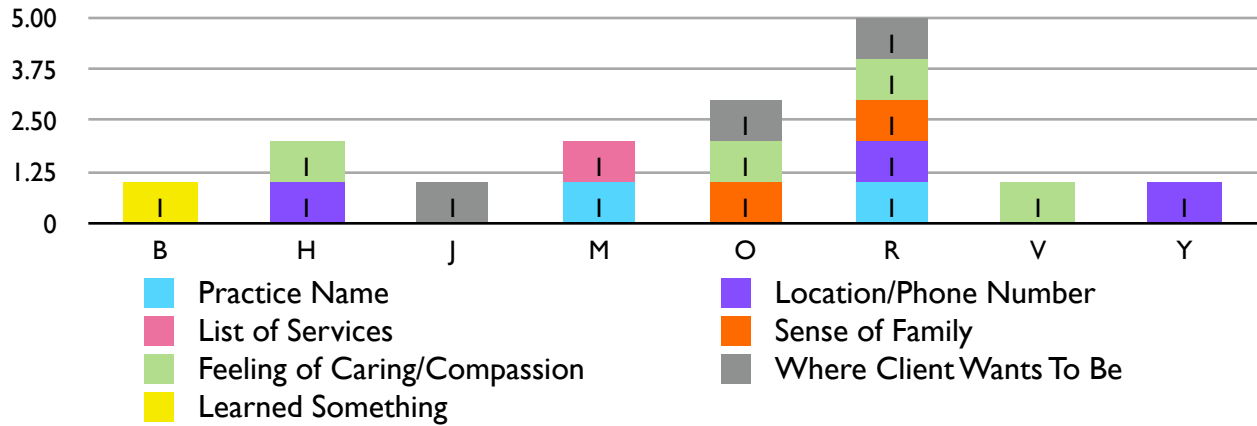
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

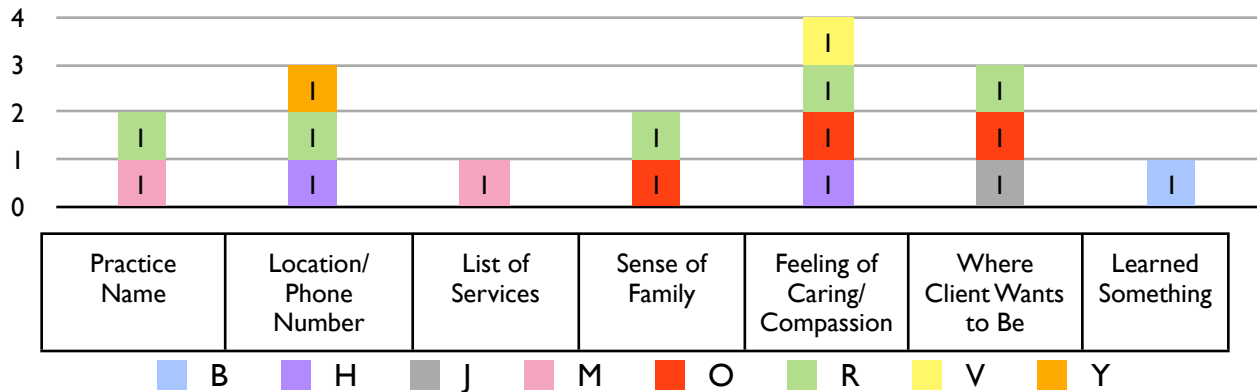
What does the practice hope that the audience remembers after visiting the website?

PRACTICE	B	H	J	M	O	R	V	Y
PRACTICE NAME				1		1		
LOCATION/PHONE NUMBER		1				1		1
LIST OF SERVICES				1				
SENSE OF FAMILY					1	1		
FEELING OF CARING/COMPASSION		1			1	1	1	
WHERE CLIENT WANTS TO BE			1		1	1		
LEARNED SOMETHING	1							

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**





# INTERVIEW RESPONSES, QUESTION #16

**NAME:** Alice M. Weaver **DATE:** May 1, 2012

## QUESTION:

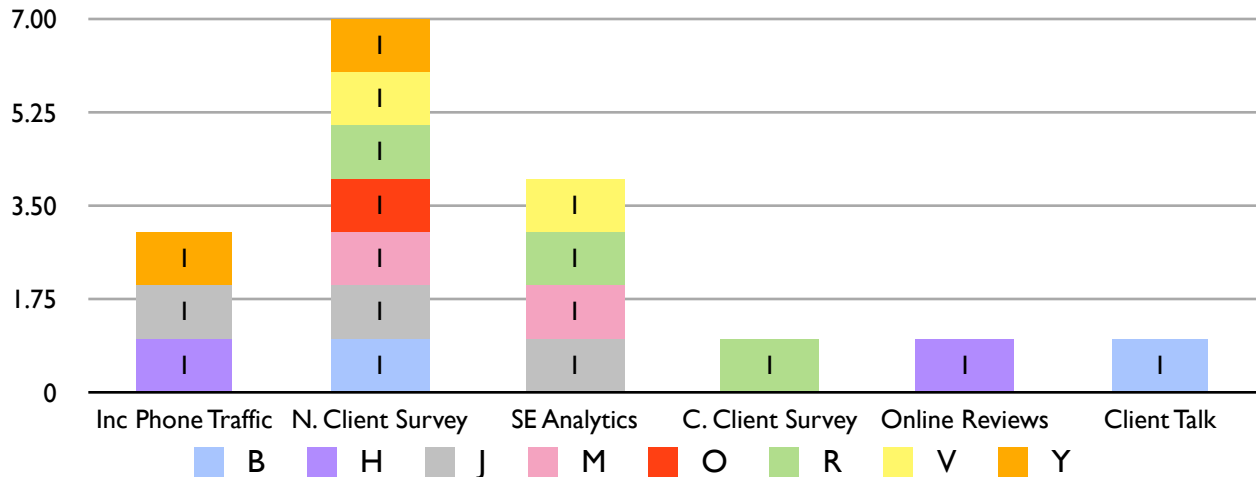
How is the success of the website measured in the practice? Client retention, draw, increased phone traffic, etc.?

PRACTICE	B	H	J	M	O	R	V	Y
INCREASED PHONE TRAFFIC		1	1					1
NEW CLIENT SURVEY	1		1	1	1	1	1	1
SEARCH ENGINE ANALYTICS			1	1		1	1	
CURRENT CLIENT SURVEY						1		
ONLINE REVIEWS		1						
CLIENTS TALK TO STAFF	1							

**RESPONSES GROUPED BY PRACTICE**



**RESPONSES GROUPED BY FREQUENCY**



# INTERVIEW RESPONSES, QUESTION #17

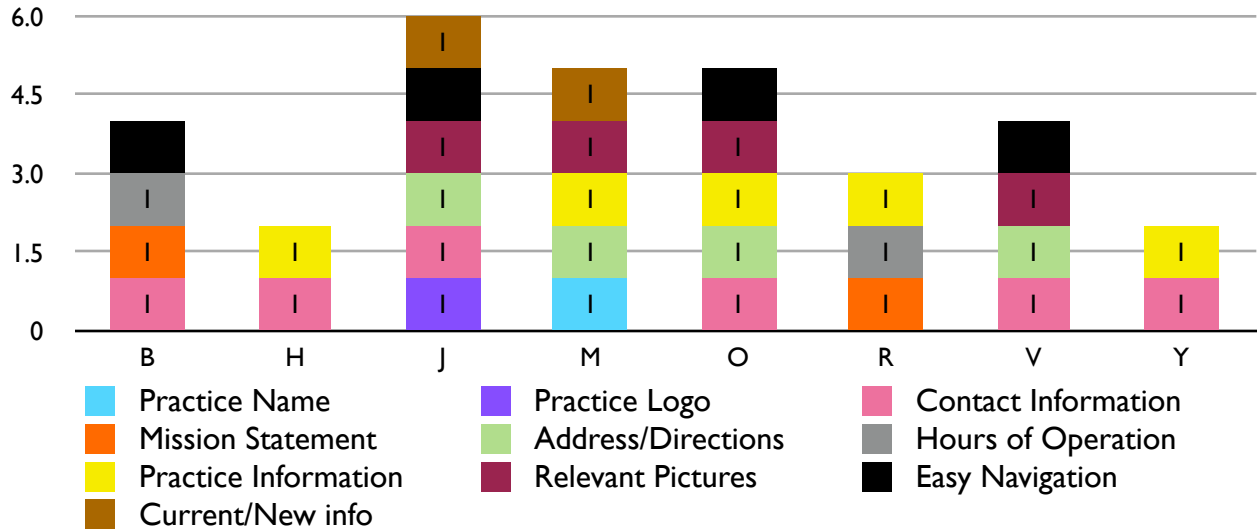
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

**QUESTION:**

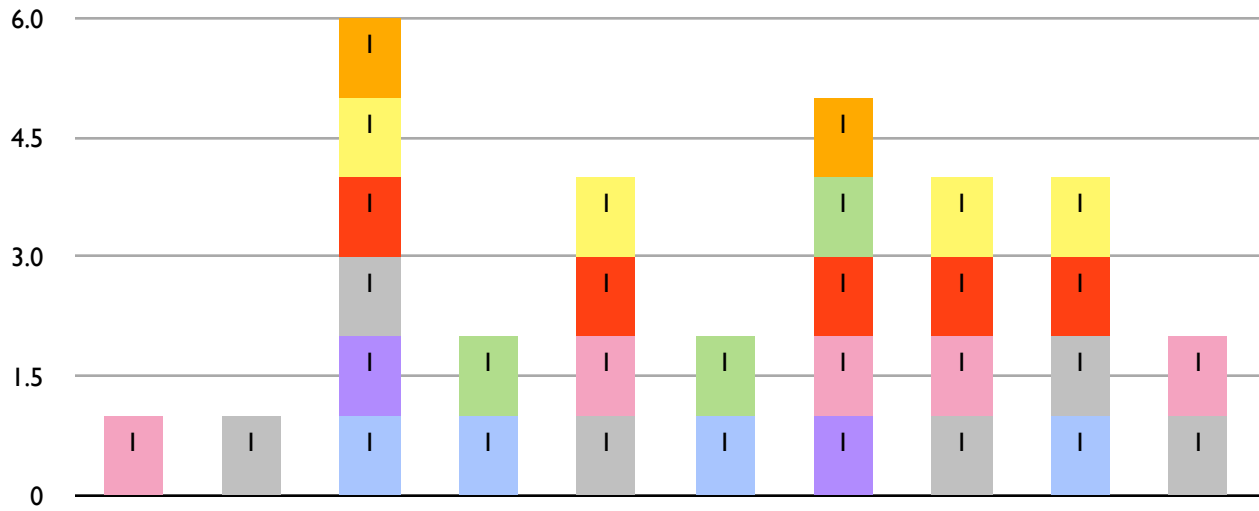
Describe the perfect veterinary homepage. What vital material would be shown?

PRACTICE	B	H	J	M	O	R	V	Y
PRACTICE NAME				1				
PRACTICE LOGO			1					
CONTACT INFORMATION	1	1	1		1		1	1
MISSION STATEMENT	1					1		
ADDRESS/DIRECTIONS			1	1	1		1	
HOURS OF OPERATION	1					1		
PRACTICE INFORMATION		1		1	1	1		1
RELEVANT PICTURES			1	1	1		1	
EASY NAVIGATION	1		1		1		1	
CURRENT/NEW INFO			1	1				

**RESPONSES GROUPED BY PRACTICE**



### RESPONSES GROUPED BY FREQUENCY



Practice Name	Practice Logo	Contact Info	Mission Statement	Address/Directions	Hours of Op	Practice Info	Relevant Pictures	Easy Nav	Current/New Info
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■ B   
 ■ H   
 ■ J   
 ■ M   
 ■ O   
 ■ R   
 ■ V   
 ■ Y

## INTERVIEW RESPONSES, QUESTION #18

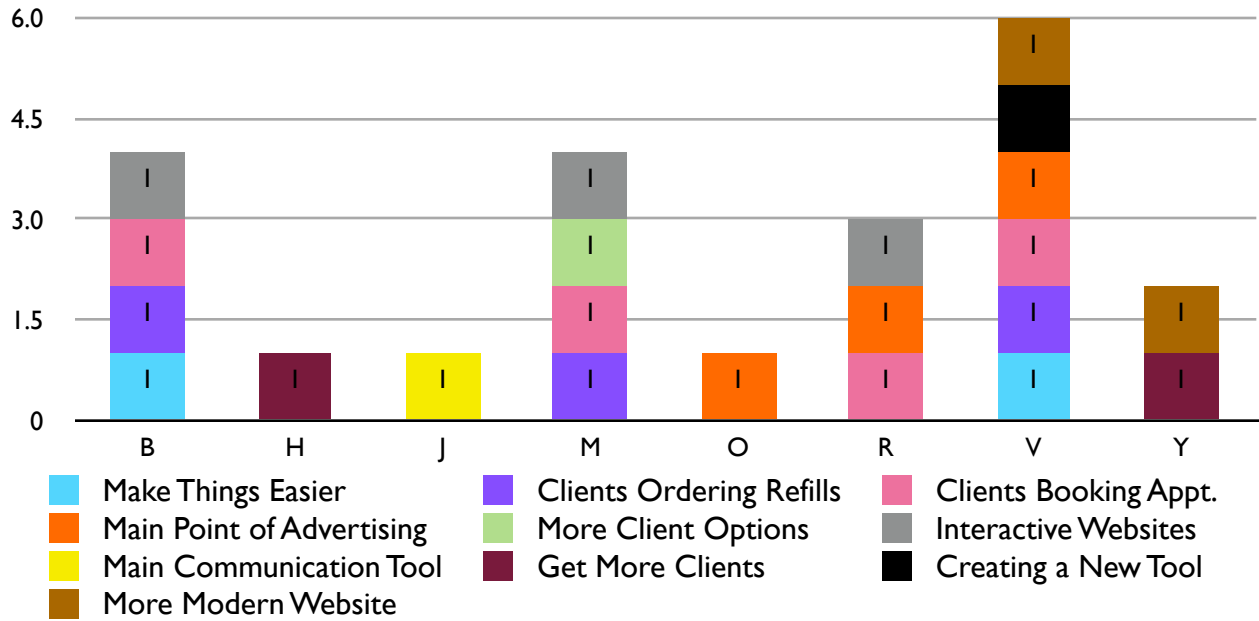
**NAME:** Alice M. Weaver **DATE:** May 1, 2012

### QUESTION:

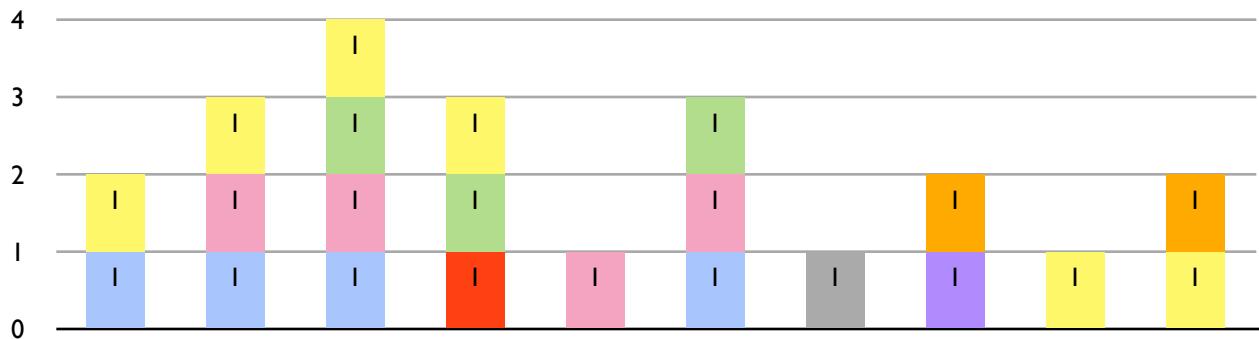
Where do you think this is all going? Put another way, what direction do you believe the website is headed?

PRACTICE	B	H	J	M	O	R	V	Y
MAKE THINGS EASIER	1						1	
CLIENTS ORDERING REFILLS	1			1			1	
CLIENTS BOOKING APPT.	1			1		1	1	
MAIN POINT OF ADVERTISING					1	1	1	
MORE CLIENT OPTIONS				1				
INTERACTIVE WEBSITES	1			1		1		
MAIN COMMUNICATION TOOL			1					
GET MORE CLIENTS		1						1
CREATING A NEW TOOL							1	
MORE MODERN WEBSITE							1	1

### RESPONSES GROUPED BY PRACTICE



### RESPONSES GROUPED BY FREQUENCY



Make Things Easier	Clients Order Refills	Clients Booking Appt.	Main Point of Ad	More Client Options	Inter-active Website	Main Comm Tool	Get More Clients	Creating a New Tool	More Modern Website
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■ B   
 ■ H   
 ■ J   
 ■ M   
 ■ O   
 ■ R   
 ■ V   
 ■ Y