

Shelter Care Checklists: Putting ASV Guidelines Into Action



This resource is based on the **ASV Shelter Guidelines**, a comprehensive set of recommendations created by the Association of Shelter Veterinarians Shelter Standards Task Force.

Guidelines for Shelter Care Checklists

These checklists can be used in your shelter to see where you meet or exceed standards, where improvement can be made, and where immediate changes should be implemented. **The first step should be to urgently address and correct any unacceptable practices.** Aside from those immediate changes, implementing change based on the Guidelines should be a gradual and thoughtful process designed to provide maximum benefit for the animals.

M **Must:** It is believed that without adherence to this recommendation, the delivery of a minimum level of acceptable or humane care is not possible.

S **Should:** A strong recommendation is implied for these standards.

I **Ideal:** While these may not be possible in all circumstances, they would certainly enhance care for animals and are ideal for an agency to excel in the animal sheltering field; shelters should strive to meet all ideal practices wherever possible.

U **Unacceptable:** No sheltering organization, regardless of its circumstances, should engage in any unacceptable practices, and they must be corrected without delay.

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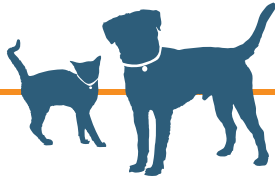
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Chapter 1

Management and Recordkeeping

1. Establishment of Policies and Procedures

M Must

- Organization has a clearly defined mission with policies, protocols that reflect current information, adequate staff training and supervision and proper management of animal care.
- Policies address resources and legal/contractual obligations of the organization.
- Protocols are developed and written down in sufficient detail to achieve and maintain the standards set by the Association of Shelter Veterinarians and updated as needed to ensure they reflect current industry norms and pertinent legislation.
- All staff and volunteers have access to protocols related to the tasks they will be performing.

S Should

- Veterinarians are integrally involved with the development and implementation of an organizational plan.
- A veterinarian provides expert input on all policies and protocols related to maintenance of physical and behavioral animal health.

I Ideal

- Veterinarians have training or experience in shelter medicine and have knowledge of the particular shelter population they are serving.

Notes:

2. Management Plan

M Must

- Veterinarians have supervision of medical and surgical care of animals.
- There is a clearly defined structure that outlines accountability, responsibility and authority for management within the organization and it is communicated to all staff and volunteers.
- Authority and responsibility are given only to those who have the appropriate knowledge and training.
- When making decisions, each of the following are considered: resource allocation, population health and individual animal welfare.

S Should

- In cases where animal welfare may be compromised, a veterinarian's decision is not overruled.

3. Training

M Must

- The skills, knowledge and training to accomplish each task are successfully demonstrated before proficiency is assumed.

S Should

- Continuing education is provided in order to maintain and improve skills.
- Training is documented and maintained.

4. Animal Identification and Recordkeeping

M Must

- A unique identifier (e.g. name and/or number) and record is established for each animal upon intake.

S Should

- Identification is physically affixed to the animal (e.g. collar or tag) for the duration of the animal's stay unless this poses a safety risk for the animals or staff.
- Basic elements of a record include: the identifier (name and/or number), the results of microchip scan, microchip number (if present), source of animal, dates of entry and departure, outcome, species, age, gender, physical description (breed and colors) and available medical and behavioral information.

2. Primary Enclosure

M Must

- Enclosure is structurally sound and maintained in safe, working condition to properly confine animals, prevent injury, keep other animals out and enable animals to remain dry and clean.
- There are no sharp edges, gaps or other defects that could cause an injury or trap a limb or other body part.
- There are secure latches or other secure closing devices.
- Provides sufficient space to allow each animal, regardless of species, to make normal postural adjustments (e.g. turn freely, easily stand, sit, stretch and move head without touching top of the enclosure). Animals can lie in a comfortable position with limbs extended, move about and assume a comfortable posture for feeding, drinking, urinating and defecating.
- The size of each primary enclosure is sufficient to meet the physical and behavioral parameters described in this booklet.
- Food and water bowls – or suitable alternative receptacles – are provided.
- Animals can sit, sleep and eat away from areas of their enclosures where they defecate and urinate.
- Cats have litter boxes large enough to comfortably accommodate their entire body.
- Crates or cages are not stacked upon each other in a manner that increases animal stress and discomfort, compromises ventilation or allows waste material to fall from the cage above into the cage below.
- Cats have places to hide.
- As the length of stay increases (beyond 1-2 weeks), mentally and physically stimulating spaces are provided.
- Animals who are housed long-term have opportunities to hide, play, rest, feed and eliminate.
- Outdoor spaces are suitably enclosed.
- All animal areas have non-porous surfaces that can be easily disinfected and are durable enough to withstand repeated cleanings – especially important in areas where puppies, kittens and animals who are infectious or newly admitted are housed.

Notes:

S Should

- To prevent disease transmission, enclosures permit care and cleaning without the need to remove the animals – especially important for recently admitted animals, ill animals and those younger than 20 weeks.
- Cleaning and disinfection are done on a regular basis.
- For in home-based shelters, newly arrived animals are housed in areas of the home (or enclosures within the home) that can be properly and easily sanitized.
- Dogs and cats are able to hold their tails erect when in a normal standing position.
- Animals can see out but have some opportunity to avoid visual contact with other animals.
- Cats have a minimum of 30 cubic feet per cat and more than two feet of triangulated distance between litter box, resting place and feeding area – especially important as length of stay increases.
- The separation between food, urination and defecation and resting areas is maximized for all animals.
- Attention is paid to the habits of each particular animal.
- Elevated resting places are provided whenever possible, especially for cats.
- Soft resting places are available for all animals.
- Cats have high points upon which to perch.
- Cats who are housed long term are allowed access to environments where they can scratch, climb and perch.

I Ideal

- Cats are not restricted to floor level cages since this can cause stress compared to elevated cages.
- Protected indoor-outdoor access is provided for most species.

U Unacceptable

- Wire-mesh bottoms or slatted floors are used for cats and dogs.
- Tethering is used as a means of confinement.
- Cages or crates intended for short-term temporary confinement or travel are used as primary enclosures.

Notes:

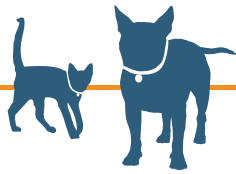
4. Heating, Ventilation and Air Quality

M Must

- Each animal is monitored individually for comfort and to ensure he or she is maintaining proper body temperature.
- To ensure animal comfort and safety, necessary measures are taken when an animal appears to be too hot or too cold.
- Ventilation is maintained to ensure clean air is provided in all areas of the shelter.
- All ventilation systems are adequately maintained.
- Ventilation is accomplished without compromising the maintenance of the animals' body temperatures.

S Should

- Temperature and humidity levels are evaluated at the level of the animal's body within his or her enclosure.
- Per AVMA recommendations for dogs and cats, the ambient temperature is above 60 degrees Fahrenheit and below 80 degrees Fahrenheit, with the relative humidity between 30-70%.
- Air quality is measured at the level of the animals.
- Ventilation rates are adjusted seasonally, if necessary, and are not thermostat-controlled.
- Isolation areas for dogs have separate air circulation from the rest of the facility.
- Cat cages that face each other are spaced more than four feet apart.
- Published guidelines for maximum ammonia exposure are not used to determine proper sanitation as they are written to reflect the hazards to human health and adverse effects on animal production (agriculture).
- Acceptable ammonia levels are less than 2 ppm, and are below this level even before morning cleaning.
- Facility is designed to offer as much natural light as possible.
- When artificial light is used, it closely approximates natural light in both duration and intensity.
- Enclosures are positioned so individual animals can avoid being exposed to excessive amounts of light or darkness.
- Cages are spaced far enough apart to allow ambient light to reflect off the ceiling and floor.
- Light and darkness is provided so that they support the natural (circadian) rhythms of wakefulness and sleep.



Chapter 3

Population Management

1. Capacity for Care

M Must

- Organization practices active population management, which is one of the foundations of shelter animal health and well-being and is based on an appreciation that capacity to provide humane care has limits for every organization, just as it does in private homes.
- Organization does not exceed its capacity for care.
- Maximum housing capacity is based on the number of animals who can be adequately housed within available primary enclosures.
- Maximum housing capacity is not exceeded.
- Staffing or volunteer work hours are sufficient to ensure that the basic needs of animals in the shelter are met each day.
- The type of care and enrichment provided to sheltered animals is appropriate to the length of stay.
- Adequate staffing is available to ensure that each critical point of service (e.g. vaccination or medical evaluation, spay/neuter surgery or a physical move to adoption) is delivered promptly.

S Should

- Expected demand for critical points of service is estimated based on the expected numbers of animals who will need each service and the length of time it takes to complete each procedure (e.g., number of animals needing evaluation or spay/neuter surgery prior to adoption).

I Ideal

- Shelter maintains its populations below maximum housing capacity to allow for daily intake as well as more flexibility when choosing appropriate enclosures for each animal.

U Unacceptable

- Operating beyond an organization's capacity for care is an unacceptable practice.

2. Protocols for Maintaining Adequate Capacity for Care

M Must

- Shelter has policies and protocols to maintain adequate capacity for care and housing.
- Policies provide a means of balancing admission with the outcomes available (e.g., adoption, transfer, release, returns to owner, euthanasia or others).
- Inspection of all animals is performed daily in order to routinely evaluate and monitor adequacy of capacity and to identify needs for housing, care or service.
- Appropriate interventions are made before animal numbers exceed the capacity for care and housing.

3. Monitoring Statistical Data

M Must

- At a minimum, statistics include monthly intake (e.g. stray, owner-surrendered) and outcomes by type (e.g. adoption, euthanasia, returned to owner) for each species.

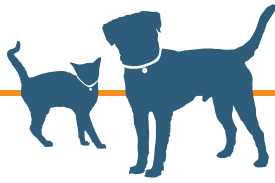
S Should

- For optimal population management and monitoring, an animal inventory is taken, evaluated and reconciled with records daily to ensure accuracy of data collection as well as facilitate evaluation of capacity.

I Ideal

- Population statistics include an evaluation by age group, health and behavior status at intake and outcome.

Notes:



Chapter 4

Sanitation

1. Cleaning and Disinfection

M Must

- Sanitation protocols are revised as needed during an outbreak in order to address specific pathogens.
- When developing sanitation protocols, considerations include an assessment of the facility, animal population, training, equipment and procedures.
- Protocols are based on current knowledge and recommendations developed specifically for animal shelters and include specific methods and agents for achieving the goal of both cleaning and disinfection.
- Enough staff is assigned to complete sanitation tasks promptly so animals spend the majority of their time in sanitary conditions.
- Detergents and degreasers are used as needed to maintain clean surfaces free of visible dirt and debris.
- The disinfectants that are used are effective under the conditions present in a given environment and with demonstrated activity against pathogens for which the animals are at risk.
- Sanitation protocols include A) Removal of gross organic matter B) Pre-cleaning of surfaces with a detergent or degreaser C) Application of a disinfectant at the correct concentration and for sufficient time rinsing and drying.
- When water or cleaning and disinfecting products are sprayed in or near primary enclosures, animals are removed from the cage or kennel or separated from the area being cleaned by guillotine doors.
- When mopping cannot be avoided (e.g. when hosing is not possible), a disinfectant with good activity in the presence of organic matter is used.
- Sanitation protocol addresses proper hygiene of shelter staff, volunteers and visitors; includes information about who is responsible for ensuring sanitation compliance, shelter sanitation signage and hand sanitation.
- Sinks are equipped with soap and disposable paper towels.
- Garments are changed after handling an animal with a diagnosed or suspected serious illness such as parvovirus.
- Transport cages, traps and vehicle compartments used for animals transport are thoroughly disinfected after each use.

- All clothing and bedding used at the shelter is laundered and thoroughly dried before reuse.
- Food and water bowls are disinfected prior to use by a different animal.
- When dishes are sanitized by hand, they are thoroughly washed and rinsed prior to disinfection.
- Litter pans and dishes are not cleaned at the same time in the same sink.

S Should

- Cleaning results in a visibly clean surface (though it may not remove all of the harmful pathogens).
- In the event of a disease outbreak, sanitation protocols and practices are reviewed to determine if there are problems with the products or practices.
- Products that have not been independently validated against unenveloped viruses and other pathogens of concern are not solely used for disinfection.
- The facility is cleaned in order of animal susceptibility to disease and potential risk to the general population, starting with the most susceptible animals and ending with those who carry the highest risk of transmitting infectious disease.
- In general, the order of cleaning and care, from first to last, is A) healthy puppies and kittens and healthy nursing bitches and queens, B) healthy adult animals and C) unhealthy animals.
- Separate cleaning supplies are designated for each area of the shelter.
- Appropriate protective clothing is used in each area and removed before proceeding to care for other animals in the population.
- Mopping is avoided if possible, but if it is done, mop water used in one housing area is not used in another area.
- Care is taken when mixing cleaning products to prevent the mixture from being ineffective or even toxic.
- Housing for recently admitted or ill animals and those who are younger than 20 weeks is designed to permit cleaning without extensive handling of the animal or removal to an area that has not been sanitized.
- Animal housing areas are designed to withstand the spraying of water and cleaning fluids and have adequate drainage.
- Hand sanitation is one of the best ways to prevent disease transmission and is used before and after handling animals and fomites (objects that can transmit disease, including clothing, toys, food bowls, etc.)
- Sinks are available in all animal housing and food preparation areas.
- Hand sanitizer dispensers are provided in all animal handling areas.
- Hand sanitizers are not relied upon as the sole means of hand sanitation because they are ineffective against some of the most dangerous pathogens found in shelter settings.

- Hand sanitizers are only used on hands that appear clean and contain at least 60% alcohol.
- Protective garments are worn during cleaning or other intensive animal-handling activities and changed before going on with other activities of the day.
- Fresh protective garments are worn when handling vulnerable populations, including puppies and newly admitted animals.
- All equipment that comes in contact with animals, including cleaning supplies, is either readily disinfected or discarded after use with a single animal.
- Items that cannot be readily disinfected are avoided, especially during periods of disease outbreak and for animals who appear ill.
- Mobile equipment such as rolling trash cans, shopping carts and food or treatment carts may also serve as fomites and are sanitized accordingly.
- Scratched or porous surfaces are not used because of the difficulty or impossibility of completely disinfecting them.
- Organic debris is removed from articles prior to laundering.
- Articles that are heavily soiled are laundered separately or discarded.
- Bedding and other materials that are heavily contaminated with durable pathogens, such as parvovirus, are discarded to prevent the risk of further spreading the disease.
- Food and water bowls are kept clean.
- Automatic watering devices and water bottles are not used if they cannot be disinfected before being used by another animal.
- If unenveloped viruses, such as parvo, are a problem, a disinfectant is applied to the dishes before or after going through the dishwasher.
- During periods of outbreak, sinks are thoroughly disinfected between uses.
- Isolation and quarantine areas are restricted to a small number of shelter staff.
- The transport of sick animals through the shelter – especially from intake areas to holding or euthanasia areas – is planned to minimize the spread of disease.
- Floors and other surfaces are immediately sanitized after contact with urine, feces, vomit or animals known or suspected to have infectious diseases.
- Footbaths are not relied on for preventing infectious disease since they are inadequate for this purpose.
- Dedicated boots that can be disinfected or disposable shoe covers are used in contaminated areas.
- Access to areas that cannot be disinfected are restricted to animals who appear healthy, have been vaccinated and dewormed and are five months or older.
- Standing water is not allowed to accumulate in areas around the shelter.

I Ideal

- Sanitation protocols are developed and periodically reviewed in consultation with a veterinarian experienced in shelter medicine.

U Unacceptable

- Kennels or cages are sprayed down while animals are inside.
- Animals walk through footbaths.

2. Other Cleaning

M Must

- Outdoor areas around the shelter must be kept clean (recognizing it is impossible to disinfect gravel, dirt and grass).
- Feces are removed from outdoor areas a minimum of once a day.

S Should

- All foster caregivers are trained to minimize contamination of their homes by confining newly arrived animals or those showing signs of illness in areas that can be readily disinfected.

I Ideal

- Feces are immediately removed from outdoor areas.

3. Rodent/Pest Control

M Must

- Solutions to rodent and pest problems are humane, safe and effective.

S Should

- All food is kept in sealed bins or containers that are impervious to rodents and insects.
- Food is removed from runs at night if rodents and/or insects are a problem.

I Ideal

- Food and water receptacles are cleaned in an area separate from litter boxes or other items soiled by feces.

2. Veterinary Relationship and Recordkeeping

M Must

- Medications and treatments are only administered with the advice of a veterinarian or in accordance with written protocols provided by a veterinarian, and all drugs are dispensed in accordance with federal and state regulations.
- Documentation is made of all medical care rendered to each animal.

S Should

- All health care practices and protocols are developed in consultation with a veterinarian, ideally one familiar with shelter medicine.
- A formal relationship with a veterinarian is in place to ensure that those responsible for daily animal health care have the necessary supervision and guidance.
- Whenever possible, a medical and behavioral history is obtained from owners who relinquish animals to the shelter.
- All medical information is provided in written form with the animal at the time of transfer or adoption.

I Ideal

- Records include each animal's date of entry, source, identification information, a dated list of all diagnostic tests, including test results, treatments (medications with drug dose and route of administration) and procedures and immunizations while in the care of the shelter.

3. Considerations at Intake

S Should

- Each animal's individual health status is evaluated and monitored beginning at intake and regularly thereafter.
- A medical history, if available, should be obtained from the owner at the time of surrender.
- Any available information is solicited when stray animals are impounded.
- Each animal receives a health evaluation at intake.
- Intake evaluations are documented in the medical record.
- Every attempt is made to locate an animal's owner, including careful screening for identification and microchips at time of intake.
- Intake health evaluations include scanning multiple times for a microchip using a universal scanner.

- Beginning at intake, animals are separated by species, age and by their physical and behavioral health status.
- Since young animals are more susceptible to disease, they are provided with greater protection from possible exposure.
- Healthy animals are not housed or handled with animals who have signs of illness.

I Ideal

- Surrender history is obtained by interview, or by written questionnaires if not.
- Animals receive parasite prevention on entry and regularly throughout their shelter stay.

4. Vaccinations

M Must

- Vaccines are considered to be vital lifesaving tools and are used as part of a preventive shelter health care program.
- Vaccine strategies are specifically tailored for the shelter because of the higher likelihood of exposure to infectious disease, the likelihood of exposure to infectious disease, the likelihood that many animals entering the shelter are not immune and the potentially life-threatening consequences of infection.
- Vaccine protocols are customized for each facility.
- Animals are vaccinated with core vaccines at or prior to intake.
- Puppies and kittens are re-vaccinated at 2- to 3-week intervals for the duration of their shelter stay or until they are over 18-20 weeks.
- Protocols for managing adverse reactions are provided by a veterinarian and required treatments are accessible.

S Should

- Specific vaccination protocols are tailored for each program with the supervision of a veterinarian.
- Animals are vaccinated against rabies when a long-term stay is anticipated, when risk of exposure is elevated or when mandated by law—at a minimum, animals are vaccinated for rabies at or shortly following their release from the shelter.
- A veterinarian supervises training on proper vaccine storage and administration and treatment of vaccine reactions.
- The location for injection of a specific vaccine follows administration site guidelines.
- Records are kept of any immunizations provided while in the care of the shelter

5. Emergency Medical Plan

M Must

- An emergency medical plan is in place.
- The emergency medical plan ensures that animals can receive proper veterinary medical care and pain management promptly or be humanely euthanized by qualified personnel as permitted by law.

S Should

- Staff are trained to recognize conditions that require emergency care.

6. Pain Management

M Must

- Pain is recognized and treated to alleviate suffering.
- It is generally assumed that if a procedure is painful in human beings, then it must also be painful in animals.
- Analgesia is an appropriate strength and duration to relieve pain.
- Animals must be reassessed periodically to provide ongoing pain relief as needed.
- When adequate pain relief cannot be achieved, transfer to a facility that can meet the animal's needs or humane euthanasia must be provided.

S Should

- Treatment (pharmacologic and non-pharmacologic approaches to pain) is supervised by a veterinarian.
- When pain can be anticipated, analgesia is provided preemptively.

U Unacceptable

- Treatment for pain is not provided.

Notes:

7. Parasite Control

M Must

- All dogs and cats are dewormed for roundworms and hookworms before leaving the shelter.

S Should

- The parasite control program is designed with the supervision of a veterinarian.
- Animals receive treatment for internal and external parasites common to the region and for any obvious detrimental parasite infection they are harboring.
- Treatment and prevention schedules are guided by parasite lifecycles and surveillance testing.

8. Monitoring and Daily Rounds

M Must

- Rounds are conducted at least once every 24 hours by a trained individual in order to visually observe and monitor the health and well-being of every animal.
- Any animal who is observed to be experiencing pain, suffering, distress, rapidly deteriorating health, life-threatening problems or suspected zoonotic medical conditions is assessed and appropriately managed in a timely manner.
- Animals are provided with appropriate grooming and/or opportunities to exhibit species-specific behaviors necessary for them to maintain normal healthy skin and hair coat or feathers.

S Should

- Monitoring includes food and water consumption, urination, defecation, attitude, behavior, ambulation and signs of illness or other problems.
- Monitoring takes place before cleaning.
- For animals housed in groups, monitoring also takes place during feeding time.
- When apparently healthy animals remain in care for longer than one month, exams that include weight and body condition score are performed and recorded by trained staff on at least a monthly basis. Veterinary exams are performed twice each year or more frequently if problems are identified.
- Geriatric, ill or debilitated animals are evaluated by a veterinarian as needed.
- Monitoring should include checking for appropriate grooming and/or bathing, since it is an essential component of animal health.

9. Nutrition

M Must

- Fresh, clean water is accessible to animals at all times unless there is a medical reason for water to be withheld for a prescribed period of time.
- Food that is consistent with the nutritional needs and health status of the individual animal is provided.
- Food is fresh, palatable, free from contamination and is of sufficient nutritional value.
- Uneaten food is discarded after 24 hours.
- Food that has been offered to an animal and remains uneaten is not offered to another animal.
- Healthy adult dogs and cats are fed at least once per day.
- Healthy puppies and kittens are fed small amounts frequently or have food constantly available through the day.
- Food intake is monitored daily.
- Animals displaying inappetance or extreme weight loss or gain are evaluated by a veterinarian and treated as necessary.
- Food and water is provided in appropriate dishes that are safe, sufficient in number and of adequate size.
- Animals who guard food or prevent access by cage mates are housed or fed separately.
- If automatic devices or drinking bottles are used, they are disinfected between uses.
- A schedule of regular sanitation is followed for all food and water containers.
- Food preparation and storage areas are easily sanitized and maintained in clean condition.

Notes:

S Should

- Water is changed daily and whenever it is visibly soiled.
- Food in animal enclosures is examined regularly to ensure it is free of debris and not spoiled.
- If food is not offered to cats all day, at a minimum they are offered food twice daily.
- Debilitated underweight, pregnant and lactating animals receive more frequent feedings to support increased metabolic needs.
- Veterinary input is sought when developing a feeding protocol.
- Animals are weighed and body conditions are assessed routinely.
- Each animal is fed to meet individual needs and prevent excessive gain or loss of body weight.
- The location of food and water containers allows easy observation, access for cleaning and filling and prevents contamination from litter, feces and urine.
- If automatic devices or drinking bottles are used, they are examined daily to ensure proper function and cleanliness.
- Supplies of food are stored in a manner to prevent spoilage and contamination.
- Food is not fed to animals after the expiration date.
- Toxic substances and vermin are kept out of contact with food, food storage and preparation areas.
- Stored food is clearly labeled if removed from the original packaging.

I Ideal

- A consistent diet is fed to all animals, rather than a variety of products.
- Dogs are fed twice daily and cats are fed multiple small meals or encouraged to forage throughout the day.

Notes:

10. Population Well-Being

M Must

- Shelter medical staff regularly monitor the status of individual animals and the population as a whole.
- Animal health plans are reviewed in response to changes observed in animal health, illness or deaths.

S Should

- In addition to tracking trends related to specific health problems, a periodic review of the rate of illness (morbidity) or deaths (mortality) is conducted.
- After entry to the shelter, non-euthanasia deaths represent only a very small proportion of animal intakes.

I Ideal

- Shelters monitor and assess frequency of specific problems, set realistic goals, develop targeted strategies and monitor effectiveness of medical health programs.

11. Response to Disease and Illness

M Must

- Response to disease and illness is considered an integral part of the shelter health program.
- When isolation is impossible or inadequate to control transmission of the particular pathogen, the shelter weighs consequences of exposure of the general population against euthanasia.
- When a specific pathogen has not been identified, a risk assessment is performed.
- Animals with a suspected infectious disease are isolated until diagnosis or subsequent treatment determines them to be a low risk to the general population.
- During an outbreak, physical separation is established between exposed, at-risk and unexposed animals or groups of animals.
- Shelter makes sure that all federal, state and local laws are followed concerning reportable diseases.
- Depopulation is viewed as a last resort after all other options are fully examined, and includes considering disease transmission, morbidity, mortality and public health.

Notes:

S Should

- A disease response plan includes measures to minimize transmission to unaffected animals or people and ensures appropriate care of the affected animal.
- The facility has a means of providing isolation.
- Even animals with mild clinical signs of contagious disease are not housed in the general population.
- In the event of severe or unusual conditions or outbreaks of infectious disease, diagnosis or identification of specific pathogens is sought.
- When an animal dies from unexplained causes, a necropsy along with histopathology is performed.
- Protocols to define and manage common clinical illnesses based on clinical signs are developed and used in consultation with a veterinarian.
- Protocols detail the expected course of the disease and response to treatment.
- Veterinary input is sought when disease or response to treatment does not follow the expected course.
- Animal handling and foot traffic is limited when dealing with sick animals.
- In response to an outbreak, protocols are reviewed to ensure that measures are effective shelter-wide against the pathogens of concern.
- Animals are monitored for signs of disease during an outbreak at least twice a day.
- Shelter avoids returning recovered or exposed animals to the general population while there is significant risk that they may transmit disease to other animals.
- When releasing a sick or infectious animal from the shelter, full disclosure should be made to the person or organization receiving the animal.

I Ideal

- Animal movement stops until a targeted control strategy is implemented.

U Unacceptable

- Shelter allows animals with severe infectious disease to remain in the general population.

Notes:

12. Medical Treatment

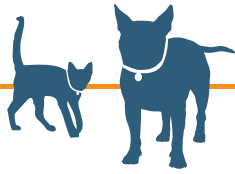
M Must

- The legal status of an animal never prevents treatment to relieve suffering (which may include euthanasia if suffering cannot be alleviated).
- Shelter has specific protocols to provide immediate care when legal status is an issue.
- Medical decisions balance both the best interest of the individual animals requiring treatment and the shelter population as a whole.
- Those providing treatment have the necessary training, skills and resources to ensure treatment is administered correctly and safely.

S Should

- Treatment decisions are based on a number of criteria, including the ability to safely and humanely provide relief, duration of treatment, prognosis for recovery, the likelihood of placement after treatment, the number of animals who must be treated and the expense and resources available.
- Shelter has a clear policy for handling disease problems that may develop after adoption.
- Adopters or those taking animals from the shelter are informed about the presence of any disease or condition known to be present at the time of adoption and provided a copy of any treatment records.
- Medication protocols for management of common diseases are provided to staff and developed in consultation with a veterinarian.
- All treatments are documented.
- Antibiotic selection and dosing are specific to the infection and animal being treated, and when possible, based on appropriate diagnostics.
- Shelter follows published guidelines for antimicrobial use in companion animals.

Notes:



Chapter 6

Behavioral Health

1. General

M Must

- Shelter takes into consideration the behavioral care of each animal as well as the conditions experienced by the entire population.

2. Considerations on Intake

M Must

- All incidents or reports of a history of aggressive behavior along with the context in which they occurred are recorded as a part of an animal's record.
- Care is given to minimize stress during intake.

S Should

- A thorough behavioral history and the reason(s) for relinquishment are obtained at the time of intake.
- Any available information about stray animals is solicited when they are impounded.
- The history is used to alert staff to the presence of potential problems, such as aggression or anxiety, and to inform staff of any individual needs so that proper care can be provided for the animal.

I Ideal

- Information and history of animals is obtained by interview. If not, written questionnaires are used as an acceptable second choice.

Notes:

3. Behavior Evaluation

M Must

- Assessment of an animal's behavior begins at the time of intake.
- Staff is trained to recognize body language and other behaviors that indicate animal stress, pain and suffering as well as those that indicate successful adaptation to the shelter environment.
- Animals are monitored daily in order to detect trends or changes in well-being and respond to their behavioral needs.
- If many animals are displaying signs of unrelieved stress, steps are taken to improve the shelter's stress reduction protocols.
- For humane reasons, long-term confinement is avoided for feral animals and for those who remain markedly stressed/fearful and are not responding to treatment/behavioral care.
- Staff performing behavior evaluations receives adequate training in performance, interpretation and safety.
- An overall behavior assessment considers all of the information gathered about the animal, including history, behavior during shelter stay and formal evaluation.

S Should

- Shelter is aware that animal histories provided, although important, may be either incomplete or inaccurate.
- During intake procedures, particular care is taken not to place cats within spatial, visual or auditory range of dogs.
- Behavioral problems that require intervention or affect how an animal can be safely handled are noted at the time of intake and entered into the animal's record.
- Actions are taken to respond promptly to behavioral needs.
- Each animal's behavior is assessed on an ongoing basis throughout the shelter stay.
- Staff records their behavioral finding each day.
- Organizations that develop their own evaluation consult with a veterinarian or behaviorist familiar with the science and theory of behavior assessment.
- A standardized behavior evaluation form is used and each evaluation is documented.
- Formal behavioral evaluations do not necessarily invalidate information provided by the owner or observations made during staff interactions with an animal.
- Cats are assessed by observing behavior and interacting with the cat to help enhance in-shelter care.

I Ideal

- A systematic behavioral evaluation is performed on all animals prior to re-homing or other placement.

4. In-Shelter Care

M Must

- Even short-term housing meets the minimum behavioral needs of animals, providing separate areas for urination/defecation, feeding and resting and sufficient space to stand and walk several steps and sit or lie at full body length.
- Animals are provided regular social contact, mental stimulation and physical activity.
- For animals who are housed short-term and with unknown health backgrounds, social interaction is balanced with infectious disease control.
- When animals must remain confined for health or behavioral reasons, positive social interaction is still provided without removing the animal from the enclosure.
- A high priority is placed on ensuring proper socialization of young puppies and kittens.
- For puppies and kittens housed in a shelter, socialization is balanced with infectious disease control.
- Training methods are primarily based on positive reinforcement in accordance with current professional guidelines.
- For long-term shelter stays, appropriate levels of additional enrichment are provided on a daily basis.
- Alternatives to traditional cage housing are provided for any animal staying in the shelter long-term.
- Cats are allowed an opportunity to exercise and explore in a secure, enriched setting.
- Dogs are provided with daily opportunities for activity outside of their runs for aerobic exercise.
- Any animal who is observed to be experiencing mental suffering, distress or behavioral deterioration is assessed and appropriately treated in a timely manner or humanely euthanized.

Notes:

- Practices (behavior modification) adhere to the well-described scientific principles of animal behavior and learning, including positive reinforcement, operant conditioning, systematic desensitization and counter-conditioning.
- Sufficient resources are available to provide appropriate care if behavioral modification is attempted.
- Staff understands that behavior modification techniques are generally labor-intensive and time-consuming and that they must be applied consistently over a period of time in order to be successful.

S Should

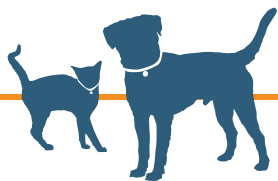
- Prey species are housed away from predatory species at all times.
- Cats are physically separated from the sight and sound of dogs.
- Regular daily schedules of care are followed.
- Scheduling daily positive events is a priority.
- Lights are turned off at night and on during daytime hours.
- Enrichment is given the same significance as other components of animal care, such as nutrition and veterinary care, and is never considered optional.
- Animals receive some type of positive social interaction outside of the activities of feeding and cleaning on a daily basis.
- Socialization is provided by workers or volunteers wearing clean protective clothing in an environment that can be fully disinfected between uses.
- Precautions are taken to ensure that disease transmission and stress are minimized.
- Animals who are housed long-term are spayed and neutered.
- Enrichment is provided for animals while in their enclosures through opportunities for play.
- Animals believed to be dangerous are not re-homed.

I Ideal

- Shy, poorly socialized, feral and geriatric cats – or any animal who is showing signs of stress – are housed in separate, calm, quiet areas beginning at intake.
- Caregivers are assigned to care for the same animals on a regular basis.

U Unacceptable

- Animals confined on a long-term basis, including feral or aggressive animals, are stressed during basic care, daily enrichment and exercise.
- The use of physical force as a punishment or in anger is utilized for behavior modification.



Chapter 7

Group Housing

1. Facilities

M Must

- For group housing of cats, a variety of elevated resting perched and hiding places are provided to increase the size and complexity of the living space.
- Sufficient resources (e.g. food, water, bedding litter boxes and toys) are provided to prevent competition or resource guarding and ensure access by all animals.

S Should

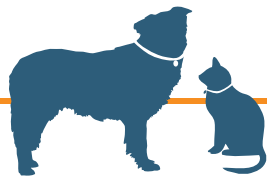
- The size of the enclosure is large enough to allow animals to express a variety of normal behaviors.

2. Selection

M Must

- Animals are not housed in the same enclosure simply because they arrived on the same day or because individual kennel space is insufficient.
- Unrelated or unfamiliar animals are not combined in groups or pairs until after a health and behavior evaluation is performed.
- If group housing is utilized short-term for intact animals, they are separated by gender.
- Animals who are not socialized to other animals well as those who actively bully other animals are not grouped with other animals.
- Animals who have engaged in fighting with one another are not grouped together.
- Caution is used when attempting to include any animal with a history of fighting in a group.
- When placing single orphaned kittens and puppies with an alternate mother, with or without a litter, risks and benefits to health and behavior for all animals is weighed.

Notes:



Chapter 8

Animal Handling

1. General

M Must

- Handling is as humane as possible and appropriate for the individual animal and situation.

S Should

- The minimal amount of physical restraint needed to accomplish the task without injury to people or animals is used.
- When physical restraint is necessary to avoid human injury or injury to an animal, it is of the least intensity and shortest duration possible.

2. Restraint

M Must

- Adequate training is key to limiting the use of unnecessary force during handling and must be provided to anyone who will be handling animals.

U Unacceptable

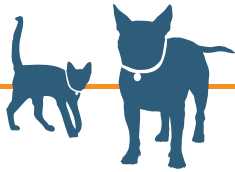
- Physical force is used as a punishment or in anger.

3. Location and Timing

M Must

- Handling methods prevent escape.

Notes:



Chapter 9

Euthanasia

1. General

M Must

- Each individual animal is treated with respect.
- Any euthanasia method used quickly induces loss of consciousness followed by death and ensures the death is as free from pain, distress, anxiety or apprehension as possible.
- Euthanasia method is reliable, irreversible and compatible with the species, age and health status of the animal.
- The identity of each animal to be euthanized is determined with certainty beforehand, including scanning multiple times for a microchip using a universal scanner and verifying that the animal is properly designated for the procedure.
- An assessment is made of each animal's size, weight and temperament so the appropriate drug dose, needle, syringe and restraint method can be used.
- Safety of the personnel and the emotional impact of euthanasia are considered.

S Should

- A veterinarian with appropriate training and expertise for the species involved is consulted to ensure that proper procedures are used.
- Procedures are in place to prevent and address compassion fatigue throughout the organization.

U Unacceptable

- Agents and/or methods unacceptable to the AVMA Guidelines on Euthanasia are used.

Notes:

2. Euthanasia Technique

M Must

- Sodium pentobarbital is not injected by any non-vascular route.
- To avoid causing any undue stress and anxiety, the least amount of physical restraint necessary to perform the procedures safely is used.
- Euthanasia method is quick, painless and does not cause distress.
- Carbon monoxide is not utilized as a euthanasia method because any gas that is inhaled must reach a certain concentration in the lungs before it can become effective and this can create a haphazard euthanasia experience that can be prolonged, painful and ineffective.
- Death is verified by multiple methods by trained staff before disposing of any animal's body.
- Because lack of a palpable pulse does not confirm that the heart has stopped, cardiac standstill is confirmed with a stethoscope or visual verification.

S Should

- IP injections of a pure sodium pentobarbital solution free of additional drugs or additives are used only for cats, kittens and small puppies.
- In dogs and cats, oral dosing of sodium pentobarbital is reserved for use in animals who cannot be safely approached, trapped or handled.
- Regardless of the route of administration, whenever progression to death is prolonged, an additional injection of sodium pentobarbital is given.
- Pre-euthanasia drugs are administered to animals who are aggressive, severely distressed or frightened.
- Veterinary guidance is used for selection of pre-euthanasia drugs.
- After the animal loses consciousness, the absence of the following is confirmed: papillary and corneal reflexes, toe withdrawal, pulse, respiration and heartbeat.

U Unacceptable

- Intra-cardiac injections are used even when it has not been verified that the animal is unconscious, comatose or anesthetized (i.e. lack of deep pain/toe withdrawal reflex).
- Carbon monoxide is used as a method to euthanize dogs and cats even though there are multiple humane, operational and safety concerns.
- Agents that induce convulsions prior to loss of consciousness are used.

3. Environment and Equipment

M Must

- Euthanasia equipment includes a table that can be readily disinfected, a good light source, a universal microchip scanner, hair clippers, stethoscope, a variety of needles and syringes, muzzles and restraint equipment.
- Staff performing euthanasia wears protective garments, which are removed before going on to other animal care duties.

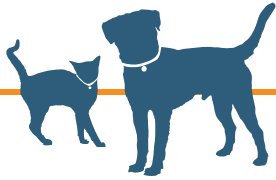
S Should

- A separate room is designated for euthanasia in a quiet area away from the main pattern of foot traffic, to minimize distractions and interruptions.
- The room used for euthanasia has adequate lighting and is large enough to comfortably accommodate the equipment, two to three staff members and the animal being euthanized.
- Only people directly involved in euthanasia are in the room when the procedure is being performed.
- Scales for accurate weighing are available.
- A new needle is used for each animal.
- The euthanasia surface is cleaned before every procedure.
- The euthanasia room and equipment are cleaned and disinfected after every euthanasia period.
- Animals are not permitted to observe or hear the euthanasia of another animal, nor permitted to view the bodies of dead animals – with the exception of puppies and kittens. When selected for euthanasia, mother animals are euthanized prior to their offspring with the puppies and kittens euthanized immediately afterward.

4. Record-Keeping and Controlled Substances

S Should

- A record log is kept documenting each animal's identification, amount of euthanasia solution and pre-euthanasia drugs received, dispensed and remaining, as well as the identity of the person performing the euthanasia.
- All drug records are maintained in accordance with federal, state and local regulations.
- All controlled drugs are kept secured in a manner consistent with state and federal regulation.



Chapter 10

Spaying and Neutering

1. General

M Must

- Consideration is given to individual animal health or circumstances when it comes to creating the need for an exception to the required spay/neuter policy.

S Should

- Shelter policy requires that cats and dogs who are adopted into homes be spayed or neutered.
- When prompt pre-placement surgery is not available and other spaying or neutering programs (e.g. vouchers) are implemented, there is an effective follow-up to confirm that the surgery has been completed.

U Unacceptable

- Shelter animals are allowed to breed.

2. Veterinary Medical Guidelines

M Must

- Spaying or neutering surgery is performed by veterinarians or veterinary students under the direct supervision of a veterinarian in compliance with all legal requirements.
- Medical records are prepared for every patient indicating the surgical procedure and anesthesia administered.
- All controlled substances are maintained in accordance with DEA requirements.
- A veterinarian makes the final decision regarding acceptance of any patient for surgery based on a physical examination and medical history (if available) as well as the capacity of the surgery schedule.
- A veterinarian weighs the risks and benefits of spaying and neutering patients with mild infectious or non-infectious medical conditions.

S Should

- Patients undergoing elective surgery are in good health and free from signs of infectious or other disease.

3. Surgery and Anesthesia

M Must

- Appropriate housing is provided for each animal before and after surgery.
- Enclosures are secure and provide a flat surface that is clean, dry and warm with adequate space for the animal to turn around, while allowing for safety at various stages of sedation and anesthesia and good visibility for staff.
- When surgery is being performed, the operating area is dedicated to surgery and contains the necessary equipment for anesthesia and monitoring.
- Infectious disease control is practiced to prevent disease transmission among patients.
- Aseptic surgical technique is required and separate sterile instruments are used for each patient.
- Patients are monitored by trained personnel.
- Plans are in place to handle any emergency that might occur.
- In the post-operative period, care is taken to provide patients with a smooth transition from the anesthetized state.
- Patients are evaluated immediately prior to release and clear instructions (written and verbal) for post-operative care are provided.
- Policies for managing complications and emergencies that occur within 48 hours after surgery are in place.

I Ideal

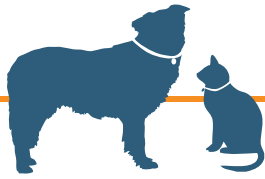
- Dogs and cats are housed in separate areas.

4. Documentation

S Should

- A certificate of spaying or neutering or other appropriate documentation is provided for each animal.

Notes:



Chapter 11

Animal Transport

1. General

M Must

- Risks and benefits for all animals affected by the transport program are carefully weighed.

S Should

- Transport recommendations apply regardless of the purpose, distances or parties involved.
- Compromises on these guidelines are not made when there is ample opportunity to plan.

2. Responsibilities of Participating Individuals and Organizations

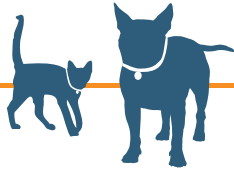
M Must

- A contact person is identified at each transfer point.
- Animals destined for transport are vaccinated prior to or upon intake at the organization of origin.
- In addition to any examinations required by state or federal regulations, all animals being transported are examined within 24 hours of transport for any problems.
- Information on the health and behavior of animals – as known at the source shelter – is accurately described and communicated.
- Clearly written health records that describe health status and identify animals (health certificate, rabies certificate and a copy of shelter record) accompany each animal.
- During transport, animals have adequate space, comfortable environmental conditions and good air quality.
- Primary enclosures are large enough for animals to stand and sit erect, to turn around normally while standing and to lie in a normal position.
- Unfamiliar animals are not transported together in the same primary enclosure.

- If more than one animal is in the primary enclosure, there must be enough space for each occupant to lie down comfortably at the same time without needing to lie on top of one another.
- The enclosure is sturdy and permits adequate ventilation.
- Flooring prevents injury, discomfort and leakage of fluids into other enclosures.
- Animals are safely and securely confined within the enclosure.
- Doors on the primary enclosures are secured to prevent movement within the vehicle during transport.
- Extra care is provided when transporting puppies and kittens, including prevention of exposure to temperature extremes, maintenance of adequate hydration and nutrition and protection from infectious disease exposure during the transport process.
- If animals are sedated, veterinary guidance is provided for their care.
- At a minimum, vehicles adhere to all federal and local statutes.
- Crates and cages are not stacked upon each other in a manner that increases animal stress and discomfort, compromises ventilation, allows waste material to fall from the cage above into the cage below, interferes with care and observation or hinders emergency removal.
- Each primary enclosure is positioned in the animal cargo space in a manner that provides protection from the weather and extremes of temperature.
- Fresh air free of exhaust fumes is ensured.
- Attention is paid to the provision of shade, because even in comfortable temperatures, a vehicle parked in full sun can rapidly exceed safe temperature levels.
- The vehicle driver or animal attendant has sufficient training in animal health, welfare and safety issues to recognize and respond to animal needs during transport.
- All dogs and cats must be observed and allowed to rest every four to six hours.
- Adult dogs must be allowed to exercise and eliminate every four to six hours.
- Food must be provided at least every 24 hours for adults and more frequently for animals under six months old.
- If water is not available at all times, it is provided at frequent observation stops (at least every four hours).
- Animal enclosures are cleaned and any litter replaced as often as necessary to prevent soiling of the animals from vomit, urine or feces.
- If it is necessary to remove animals in order to clean, safeguards are in place to ensure animal safety and prevent escape.
- Points of destination have enough trained personnel ready to receive and evaluate animals upon arrival.
- The receiving facility has adequate housing prepared for the arriving animals.

S Should

- A written record of all involved parties, including responsibilities for each, is kept in sufficient detail to allow a trace back to the animal's origins.
- Written guidelines are developed that can be agreed to by all parties.
- Guidelines address medical and behavioral selection criteria, as well as transportation and destination requirements.
- The shelter where the animals originate has a comprehensive preventive health care program.
- Animals are treated for internal and external parasites prior to transport.
- Animals are identified by a collar, tag, tattoo, microchip or any combination of these methods so that their information can be matched upon arrival.
- Animals are in good health at time of transport.
- Drivers are careful to avoid subjecting animals to sudden acceleration and deceleration stresses, excessive lateral movement, noise or vibration.
- Absorbent bedding is provided.
- The animals' primary enclosures have no sharp edges.
- Unless orphaned, kittens or puppies less than eight weeks old are transported with their mother in a space large enough for her to lie down on her side with her legs extended for comfort and to facilitate nursing.
- Animals are not sedated unless recommended by a veterinarian.
- The ambient temperature is kept above 60 degrees Fahrenheit and below 80 degrees Fahrenheit.
- A thermometer is placed in the animal area of the vehicle at the level of the animals.
- The vehicle, including the cargo space, is heated and cooled as necessary.
- Maximum transport time to an intermediate or final destination is no more than 12 hours.
- Animals are not left unattended when it may be detrimental to their health and safety.
- Each animal receives a documented physical examination at the time of arrival.
- Veterinary care is available on arrival for any animal requiring care.
- The need for isolation or quarantine for arriving animals is determined based on legal requirements, their health status, source and infectious disease risk, with due attention to incubation periods for pathogens of concern and detrimental effects of increasing length of stay.



Chapter 12

Public Health

1. General

M Must

- Shelter maintains compliance with federal and state occupational and safety regulations regarding chemical, biological and physical hazards in the workplace.
- Hearing protection is provided for employees working in loud environments.
- Personal protective equipment (PPE) such as gloves, smocks, goggles, masks, etc. is provided by the shelter in order to protect employees from exposure to chemical and biological agents.
- PPE is available in sizes to accommodate all staff, including those with special concerns such as latex allergies.

S Should

- Noise abatement materials are utilized in animal holding areas.
- Employees and volunteers wear gloves and change them frequently while cleaning and disinfecting, especially when removing animal waste.
- Eye protection is worn when working with cleaning and/or disinfection agents.
- Frequent hand-washing is strongly encouraged, especially after handling animals and after removing PPE, before eating, smoking or touching eyes or mucus membranes, including applying contact lenses.
- Shelter does not allow smoking.

Notes:

2. Zoonoses

M Must

- Enclosures of animals with suspected zoonotic disease are clearly marked to indicate the condition and any necessary precautions.

S Should

- Shelter provides periodic staff and volunteer training and information on the recognition of potentially zoonotic conditions and the means of protecting others from exposure.
- Training identifies to whom concerns should be reported and how to respond when zoonotic disease is suspected or confirmed.
- The public does not have unsupervised access to areas where animals are isolated for zoonotic diseases and staff access to those areas is also limited.
- Shelter institutes good preventive medicine protocols such as prophylactic deworming and external parasite control to decrease the potential for exposure to zoonotic pathogens.
- Food and drink are not consumed in areas where animals are housed; use of items the public may bring in – such as spill-proof cups, pacifiers, teething toys and baby bottles – is discouraged in these areas.
- Animals are not allowed in areas where food is prepared or consumed.
- Information about zoonotic diseases is made available to visitors, adopters and foster care providers.
- Shelter-provided literature about zoonotic diseases suggests that immune-compromised adopters discuss pet selection with their healthcare professional before adoption.
- If inquiries are made, shelter staff refers people to published guidelines or their health care professional.

I Ideally

- Hand washing stations or sinks are easily accessible to all visitors, staff and volunteers.
- The written infection control plan for the shelter addresses zoonotic concerns and is available to all staff and volunteers.

Notes:

3. Animal-Related Injuries

M Must

- Shelter staff is able to identify potential rabies exposures and understands the regulations that apply to reporting and managing bites to humans and animals.
- To identify possible rabies exposures, everyone presenting an animal is asked if the animal has bitten anyone within the last 10 days or had any contact with wildlife.
- Clear policies are developed and enforced regarding the management of animals with behavioral concerns.
- The cages of animals known to be aggressive or potentially dangerous are clearly marked to advise caution.
- Alternate housing is provided for any animal housed in an enclosure that would require that dogs be removed by use of a control pole or cats be removed using nets or tongs for daily cleaning or care.
- A thorough investigation of individual circumstances is undertaken before consideration is given to re-homing an animal with a history of biting or threatening behavior.

S Should

- All persons injured by an animal are instructed to seek medical advice.
- All incoming animals are examined for bite wounds; any animals who have potentially been exposed to rabies are managed in accordance with the NASPHV Rabies Compendium in consultation with state and local health authorities.
- People who routinely work with companion animals or wildlife receive pre-exposure vaccinations against rabies in accordance with recommendations of the Advisory Committee in Immunization Practices.
- Shelter vaccinates for rabies prior to adoption when possible or requires that adopted animals receive vaccinations against rabies after adoption.
- All staff and volunteers have proper training in basic animal handling skills, including the recognition of potentially dangerous behaviors.
- Any animal who is deemed potentially aggressive or dangerous is housed in a way that staff members can safely provide care without removing the animal from the primary enclosure.

Notes:
