OSMA Smart Sheltering Workshop

Cynthia Karsten, DVM, DABVP (Shelter Medicine Practice) www.sheltermedicine.com
SHELTER SURVIVAL GUIDE

THOUSANDS OF EASY SWAPS THAT CAN SAVE YOU 10, 20, 30, OR MORE!

DO NOT THAT!

THE PRACTICAL SOLUTION
High-Yield Efforts Worth the Investment

- Right size the population and length of stay, provide good housing for all, and ensure staff and volunteer resources to provide friendly daily interaction tailored to each animal’s preference.
- Vaccinate with core vaccines immediately upon intake if not sooner.
- Vaccinate all animals > 4-6 weeks old with few exceptions: including mictly ill and injured animals.
- Revaccinate youngsters every 2 weeks as long as they’re in the shelter or other high risk environment.
- Continue vaccine series in youngsters until they are 5 months old (and recommend this to adopters even if the animal is no longer in the shelter or other high risk environment).
- Perform careful exams by trained staff at the time of intake, including a good Woods lamp exam for all cats.
- Engage in good biosecurity practices between “dirty” and “clean” activities or populations, including a change of top and thorough handwashing or change of gloves.
- Screen high risk cats for FeLV/FIV.
- Regardless of screening practices, have conversations with adopters about the natural history of FeLV/FIV, including that status can’t be known for sure until ~60 days after last known exposure.
- Invest in high quality housing in treatment areas.
- Start treatment with antibiotics immediately IF (and only IF) the great majority of animals under treatment eventually progress to requiring antibiotics.
- Where this is the case, reevaluate housing and environment in treatment areas, and ensure spacious enriched housing natural light, good air quality, a quiet environment and comfortable conditions for sick animals.
The Mighty To-Don’t List

Make time for what really matters by letting go of or dialing back these low-yield efforts

- Don’t vaccinate for diseases that are low risk for in-shelter transmission (basically anything other than DHPP and Bordetella in dogs, FVRCP in cats, and rabies for dogs and cats either at intake or the time of adoption)
- Don’t worry too much about disease transmission between healthy adult animals that have been vaccinated at least 3-5 days ago with a modified live vaccine for DHPP/FVRCP
- Don’t wait on boosters to move animals through the system!
- Don’t worry too much about biosecurity between casual contacts (such as petting or carrying) with individual adult animals within a population, such as healthy adult cats or cats with routine URI
- Consider not screening for FeLV/FIV in healthy cats with no special risk factors

- Don’t move cats with mild URI signs to isolation
- Don’t treat for a set time period for routine URI
- Don’t hold chronically sneezy cats back from adoption
- Don’t rotate disinfectant products
- Don’t bother with foot baths
- Don’t clean housing thoroughly while cats are in residence
- Don’t spend time on formal behavioral assessments that aren’t predictive
- Don’t keep cats behind glass or prohibit the public from touching friendly healthy cats

- Don’t compromise care, housing or staff capacity in order to try and serve more animals over time. It always backfires in the end!
Believe

• Without question, the nature of our industry serves as a constant reminder that humans can be unkind to animals. However, what the data reveals is a story that is overwhelmingly driven by love. If less than 10% nationwide of pets ever end up in shelter, how is that small number our whole truth?

• Data shows that most pets are acquired from sources other than animal shelters, so people are successfully picking pets every day without any help (or judgment) from us. There is an entire community waiting to be engaged.
Dose Effect

- Illness happens when **dose** overcomes **immune system**
- **Reduce dose** by reducing amount in environment or spread between animals
- **Increase dose tolerated** by supporting animal immunity and well being
- **Take extra care** when you have a highly virulent bug, the environment is crowded, or everyone is extra stressed
Do a few things so you don’t have to do all the other things

- Right size the population and length of stay
- Ensure high quality housing for all
- Provide friendly interaction that makes sense for the animal
- Vaccinate, monitor, treat and clean strategically
- Relax about most other things!
What causes feline URI/canine CIRDC?

- Ineffective vaccination?
- Improper disinfection?
- Too many pokey little fingers in the cages?
- Lousy air quality?
- No place to hide?
Vaccination basics: shelter

- SC MLV FVRCP or DHPP for all > 4-6 weeks on entry + 2-3 week booster (DHPP re-vax optional…)
  - 2 weeks before entry if possible
- Revaccinate juveniles SC every 2 weeks while in high risk environment, every 3-4 when not
- Final vaccine at 20 weeks in whatever environment
Disinfection basics

• Stress, fomite transmission and respiratory irritation can cause more harm than good

• Spot clean during residence, focus cleaning on high contact surfaces
Feline cage/condo cleaning

• No spraying; single use rag or paper towel with detergent for wiping up messes
• Leave clean-ish dishes and bedding
• Ok for ill cats too
• Change gloves between risk groups/ between sick cats in private practice or transfer shelter
Spot cleaning dogs

- Consider for adult dogs vaccinated > 3-5 days
- No urine or feces on that side of run
- Replace water, soiled bedding
- Replace food if present
- Leave clean-ish bedding in place
- Clean and dry side with urine or feces as needed
Don’t forget noise

• Scary noises while eating can cause food aversion
• Open and close cage doors *quietly*
  – Some Shorline latches can be replaced with plastic
• Replace litter pans calmly, especially metal on metal
• Feed after things have quieted down or before things get crazy
Low Cost Noise Mitigation Measures

» RE-THINK OPERATIONS / MANAGEMENT
Has tremendous effect on noise in dog kennel areas: treat buckets and four on the floor, quiet time, play groups

» INSTALL WEATHER SEALS & SWEEPS ON WINDOWS & DOORS
Where noise is an issue: entry points to dogs and cat housing spaces

» ACOUSTIC WALL & CEILING PANELS
Select the right panel to resist growth of mold & mildew, install outside of wet area
Speaking of disinfection, what about ringworm?

Many over-the-counter cleaning products labeled as fungicidal against *Trichophyton mentagrophytes* are effective against *Trichophyton* spp. and *Microsporum canis* when the surface is properly prepared.

1. Mechanically remove debris, including hairs & spores
2. Wash with a detergent until visibly clean and rinse with water
3. +/- Follow up with a disinfectant

Most important part of decon
Hiding place basics

• High shelf may be preferable to box if floor space is limited
• Box maybe preferable to shelf if height is limited but floor space is adequate
• Partial front cover and towel over bed may be best choice if both floor space and height are limited
• Tailor to individual cat in small small cages
Curtails...curtains for stress curtailment

http://www.sheltermedicine.com/cage_covers
The truth about petting
LET PEOPLE PET THE KITTEHS!!!
What if you tried all this and you’re still looking for answers?
I work at a non-profit, open admissions shelter... In the past, the summer months have brought us rampant URI in cats, and our live release rates have been less than ideal (2010 was 54% for the month of July). We have an amazing new building that opened in 2009, and has 126 Shorline cages for cat holding (in addition to the adoption floor, which has two "kitty cities" for group housing and 16 cat "condos" that are basically tiny rooms instead of cages).

In 2010 we adjusted the temperatures in the cat lofts higher so the kitties wouldn't be as cold, we added hiding boxes and Kuranda beds, but we didn't see any changes in the URI rates. Cats were being euthanized daily because the URI was so widespread, and the severity of the illnesses were much greater than you see in private practice URI. Cats would go to foster for URI and be there for MONTHS with sneezing or conjunctivitis.
What causes feline URI?

• Ineffective vaccination?
• Improper disinfection?
• Too many pokey little fingers in the cages?
• Lousy air quality?
• No place to hide?
What mattered most?

- More than 8 sq feet, compartmentalized
- Limited to no movement, especially in first 7 days
UC Davis Housing Research
aka Cage Size Project

- Municipal shelter
- Health adult cats
  - Strays or surrender
  - Handleable
  - Randomly assigned
    - Small 103
    - Large 91
Stress score by day & Outcome

\[
\frac{1}{2} \text{ the number of housing units} + \frac{1}{2} \text{ the LOS} = \text{ same number of cats helped}
\]
Does this really work?

In February 2011, we took a huge step and cut holes in between cat holding cages, and inserted PVC portals, effectively doubling the space available to each cat and cutting the number of cages we had in half. Actually less than half - because each loft had an odd number of cages, there is a set of triple cages in each loft. We've now got 60 separate cat holding cages. These portals were designed to be permanent openings, we did not make any "doors" to close because then it's too tempting to revert to less space and more cats. We had many staff and volunteers who were very leery of the change, fearing that more cats would be euthanized because we lacked space.
We saw some effects right away. The lofts were immediately quieter, cats seeming more relaxed. There were very few cats "fake sleeping". The longer term effects are just starting to show up. Cat isolation is empty today, because our URI rates have plummeted. Cats aren't breaking with URI right before or after adoption. And now that the statistics for July are in, we found that our live release rate for felines in July 2011 was 70%. In 2010 it was 54%. We euthanized 140 fewer felines in July 2011 compared to July 2010 - and those numbers include the cats we euthanize on intake for lack of space.
Why is double compartment housing so important?

- Meet animal needs to defecate and urinate away from where they sleep and eat
- Helps insure animals are provided adequate housing space
- Minimizes the need for handling for daily care
  - Minimizes animal stress
  - Minimizes disease and disease transmission risks
  - Helps insure staff safety and efficiency of care
- Helps with public perception and cat presentation
LOW STRESS CAT HOUSING

- Raised Bed
  - soft resting place
  - conserves floor space
  - provides elevation

- Portal
  - separation of resting/eating area from litterbox area

- Litter Box
  - normal size
  - allows normal posturing (no shelf)
  - allows expression of normal behavior

- Draped Towel
  - provides hiding place

- Barred Cage Fronts
  - good ventilation
  - allows adopter/cat interaction

- Door Mounted
  - Food & Water
    - conserves floor space
    - helps keep cage tidy

- Quiet Hinges & Latches
  - low noise opening & closing of cage doors

- Partial Cage Cover
  - provides visual retreat
  - allows staff to easily monitor
Low Stress Dog Housing

- **Double Sided Housing**
  - Back to back kennels - indoor/outdoor or indoor/indoor
  - Pass through door only
  - Spans part of central wall
  - Important for space for retreat
  - Guillotine door (add dog door if to outside)

- **Walls**
  - Open bars / ventilation
  - Solid panel or CMU between kennels min height 4'-6"

- **Both Kennel Doors**
  - Open bars for ventilation and interaction
  - Glass for easy observation
  - Partial solid panel in door (provides visual choice for dog)

- **Space to move about and elimination side**

- **Kennel Size**
  - Width ~ 4' or greater
  - Larger breeds need bigger kennels 5'-6"
  - Allow people access for care (7'-6" not recommended)
  - Total length ~ 8'-9" minimum, 10' kennel good, 12' kennel better
  - Height ~ 6'-8"
  - Allow people access for care

- **Floors**
  - Single drain or properly designed trench drain
  - Slope to drain
  - Resinous epoxy coating or other durable/cleanable/disinfetable floor covering (no sealed concrete here)
> 80% risk by 2 weeks in the shelter
The magic of length of stay

• When animals stay less time overall, each one gets more space and care

• More space and care keeps animals healthier and happier, so they stay less time

• Staying less time keeps animals healthier and happier
Housing, staff time and LOS

• Adequately sized, double compartment housing takes less time to clean and helps reduce disease spread

• Staff that spend less time cleaning and more time interacting with adopters will reduce LOS
More individuals waiting does not change the rate of outcome
For a given rate of outcomes, \textit{length of time} waiting is determined by the \textit{number} of individuals waiting
Self sustaining at any level
Fewer, better quality housing units means fewer individuals waiting
# Effect of LOS

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Counterintuitive?

http://chewonthis.maddiesfund.org/2015/06/decreasing-shelter-length-of-stay/

NOT a time limit

NOT hurrying to euthanize unless that’s the right outcome

YES maximizing efficiency to get each animal out of confinement and onward to it’s home as quickly as possible!

Are you confused about what “reducing length of stay” means for your animal shelter or rescue group?

Few things can save more animals than reducing length of stay. It not only means do more animals get adopted, but increases the number of animals the organization can care for in any given year.

There’s a lot of confusion, however, in the shelter and rescue world about what “length of stay” really means, and the implications of reducing it.
DON’T do this:

- Don’t impose time limits on animals
- Don’t hold healthy, friendly animals back from adoption waiting for them to get healthier and friendlier
- Don’t believe that this is too good to be true – you CAN do it!
An observational study of the relationship between Capacity for Care as an animal shelter management model and cat health, adoption and death in three animal shelters

C. Kass a, E. D. Sullivan b, R. M. Kass b, K. F. Hurley a

Probability of adoption

- Shelter A: Before implementation = 0.68, After implementation = 0.62
- Shelter B: Before implementation = 0.72, After implementation = 0.61
- Shelter C: Before implementation = 0.71, After implementation = 0.58

Probability of shelter death

- Shelter A: Before implementation = 0.29, After implementation = 0.16
- Shelter B: Before implementation = 0.33, After implementation = 0.20
- Shelter C: Before implementation = 0.30, After implementation = 0.12
Predicted total in shelter monthly average population
Predicted monthly average isolation population
Don’t hold back!

- Minimal or no stray hold to live outcome for unidentified cats
  - Especially litters of kittens, return to field candidates
  - Double check your local hold requirement *for animals*; advocate for change if needed
Keep them moving!

• Promote adoption early and often
  – Population: don’t wait for crowding
  – Slow track animals: don’t wait for long LOS
  – Think price, placement, promotion
  – If you can’t promote, can you defer intake?

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<th>ACTION PLAN-Admissions and Adoptions/Outreach (Adoption Promotions)</th>
<th>TIMELINE</th>
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<td>Continue with monthly cat adoption specials/promotions.</td>
<td>1st Quarter</td>
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**UPDATE**

1-1-12 - Start the New Year with a Roar; adopt a Tiger-Tabby! Tabby cats 6 months and older waived adoption fee. (33 of the 49 cats adopted, 67%) TS
2-1-12 - Phat Cat Mardi Gras. Voting for Phatest cat, longer tenured cats. (19 of the 34 cats adopted, 56%) TS
3-1-12 - March Meow Madness. Longer tenured cats adoption fee waived. (8 of the 18 cats adopted, 44%) TS
4-1-12 - Sock Hop. Cats with socks and/or mittens over 6 months adoption fee
...and moving!

• Optimize frequency and timing of key services
  – E.g. surgery and foster return prior to weekend adoption

• Optimize intake versus adoption hours
  – E.g. intake Monday - Thursday to allow adoption focus Friday - Sunday
Historical cat management central

Ad hoc, citizen-driven shelter admission, regardless of shelter space

Return to owner, adoption, relocation, euthanasia are primary outcomes
Balancing intake and outcomes

Managed Admission Results

"We were confident we would see positive results with the implementation of a managed admissions process but we had no idea it would happen so quickly. By evaluating cats during the appointment, we were able to get cats to adoption and into new homes quickly. Before we knew it, URI was virtually non-existent as we watched healthy, happy cats leave our shelters in half the time."

from 31.3 days to 11.0 days
The intake exam: getting animals on the right path

✓ Trained, detail oriented staff
  ✓ Note, not diagnose
✓ Consistent process
✓ Adequate space and supplies
✓ Real Woods lamp – plug in kind
✓ Documented and flagged for medical
Daily monitoring: keeping animals on the right track

- Medical and behavioral
- Current, accurate grouping allows you to align housing and care by group and relax within groups
- Ins, outs and demeanor
- Simple, visible documentation
- Guides daily rounds
Daily monitoring: keeping animals on the right track

• Medical and behavioral
• Current, accurate grouping allows you to align housing and care by group and relax within groups
• Ins, outs and demeanor
• Simple, visible documentation
• Guides daily rounds
• Daily kennel/cage side monitoring

The following clinical signs indicate a health risk for the individual or the population:

- Labored breathing or difficulty breathing
- Severe lethargy or is non-responsive
- Scurries
- Active bleeding or there is a large amount of blood in its housing unit
- Watery diarrhea with or without blood
- Animal that is straining to urinate or defecate
- Evidence of pain such as restlessness, vocalizing or panting
- Vomiting not associated with having just eaten
- Neurological signs such as ataxia (difficult standing/walking), pupils of different sizes, circling in one direction, falling to one side, etc.
- Circular patches of hair loss
- Uremic incepts
The “Five Questions”

Who are you?

How are you doing?

Are you where you should be?

What is keeping you here?

What can we do to move you along?
Life saving starts before intake

• Think about fees
• Think about hours
• Think about alternatives
• Think about what’s best for the animal...
Balancing intake and outcomes

“Sometimes we just have to laugh because it almost seems impossible that one program can impact the numbers so significantly. This was one of those areas of the operation that we didn’t even know would improve until after we started the program and realized what a positive impact it was having on the incidence of URI and our capacity to handle URI.”
Lost cats > 10 times more likely to be re-united by staying where they are.

Feral cats that would not be appropriate or happy in a home environment may be replaced in the community Cats program.

Stray cats

A stray cat who is healthy and friendly likely belongs to someone in your neighborhood. Cats have a far better chance of reuniting with their owner when they're left in the area in which they're found. Less than five percent of stray cats that are brought into shelters are reclaimed by their owners. For this reason, we encourage you to leave healthy and friendly cats where you discovered them.
Worse than nothing?

Effects of low-level culling of feral cats in open populations: a case study from the forests of southern Tasmania

Billie T. Lazenby\textsuperscript{A,B,D}, Nicholas J. Mooney\textsuperscript{C} and Christopher R. Dickman\textsuperscript{A}

\textsuperscript{A}School of Biological Sciences, A08, University of Sydney, NSW 2006, Australia.
\textsuperscript{B}Department of Primary Industries, Parks, Water and Environment, 134 Macquarie Street, Hobart, Tas. 7000, Australia.
\textsuperscript{C}PO Box 120, Richmond, Tas. 7025, Australia.
\textsuperscript{D}Corresponding author. Email: Billie.Lazenby@dpipwe.tas.gov.au
“Contrary to expectation, the relative abundance and activity of feral cats increased in the cull-sites, even though the numbers of cats captured per unit effort during the culling period declined. Increases in minimum numbers of cats known to be alive ranged from 75% to 211% during the culling period, compared with pre- and post-cull estimates.”
Options for healthy strays

- TNR referral
- Found cat listing
- Options to co-exist
- Help with rehoming
- Bring to shelter
  - +/--appointment/RTF

- Invest resources saved on healthy cat transport and admission on diversion and higher priority activities

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**WHAT CAN BE DONE ABOUT STRAY CATS COMING ONTO MY PROPERTY?**

Also, City of Sacramento Animal Care Services no longer offers the service of picking up any owned cats or any stray cats that have been contained or trapped. You may surrender an owned cat or a stray cat at the shelter’s Reception Center. This building is open Wednesday through Sunday from 9:00 am to 5:00 pm and is located about 50-100 feet north of the shelter’s Main Office.
Return to Field (RTF) (aka Shelter/Neuter/Return)

- Sterilize/vaccinate/return to location found
- Healthy stray or un-owned cats and older kittens brought to shelter
  - Cats at risk for euthanasia
- NOT relocation
- NO identified feeder required

Which cats qualify?

- Healthy
- Stray/un-owned/outside
- Adults and older kittens
- No *imminent* danger/environmental concern at location of origin
“But I don’t want that cat back.”

- The majority of cats come from the minority of complainants
- Spay/neuter/vaccinate resolves many problems
- Educate about deterrents
- Use discretion on case by case basis
Impact on citizen complaints

- 755 targeted community cat spay/neuters over 2 years
- Complaint calls declined from 1032 to 166

*ICMA/HSUS Community Cat Management Guide*, page 31
Impact on citizen complaints

- 1188 targeted community cat spay/neuters over 2 years
- Complaint calls declined from 1958 to < 200
Return to Home

• Bypasses language, transportation and timing issues
• Resolves mismatch of timing in when cats are lost and when people look for them
• Reunites semi-owned but fully loved cats with their people
• Educates community members directly about TNR/spay neuter
Bypass the shelter when possible

- Truly lost cats often better served by remaining in community
- Not-really-lost cats often better served by TNR
- Update website, provide scripts to phone staff
- Encourage finders to wait, watch, post, talk to neighbors, get cat scanned for microchip – or just leave them be if there is nothing wrong
- A few days between first call and intake can help – offer stray intake by appointment for cats
Cadillac version

- Help appointments for strays and surrenders
- Low cost vet exam, vaccines, spay/neuter scheduled
- Supplies to hold onto cats for a while or keep them if that’s what they want
- Fund through donations/reduced intake
Find homes for the cats that need them

- Most healthy free roaming cats already have homes
- Prioritize alternatives to intake and TNR unless unusual risk
- Prioritize adoptive homes for owner surrender, victims of cruelty/neglect, kittens
- Prioritize barn homes for colony interventions and naughty cats
Homes for the cats that need them

Before and After Stray and Community Cat Diversion
(Chico City Animal Services)

Gap = 527

https://www.animalsheltering.org/magazine/articles/change-better-chico
Cats for the *homes* that need them

- Actively seek to adopt spayed/neutered, vaccinated, identified cats at low or no cost to people most at risk for otherwise not getting their cats spay/neutered, vaccinated and identified
- Build relationships to support success
- Break the cycle of birth and intake from highest risk communities
The difference between theory and experience
Association between a shelter-neuter-return program and cat health at a large municipal animal shelter

Charlotte H. Edinboro DVM, PhD
Heather N. Watson PhD
Anne Fairbrother DVM, PhD

From Health Sciences Practice (Edinboro) and Statistical and Data Sciences Practice (Watson), Exponent Inc., 149 Commonwealth Dr., Menlo Park, CA 94025, and EcoSciences Practice, Exponent Inc., 5375 SE 30th Pl, Ste 250, Bellevue, WA 98007 (Fairbrother).

Address correspondence to Dr. Edinboro (cedinboro@exponent.com).

OBJECTIVE
To determine effects of a shelter-neuter-return (SNR) program on admissions and health at a large municipal animal shelter in North California.

DESIGN
Retrospective cohort study.

ANIMALS
117,383 cats for Center database.

PROCEDURES
Shelter records with intake and outcome over the 8-year period March 1, 2000, to March 8, 2010.

RESULTS
Number of cats over 8 years; begins new with a decrease of 34.9% (11,999/34,383), increased from 5% at 6 to 5 days postcat. With implementation of URI, fewer cats were euthanized for URI and more were treated at lower costs.

CONCLUSION
Initiation of the SHIELD program reduced the need for additional shelter resources to care for cats with URI. Fewer cats were euthanized for URI and more were treated at lower costs.

(J Am Vet Med Assoc 2016;248:298-308)

Cats euthanized for URI

Feral return initiated 3/2009
Bottom line

➢ There is no biologically plausible basis to suggest that shelter euthanasia, as currently practiced in North America, benefits birds or other wildlife, reduces public health risks, or decreases cat abandonment or suffering.

➢ There is no credible scenario under which our society would finance or tolerate the methods to eradicate cats on the scale necessary to meaningfully reduce populations.
Speaking of spaying...

• Consider spay/neuter/adopt for kittens at *robust* 1.5 pounds
  – Especially if foster care is stretched
  – A home is often better than even a good shelter nursery
  – No scientific basis for 2 lb tradition
  – Weight/week rule is not exact
    – 1.5 lbs often 8 weeks
  – Capitalize on max cuteness and bypass foster in some cases

Check out the ASV Spay/neuter guidelines!
What about dogs?

- Housing
- LOS
- Behavior evaluations?
- RTO
  - Are practices shaping the right path?
- Adoptions
  - Conversation vs. interrogation
Behavioral care: don’t

- Don’t waste precious hours doing formal assessments that may not be predictive
- Dog bottlenecks can impact everyone
Behavior evaluation is an ongoing activity

- Surrender/finder info
- Intake treatments
- Daily monitoring of ins, outs and demeanor
- Interactions with people and animals
- More formal evaluation when warranted
Playgroups

- Allow for enrichment and assessment
- Shows adopters what they love to see
- May increase certain risks while dramatically reducing others
- Think back to infectious dose
A critical component is open and honest communication.
Our negative experiences stick to us like Velcro, while our positive experiences slide right off us like Teflon.

~ Dr Rick Hanson: American Neuropsychologist & Author of Hardwiring Happiness
As humans, we are prone to a strong negativity bias where we place much more weight to negative feedback than to positive.
Adoption Principles

➔ Our job is to find animals homes. If not from us, then where are they getting animals? Will they have our support and resources to help them retain that animal in the home?

➔ Using non-judgmental language and having an open mind is critical.
In 1984, *Knowles* suggested 4 principles that are applied to adult learning:

1. **Involved Adult Learners**
   Adults need to be involved in the planning and evaluation of their instruction.

2. **Adult Learners' Experience**
   Experience (including mistakes) provides the basis for the learning activities.

3. **Relevance & Impact to Learners' Lives**
   Adults are most interested in learning subjects that have immediate relevance and impact to their job or personal life.

4. **Problem-Centered**
   Adult learning is problem-centered rather than content-oriented.

*(Kearsley, 2010)*
Respect

Adults are more open to learning new things when they are acknowledged for the wisdom, skills and resources they bring to the new situation.

To show respect in a learning environment, acknowledge people for:

- Who they are
- What they know and do
- What they bring to the present situation.
Immediacy

Retention = Useful Application Immediately

Know something about your learners so that you can point out how they can put the information you present to use - right away - in their situations.

"Do you already have a plan for how you’d like your first night with your new puppy to go?"

"What else can I help you with to get your relationship with your new cat off on the right foot?"
Relevance

= “Why do we have to know this?”

To ensure relevance in a learning environment, ask people what they would like to learn and how that information will be useful to them. Then you can work together to find the answers to their questions.

*Sometimes people don’t know what they don’t know. In such cases, you can help the adult learner to take in new information by explaining how the information will be useful in their lives.*
Safety

A safe learning environment is:
• Supportive,
• Free from threat of physical or emotional harm
• Meets at least some of the learners’ needs for concentration (not too loud or chaotic, etc.) and comfort (not too warm or cold, ample seating, etc.).

Look for:
• Opportunities to praise learners for their accomplishments
• Ways to correct mistakes that help people retain their dignity

Safety doesn’t mean there will be no challenge or no corrections; it means only that there will be no dumb questions.
80% of what they SEE and DO

10% of what they HEAR

20% of what they READ
Engagement

People learn best when they are actively involved in acquiring the information.

Active involvement can include:
• Practicing a new skill right away
• Using new information to solve a problem
• Having a meaningful dialogue about the ramifications of the information

To reach that 80% of retention – to really engage your learners – look for ways to get your learners to do something (right then and there) with the information you’re providing.
Deciding how many

Adoption Driven Capacity: Your shelter’s key to saving lives and providing great care

What is the perfect number of animals to have up for adoption at any one time?

We know from the retail world that this is a critical question, all the more so when we're dealing with living, feeling beings. Too few animals for adoption and willing adopters may walk out of the shelter empty-handed because they couldn’t find the pet of their dreams.

Too many animals for adoption and costs and length of stay are needlessly increased, conditions for care may be compromised, and in the worst case scenario adopters are so overwhelmed by choices that they don’t take any animal home at all.

Just the right number, and welfare and health are maximized while cost is minimized, more animals are served over time, and everybody wins!

We know which of these three options we want, but how do we determine that elusive “just right” number? To help each shelter answer this question, we’ve developed this article and the associated Adoption-Driven Capacity (ADC) Calculator. We hope these tools are useful for you!

http://www.millioncatchallenge.org/resources/capacity-for-care/adoption-driven-capacity
Thank you!!

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