

# New Models for Humane & Effective Cat Management in Shelters

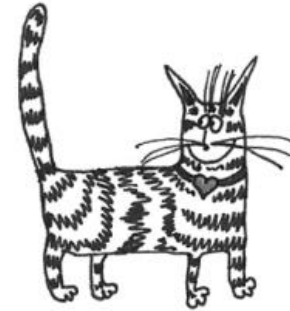
Cynthia Karsten, DVM, DABVP (Shelter Medicine Practice)

UC Davis Koret Shelter Medicine Program

[www.sheltermedicine.com](http://www.sheltermedicine.com)



What we've always known...



MUST =

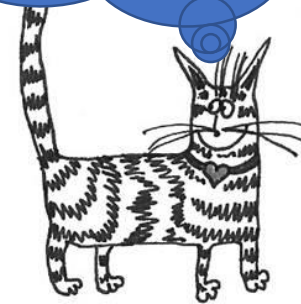


# What we started to understand...

Managed Intake and/or alternatives to intake for animals that exceed capacity for care and live release



Remove barriers to adoption & RTO and SNR healthy cats



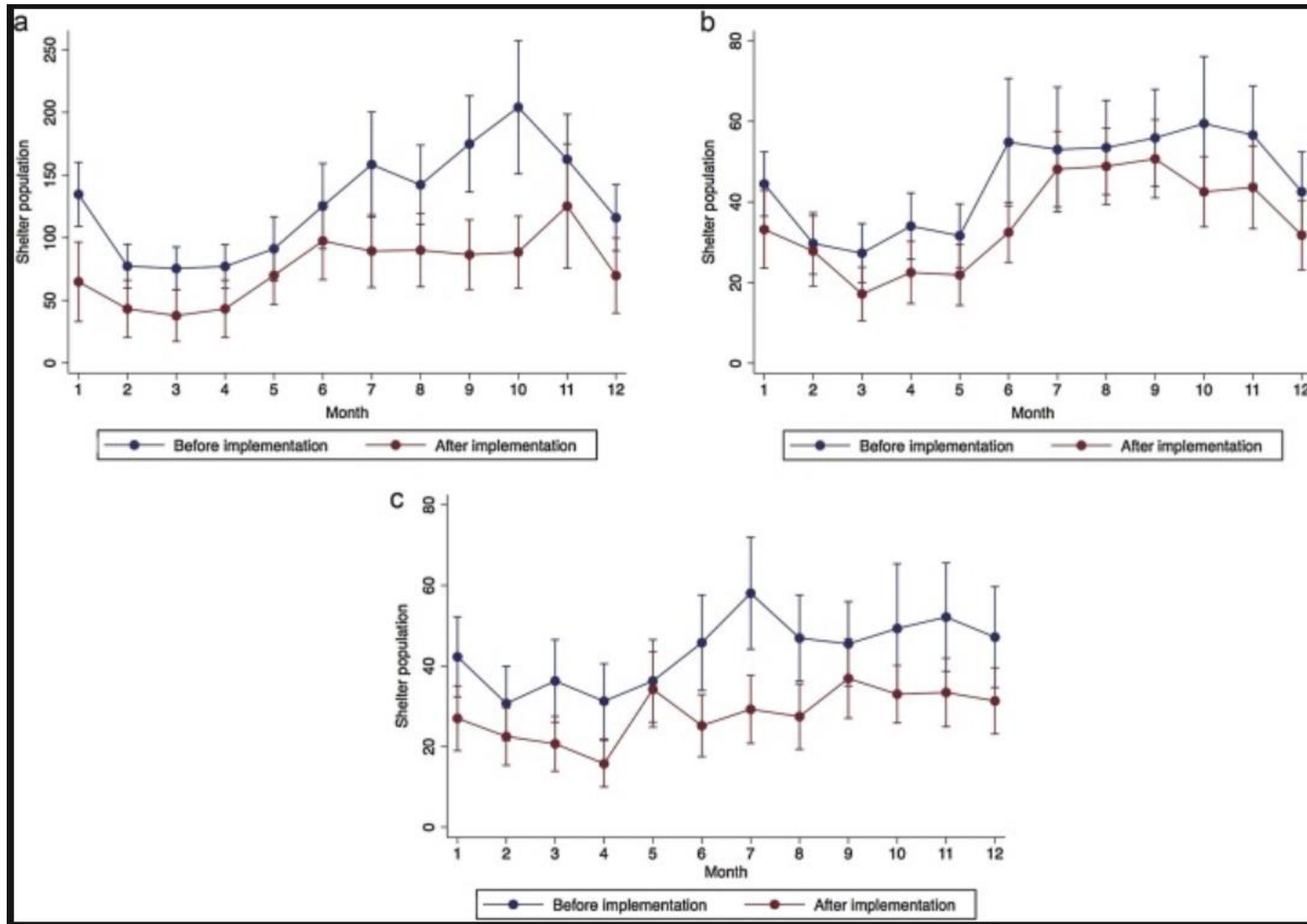
**MUST =**



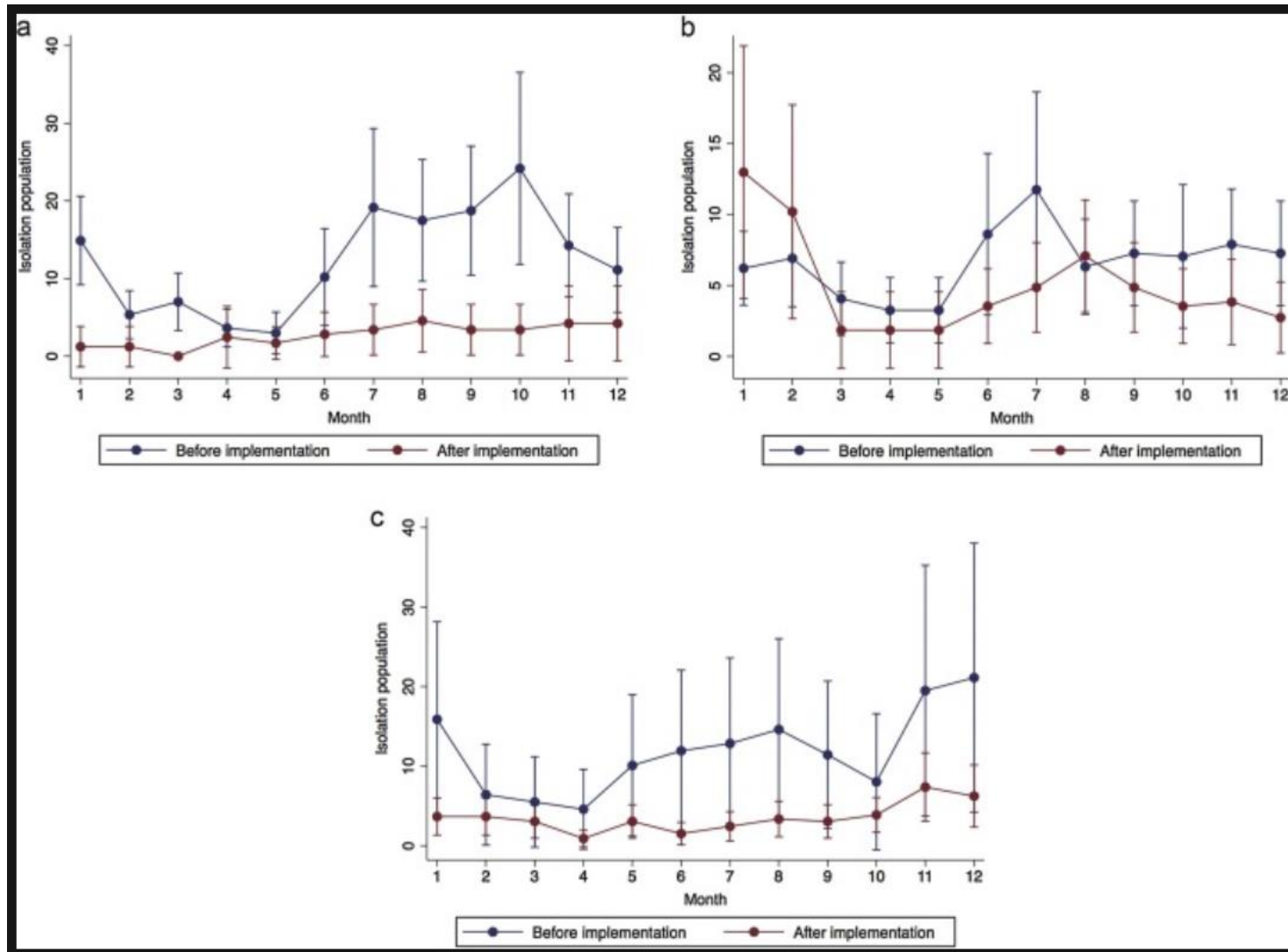
# Capacity for Care (C4C)

- Insist on conditions that are kind to animals
- Know how many animals to manage at any one time within those kind conditions, and develop strategies to stay within this limit
- Maximize efficiency to serve as many animals as possible over time
- Ultimately serve more animals AND provide better care for each one

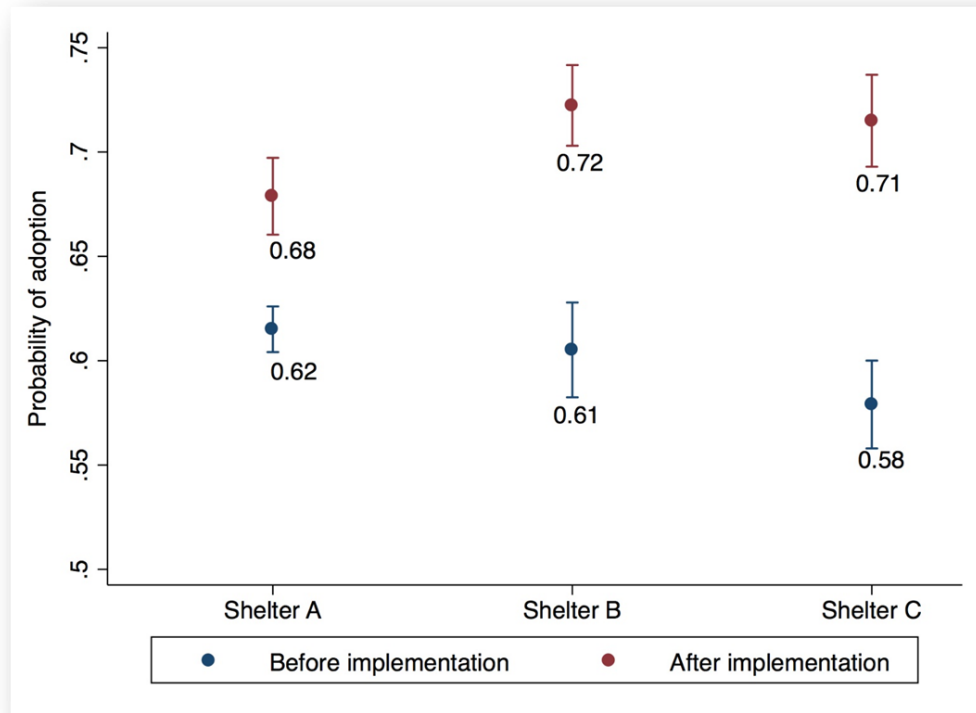




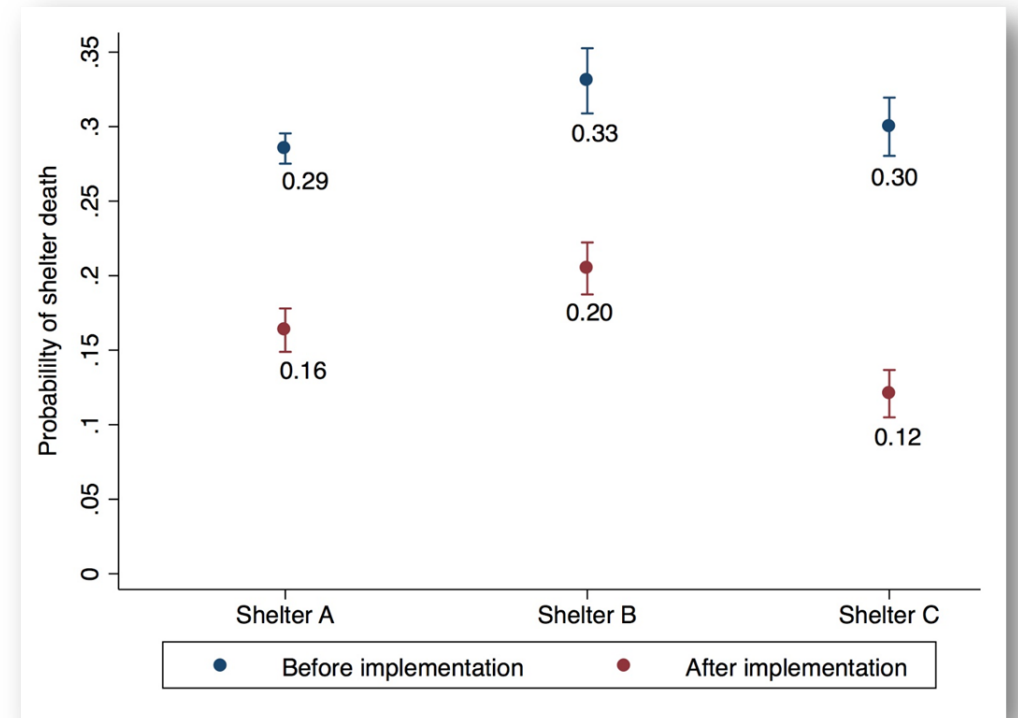
Predicted monthly average total in shelter population



Predicted monthly average isolation population



Probability of Adoption



Probability of Euthanasia

# Wrong tools





# Capacity for Care (C4C)

- Insist on conditions that are kind to animals **and people**
- Know **which animals and** how many animals to manage at any one time within those kind conditions, and develop strategies to stay within this limit
- Maximize efficiency to **help** as many **of the right** animals as possible over time
- Ultimately **help more people and** animals AND provide better care for each one...**and for ourselves**



The Veterinary Journal

Available online 7 August 2017

In Press, Accepted Manuscript



Original Article

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.L. Karsten <sup>a</sup>  , D.C. Wagner <sup>a</sup>, P.H. Kass <sup>b</sup>, K.F. Hurley <sup>a</sup>

# The Right Tools

- Why are we where we are?
- What problems exist in terms of cats that are leading us here?
- Of those problems, which ones can we effectively address to have the impact that we want?
- What do we need in order to do that?
- What will success look like?
  - Vision/destination postcard



# The Vision

- ▶ Decrease overall intake of animals by 30% over the next year
- ▶ Work within the Animal Care Center (ACC) Capacity for optimal animal housing
  - ▶ Less animals in the ACC allows for staff to practice social distancing/be safe
  - ▶ Fewer animals means better individualized care for each animal
- ▶ Have the best possible outcome for each animal taken into the entire ACC system
- ▶ Enable staff to take time needed to safely attend to each animal
- ▶ Create a safer space for staff and our customers
- ▶ Increase staff availability for improved customer service
  - ▶ This will lead to better placement of animals
- ▶ Create a less stressful and more fulfilling environment for staff



PATIENT CARE

## The Right Care, at the Right Time, in the Right Place

Explore the innovative ways hospitals and caregivers are responding to patients' evolving needs.

### PERMANENTE MEDICINE

About us Our work The Permanente Federation News

## Right Care, Right Time, Right Place

June 15, 2017

Rahul Rastogi, MD, Committed to Finding Innovative Ways to Deliver Quality Care

By Athan Bezaitis  
The Permanente Federation

At Kaiser Permanente, we continue to be thoughtful about our commitment to getting every member the right care, at the right time, in the right place. Thanks to the ingenuity of Rahul Rastogi, MD, the chief operating officer of Northwest Permanente (NWP), "right place" is taking on a whole new meaning.

With his creative approach to better access, Kaiser Permanente's Northwest Region is becoming a model not just for the rest of the organization but the entire U.S. health care system. It recently opened an urban neighborhood clinic in Portland, Oregon, and is experimenting with a variety of virtual visits.

Dr. Rastogi began his career practicing emergency medicine, a field well-suited to his personality. "No day is ever the same in the ER, and I enjoy the unexpected," he explains.

Little did he know this mindset would serve him well in his future. Dr. Rastogi did not go into medicine with leadership ambitions, but as he worked as a doctor at Kaiser Permanente, he was inspired to make the organization even better.

With years of practice under his belt, an eye for creativity, an interest in system design, leadership coursework, and a willingness to embrace the unexpected, he was naturally suited to the position of COO.

American Hospital Association  
Advancing Health in America

AHA Member Center About Press Center Contact Us Register / Log In

Advocacy Career Resources Data & Insights Education & Events News

## Right Care, Right Place, Right Time

### CASE STUDY

## MONTEFIORE HEALTH SYSTEM – THE BRONX, WESTCHESTER AND THE HUDSON VALLEY, N.Y.

App improves outcomes in Collaborative Care Model

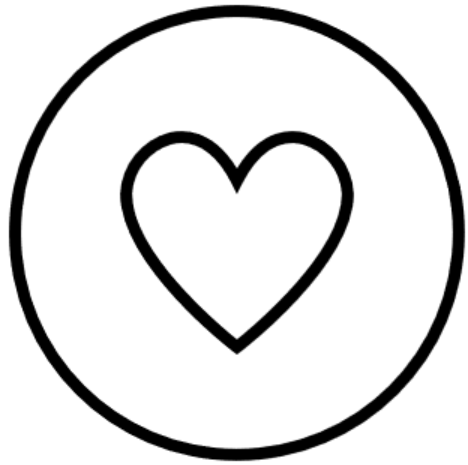


Download a PDF of the case study

In 2015, Montefiore Health System in New York City began implementing a program using the Collaborative Care Model (CoCM) to better serve its large population of low-income and minority patients with significant medical and mental health comorbidity and socioeconomic challenges. The health system initiated the CoCM with a grant from the Centers for Medicare & Medicaid Services' Innovation Center, which helped Montefiore design, implement and sustain the model to increase the

# The three R's:

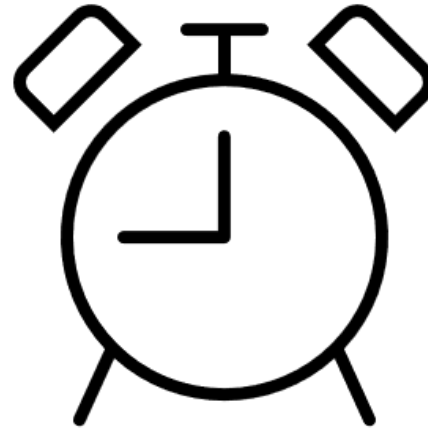
# The 3 R's plus 1: Every animal in need gets...



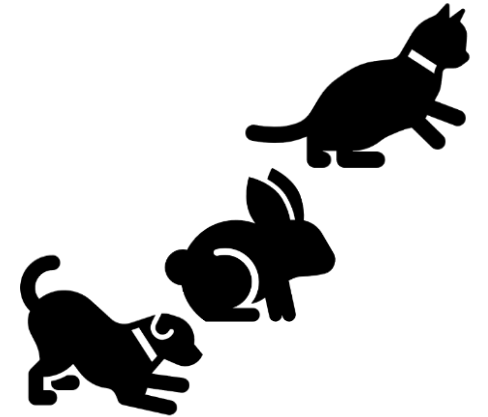
The Right Care



In the Right Place



At the Right Time



To the Right Outcome

# The Right Place

- \*Managed admission\*
- Pet safety net
- Home to Home
- Foster finder
- Kitten non-kidnapper
- Leave cats be/Trap Neuter Return diversion
- Space in shelter freely available to animals in need e.g. displaced by disaster, sick/injured/at immediate risk, owners truly can't keep



# Focus on what you do, not what you don't

- We help cats and people who need help
- We are here for you when you need us
- We have time to discuss the issue and work with you on a resolution that works for everyone
- We do this by allocating trained staff to the roles where they are needed at the level they are needed
- We use experience, data and knowledge to focus our resources



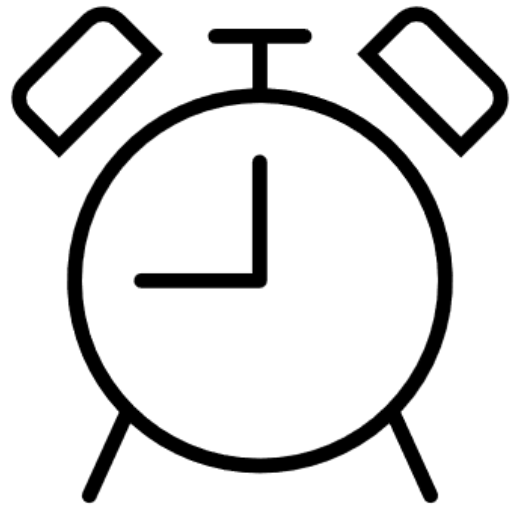
# What The Right Place is not...

- An attempt to do less work or put people out of work
- All or nothing
- An attempt to not help animals (or people)

It will take time, we are in this together and will do it as a team.







# The Right Time

To come into the shelter & to be in the shelter:

- Appointment based sheltering (intake and outcomes, intermediate steps coordinated with capacity)
- Intake to outcome pathway planning
- Daily population rounds
- Methods to reduce Length of Stay
- Methods to reduce human waiting time (e.g. Whatwhile)

# Benefits of Scheduling

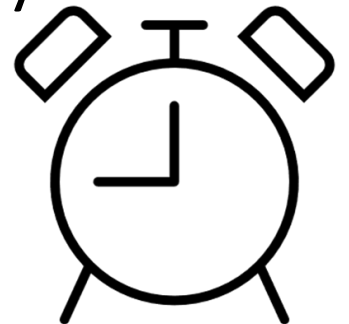
- ✓ Sets everyone up for the best result
  - Animal
  - Client
  - Staff
- ✓ Improved Communications
- ✓ Convenience
  - Added value
- ✓ Predictability
- ✓ Safety

Let's Make  
You an   
Appointment!

# FAQ's

## **Why do I need to make an appointment to bring in a pet?**

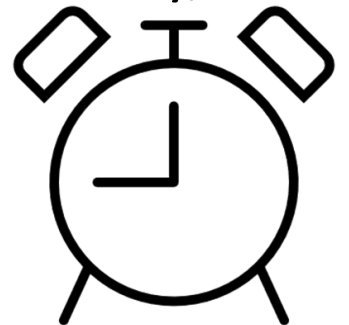
In order to ensure resources and staff are ready and available when a pet arrives, Animal Care of Davis County utilizes scheduled appointments to best serve you and your pet. Though we will help every animal that comes to us, without an appointment process, we would not have control of wait times or the number of pets that come into our care each day, thus hindering our ability to provide the best possible care for each animal. At most, there is a 3-4 business day waiting period until an appointment is available.



# Feedback

...I'm planning for a certain number of locked-in appointments that have been screened through our customer service or website (Found dog? Try NextDoor, hold dog for a few days, can we help you post, etc). ***The resulting intakes are those animals that truly need to come in.*** In addition, I'm leaving two appointments unassigned, one early and one late, for urgent walk ins. These are those who just want to leave the animal with us and those who walk in with an injured without calling, that sort of thing. We have time blocked off when and if we need it. I was the office manager of a doctor's office and the doctor scheduled herself an open appointment or two so she was available to take care of someone who showed up without an appointment. It was a small town and, not wanting to turn people away, she would see them that same day.

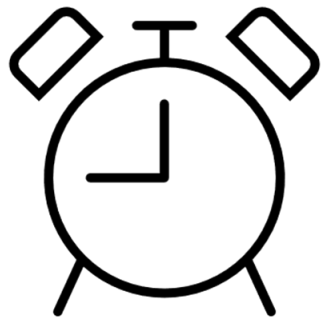
...



...

...My vision is that if we are helping someone and the unscheduled person can wait (non-life threatening emergency still gets priority), they can take that open appointment. We could even text them when we have staff available if necessary. ***Kind of like showing up to a restaurant without a reservation and you just have to wait until they have the resources to help you (seat you at a table) . They could also be scheduled the next day, thereby allowing for another day for the owner to locate the dog while still in the neighborhood, possibly making the appointment unnecessary.*** I'm optimistic we will have the time to help the person post or go through lost reports to help expedite the dog's reunification and provide meaningful support. We are all becoming accustomed to making an appointment or finding a way to get services without crowding into a building. While it may be a learning curve for some citizens, they'll learn and we'll do our best to support them.

...



...

**...We aren't saying "No" we are just managing the when so we have people to help them.** Will there be people upset? Sure. We've had people upset because we aren't at the shelter at 2 in the morning to take their owner surrender animal, too. **But this is what we are doing to better use our resources.** Just taking in every animal without some conversation, just encourages warehousing, crowding, excessive overtime, and animal caregiver burn out. This may change; ask us in a couple of months how this is working but it's a start!

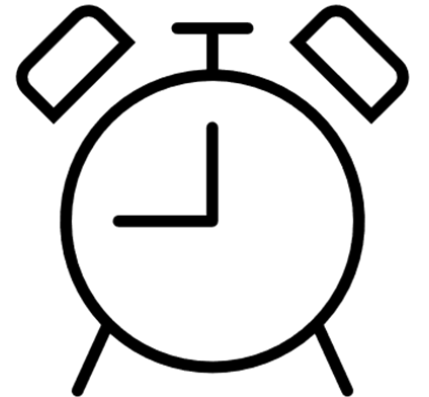
- Front Street Animal Shelter

I believe that the silver lining in COVID may be an opportunity to educate our communities, to engage them as partners and to let them help with kittens, strays, neighborhood watches and more. We get to set boundaries and explain our staffing numbers, our budget constraints and how municipal budgets work and to define what we can do to keep people and animals safe. Municipal shelter systems around the country are becoming more professional, more respected and doing better work. Maybe the COVID induced boundaries will give us all a boost as we go forward.

- City of LA Animal Services

# How?

- Reallocate staff
  - less in care = more time (can be done from anywhere)
- Training in communication and problem solving
  - Social services/case management model
- Provide Resources to help in the meantime
  - Medical
  - Behavior
  - Food
  - Re-homing
  - Boarding
- Use an online scheduling tool





Prime Nexus

https://drnakamura.primenexus.com/book-appointment/?locationId=5abd11caef0ee027ac54c55&skipdirect=...

SVM-IT HelpDesk VIPER CERE My UC Davis Office 365 DavisMail SVM-IT HelpDesk Canvas VIPER VMACS Office 365 DavisMail SISWEB HELP MERCK UC Davis IACUC Busin...



Choose a service    Select a provider    **Pick appointment times**    Patient Info

← Back    When can you come in?

Service

General Eye Exam

Provider

Dr. Myra Lew

Selected Appointment Times

Drag and drop to reorder

May 2020    This Week

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Available on Friday, May 29th

Morning	Afternoon	Evening
9:00a	12:30p	3:30p
10:30a	2:15p	4:30p
11:00a		

### Select service



#### Clinic Services

public or shelter clinic our care staff use this service for almost everything!



#### Field Services

Dangerous Dog or Citation hearings, Responsible Pet Ownership Classes, what about a ride along?



#### Front Desk Services

Reclaiming a pet, completing adoption paperwork, paying a fee, definitely general inquiries.



#### Sheltering Services

Adoptions, meet 'n greets, tours, volunteer orientations, maybe even community service hours!

### Select Staff Skip selection

Any Staff



#### Mr. G, DVM

Maybe a Bio about the Vet, or a list of what services they perform. Can be anything and is public facing.



#### Mrs. M, DVM

Maybe a Bio about the Vet, or a list of what services they perform. Can be anything and is public facing.

### Select time

Date

May 11 May 12 May 13 May 14 May 15 May 16 May 17 May 18

Times in -05:00 EST

Morning

10:00 am 20 left  
10:30 am 20 left  
11:00 am 20 left

Afternoon

12:00 pm 20 left  
12:30 pm 20 left  
1:00 pm 20 left

Evening

4:00 pm 20 left  
4:30 pm 20 left

File Edit View History Bookmarks Tools Help

» Make appointments? That do X +

blog.millioncatchallenge.org/make-appointments-that-doesnt-sound-li

SVM-IT HelpDesk VIPER CERE My UC Davis Office 365 DavisMail SVM-IT HelpDesk Canvas VIPER VMACS Office 365 DavisMail SISWEB HELP MERCK

FOLLOW US: ACCOUNT LOGIN

**MILLION CAT CHALLENGE**

FUNDED BY: Maddie's Fund

A partnership of Maddie's Fund®, UC Davis Koret Shelter Medicine Program and Maddie's Shelter Medicine Program at the University of Florida

ABOUT BLOG WHO'S INVOLVED RESOURCES GET INVOLVED

# Make appointments? That doesn't sound like open admission to me!

November 21, 2019

Is someone you know, perhaps a member of your staff/volunteer team or a board member, uncomfortable with the idea of scheduling appointments for surrenders? Does the thought of managing the flow of animals into the shelter make them feel as though there's somehow an asterisk next to "open admission" now?

Don't fault them for their hesitation, they aren't alone in their fears. Even though our doctors, therapists, trainers, optometrists, hairdressers, tax accountants, and even our bosses schedule appointments to ensure our time together is focused and maximally productive, somehow animal welfare professionals are made to feel like we are not showing up if we dedicate planned, focused time to understand and solve for the unique challenges a pet and their guardian are experiencing.

It's a head-scratcher when you take a step back. You'd likely be put off if one of the providers listed above

**SEARCH FOR:**

Search

**CATEGORIES**

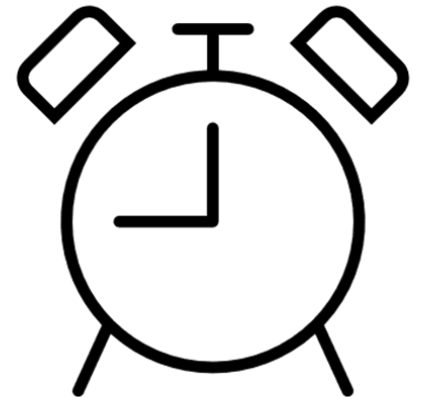
- Alternatives to Intake
- Capacity for Care
- Cat Tales
- Community Profiles
- Events
- Fun
- Managed Admission
- Opportunities

9:04 AM 5/26/2020

<http://blog.millioncatchallenge.org/make-appointments-that-doesnt-sound-like-open-admission-to-me/>

# The Right Time in Shelter

- Pathway planning
- Daily Rounds
- Avoiding waiting/wasted time
  - Enough staff at each flow through point
    - Intake
    - Surgery
    - Outcome
- Size of population in shelter impacts length of stay (LOS)



# Effect of Daily Population

Average Daily Outcome	Average Daily Population	Inevitable LOS
10	50	5

# Effect of Daily Population

Average Daily Outcome	Average Daily Population	Inevitable LOS
10	50	5
10	100	10

# Effect of Daily Population

Average Daily Outcome	Average Daily Population	Inevitable LOS
10	50	5
10	100	10
10	200	20



# The Right Care

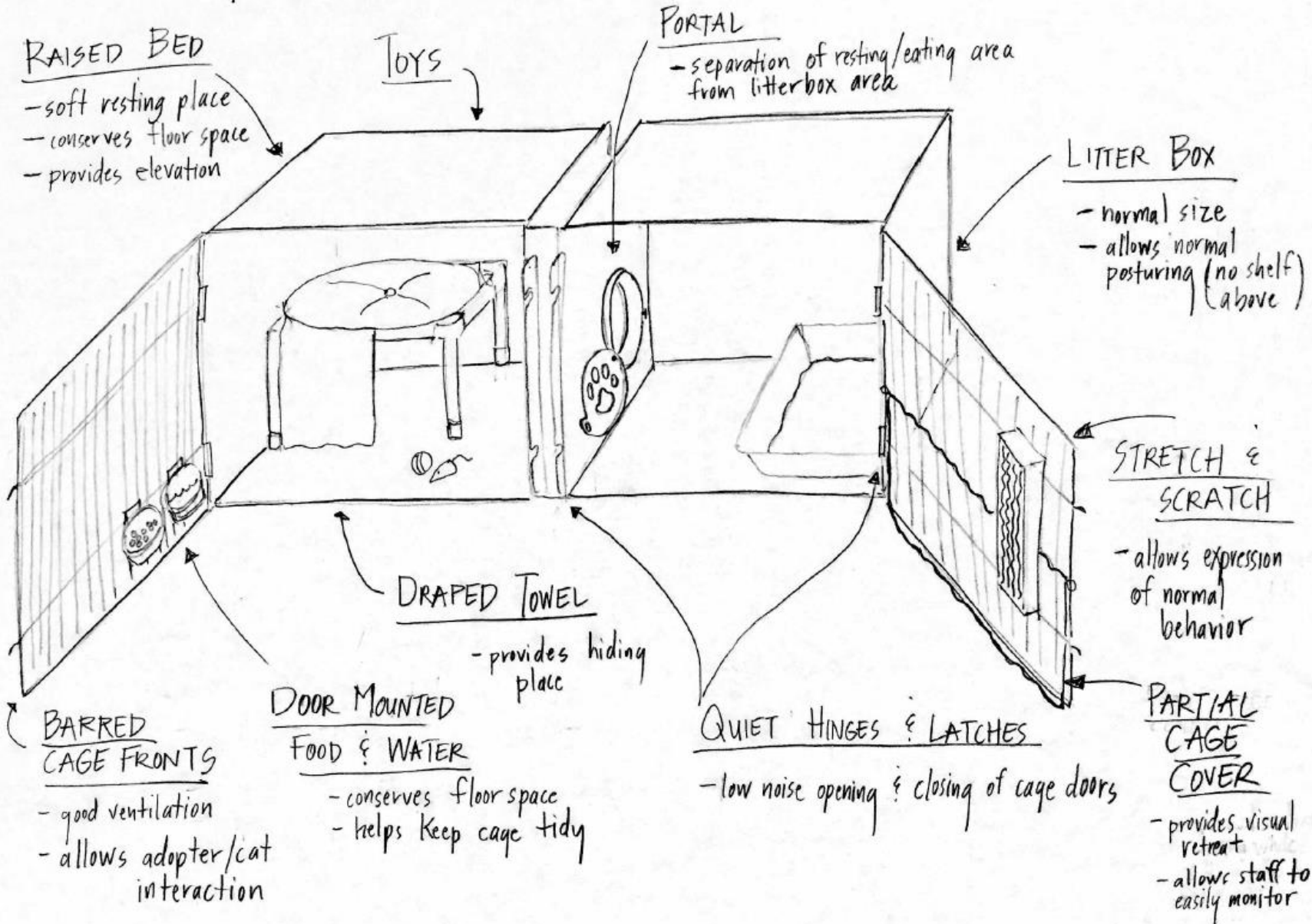
- Capacity for Care within the shelter
  - Five freedoms/domains of animal welfare/ASV Guidelines
  - Housing, staffing, outcome capacity
- Care within the community
  - Access to care
  - Flow charts, scripts, communication to ensure that animals aren't being left to suffer



Our care matters too

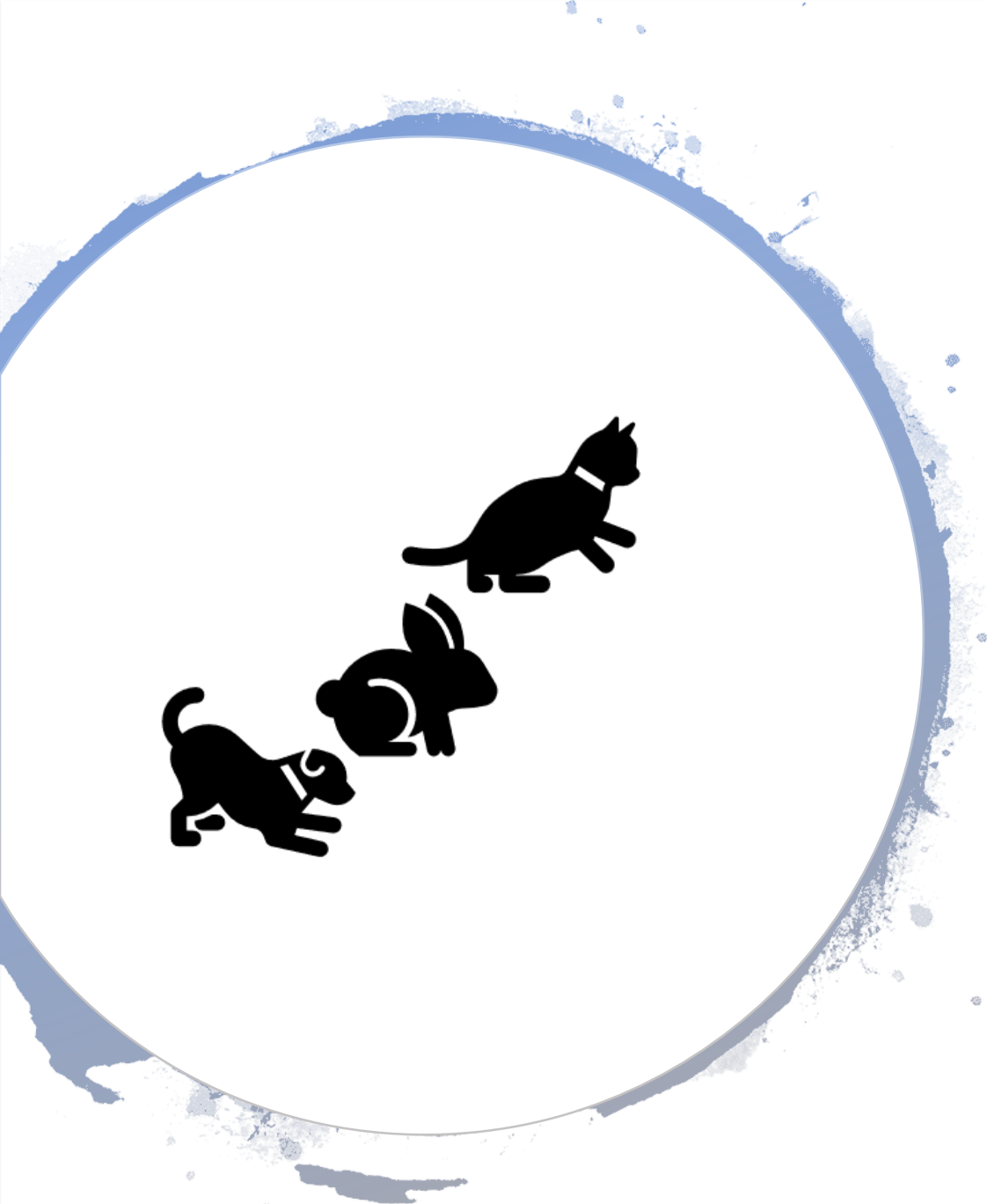


# LOW STRESS CAT HOUSING



# The Right Care - Economics

- It costs between \$150 to \$400 for an animal management officer to trap one cat, and additional costs for it to be held in a pound or at a service provider's shelter (animal welfare agency) until it is claimed, rehomed or euthanased
- Costs for councils and animal welfare agencies to manage cats in their shelters range from \$500 to \$1,000/cat, with an average hold time of 30 days
- Low end would be \$500 and high end would be \$1,400/cat
- Intake of 5000 cats/year – if ½ the cats get to a positive outcome \$1.25 mil - \$3.5 mil

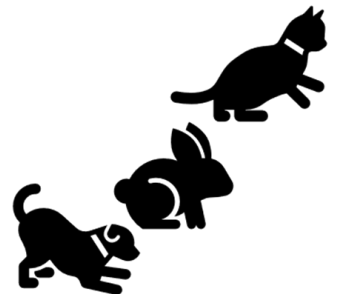


# The Right Outcome

- Preference for return to origin for healthy animals
  - Stabilizes families, communities and ecosystem
  - Return to home/owner/"field"
- Remove barriers to appropriate outcomes
  - Adoptions from foster
  - Fee waived returns as well as adoptions
- Preference for local adoption
  - Support successful pet ownership within marginalized communities
- Transfer where resources are better aligned
- Euthanasia to relieve irremediable suffering or address significant threat/risk

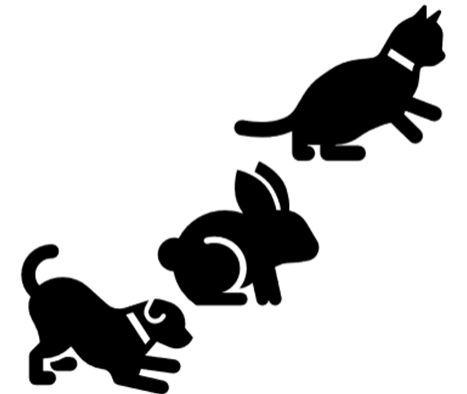
# Preference for return to origin for healthy animals

- Stabilizes families, communities and ecosystem
- Return to home/owner/“field”
- The impact on people
  - Improve the mental health and job satisfaction of pound staff, shelter staff and volunteer animal carers
  - Maintain the bond with the caregiver (health impacts)
- Decrease the intake and euthanasia rates of cats and kittens in council pounds and animal welfare organisation shelters
  - Intake, not adoption rates, drives euthanasia








# Shape the path The Right Outcome

- Remove barriers
  - Including those that come with our assumptions
- Make the desired outcome the easiest one to achieve
  - Communication
  - Fees
  - Accessibility





## Should Dogs and Cats be Given as Gifts?

Emily Weiss<sup>1,\*</sup> , Emily D. Dolan<sup>2</sup> , Laurie Garrison<sup>3</sup> , Julie Hong<sup>4</sup>  and Margaret Slater<sup>5</sup> 

 [Authors' affiliations](#)

Received: 12 September 2013 / Revised: 2 October 2013 / Accepted: 3 October 2013 / Published: 16 October 2013

 [View Full-Text](#) |  [Download PDF](#) [63 KB, uploaded 16 October 2013]

**Simple Summary:** Policies that state pets should not be adopted as gifts are prevalent at animal welfare organizations. However, the fact that this belief is unfounded. Denying adopters who intend to give the animals as gifts may undermine the overarching goal of increasing adoptions of pets from our nations' shelter system. We found that receiving a pet as a gift was not associated with impact on self-perceived love/attachment, or whether the dog or cat was still in the home. These findings suggest there is no increased risk of relinquishment for dogs and cats received as a gift.

## Do Policy Based Adoptions Increase the Care a Pet Receives? An Exploration of a Shift to Conversation Based Adoptions at One Shelter

Emily Weiss, Shannon Gramann, Emily D. Dolan, Jamie E. Scotto, Margaret R. Slater

Shelter Research and Development, Community Outreach, American Society for the Prevention of Cruelty to Animals (ASPCA®), New York, USA

Email: [emily.weiss@aspca.org](mailto:emily.weiss@aspca.org)



## A Comparison of Attachment Levels of Adopters of Cats: Fee-Based Adoptions Versus Free Adoptions

DOI: 10.1080/10888700903163674

Emily Weiss<sup>a</sup> & Shannon Gramann<sup>b</sup>  
pages 360-370

[Publishing models and article dates explained](#)

Published online: 22 Sep 2009

 [View full text](#)

 [Download full text](#)

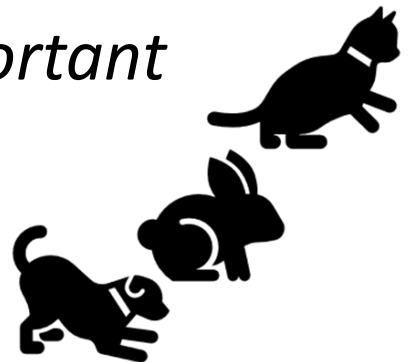
Full access

## Characteristics of Shelter-Relinquished Animals and Their Owners Compared With Animals and Their Owners in U.S. Pet-Owning Households

John C. New Jr. , M. D. Salman , Mike King , Janet M. Scarlett , Philip H. Kass & Jennifer M. Hutchison  
Published online: 04 Jun 2010.

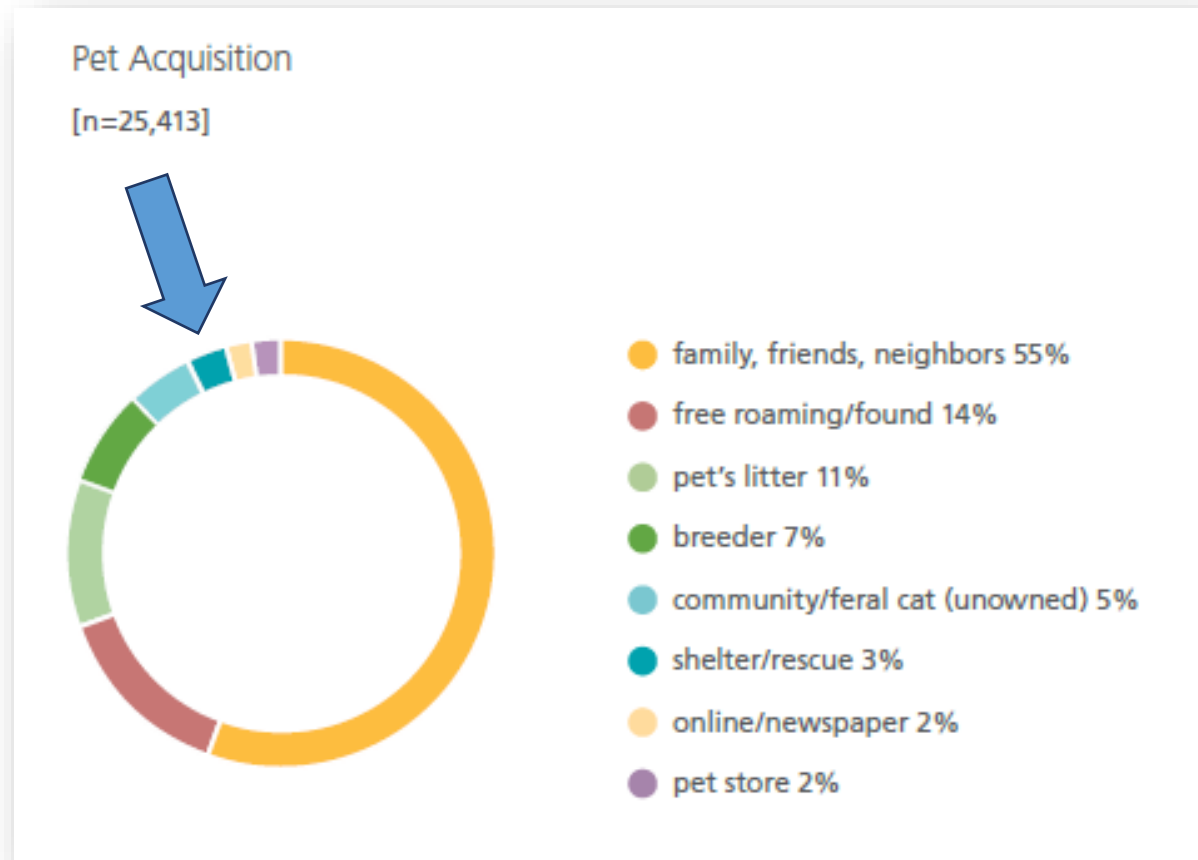
# Great news!

- Cats acquired as strays or with minimal planning are *less likely* to be relinquished to a shelter
- There is *no difference in attachment levels* between adopters of full price and fee-waived cats
- There is *no difference in subsequent care* or attachment levels between adopters using a policy-based versus conversation-based process
- Spay/neuter/vaccination/identification *reduces the most important risks for cats*





# Where it matters most? Strategic adoptions





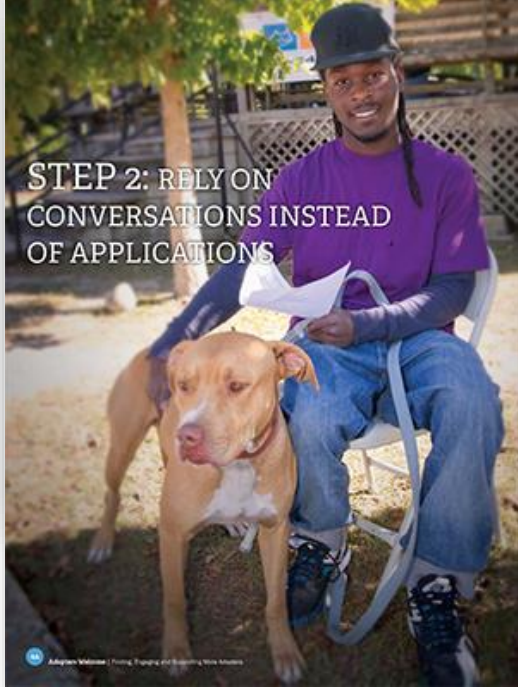
“Adopters Welcome”

Helping Everyone and Supporting More Adoption

**STEP 1: IMPLEMENT POLICIES THAT REMOVE BARRIERS AND INCREASE OPTIONS**



**STEP 2: RELY ON CONVERSATIONS INSTEAD OF APPLICATIONS**

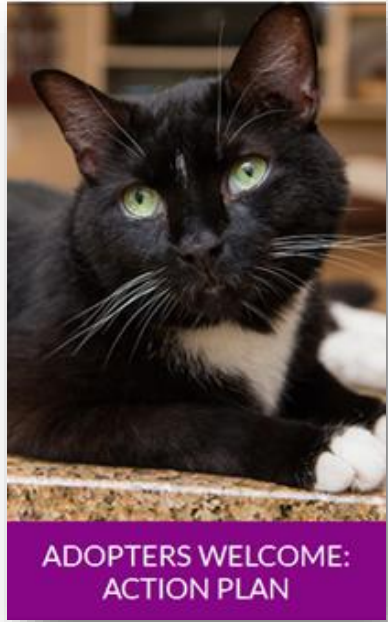


**STEP 3: DEVELOP MARKETING THAT OVERCOMES BARRIERS**



"To the best of our knowledge, waiving the fee for the adoption of an adult cat was developed at the Wisconsin Humane Society (WHS), often considered one of the top humane societies in the United States. The idea of a fee-waived adoption program was motivated by the knowledge that many in the community were acquiring free roaming cats or cats from "free to good home" newspaper ads, neighbors and the like. In most cases, these cats were not spayed or neutered, new guardians did not have the tools to effectively resolve common behaviors that education during adoption could provide, increasing secondary abandonment and thus contributing to cat overpopulation. In addition, waiving the fee created an opportunity to discuss the plight of cats and encouraged adopters to select an adult cat over a kitten. The implementation of this program resulted in increased adoptions of adult cats at WHS."

— "A Comparison of Attachment Levels of Adopters of Cats: Fee-Based Adoptions Versus Free Adoptions." \*



**ADOPTERS WELCOME:  
ACTION PLAN**

**STEP 4:  
TRAIN YOUR TEAM**



<http://www.animalsheltering.org/how-we-help/strengthen-your-shelter/adopters-welcome/>

# THE ADOPTION PROCESS

The group agreed that a good adoption process:

- Takes place in a pleasant and welcoming atmosphere
- Is respectful of the adopter's experience and knowledge and assume both of you come from a place of commonality wanting to help animals
- Takes a conversational approach with open-ended questions such as "what are you looking for," "what's your lifestyle," etc.
- Is a discussion, rather than a series of barriers the applicant must overcome in order to get an animal
- Focuses on success, and creating a relationship with the client
- Looks for a way to make an adoption, not turn one down
- Treats each applicant and animal as individuals
- Uses guidelines to delineate issues for discussion and education, not as inflexible mandates
- Emphasizes the resources the shelter can provide to help solve any problems that arise
- Is ready to re-direct the adopter to other options as needed
- Emphasizes that post-adoption contact from the adopter will be welcomed



# Evaluate the Process

- Convenient hours
- More conversation, less interrogation
- Set reasonable expectations of the pet
- Adopter driven
- Shorter duration
  - Add focus and time to follow up
- Incredible customer service
- Hire/train the right people
- It's the start of the relationship 😊



# If We Help People Get a Pet From Us...

They:

- Adopt a pet that is already spay/neutered, current on vaccines, microchipped
- Receive guidance on selecting a good match
- Are given information on how to introduce their new pet to their home
- Are provided a medical history and behavior care/training tips
- Have access to a resource if they need help, to avoid the pet ending up back in the shelter

We:

- Get back a healthy, adoption-ready animal if for any reason the adoption does not work out

# Shape our path too

- A helping hand instead of a firm voice
- Cultural change
  - Service not citation
  - There is more to life than food, water and shelter
    - We can help people enrich their animal's lives
    - Get creative with solutions
      - Build enclosures
      - Provide low cost/free grooming



# Shape our path too

- Seek commonalities
  - Helps understand where others are coming from
- Be mindful of our language
- Listen more than we speak
- Shift our perspective
- Allow yourself to be vulnerable
  - We have all done things...





## Change is possible

“Policy can be changed if you get the right people in place who have the right amount of courage and determination. I believe that change is possible. You have to believe change is possible in order to bring it about.”

- Ibram X. Kendi

# Questions?



[clkarsten@ucdavis.edu](mailto:clkarsten@ucdavis.edu)