



Town Lake Animal Center
1156 West Cesar Chavez Street
Austin, TX 78703
August 10 & 11, 2010

ASPCA AUSTIN PARTNERSHIP OVERVIEW

The ASPCA visits shelter facilities as a part of the ASPCA Partnership. The ASPCA Partnership is designed as a mutually agreed upon, ongoing relationship with programs and organizations within a community that facilitates development of a strategic, scientific and sustainable plan for the community - with a goal of saving more lives *and* doing no harm. By providing various tools, including this assessment, we aim to set the stage for the Town Lake Animal Center (TLAC) to become more efficient and proficient at saving lives.

The opportunity for four shelter medicine veterinarians to perform a two day on-site visit with TLAC has provided the ASPCA with insight into the daily operations of the facility and a holistic view of shelter programs. Thank you for allowing us to visit and for doing so with energy, enthusiasm, and a commitment to learning together about how more lives may be saved in Austin.



Austin was selected as the first ASPCA Partnership community in 2007. TLAC is one of four participating partners in Austin and the first to receive an assessment. TLAC cared for approximately 20,000 dogs and cats in 2009 in a facility that was built approximately fifty years ago. In order to provide the most effective recommendations, this report is based on data provided to the team beforehand from the shelter and evaluations and observations at the time of our visit. Although a new facility is planned for TLAC, the recommendations here are intended for the present situation. Care has been taken to prioritize recommendations that are believed to be practical, timely, and that will continue this agency's forward progress. Resources that support the following recommendations will be available to the shelter as a part of the partnership.

SANITATION

	Prioritized Recommendations:	Anticipated Actions and Results:
1.	Update sanitation protocols.	<ul style="list-style-type: none"> • Written sanitation Standard Operating Procedures (SOPs) specific to each area (including animal control vans) will be developed, and kept posted in each area. Staff training will be provided and guidelines for enforcement developed. This will help staff remain aware of protocols and consistent in performing their duties. • Degreaser will be used in all kennels on a weekly basis. This will help remove oils and build-up of organic material from kennel surfaces, allowing improved efficacy of day to day sanitation. • A detergent will be used prior to disinfection. In this facility, where surfaces are rough, cracked, and in poor condition, this is an important step to mechanically remove disease agents, feces, dirt and debris from the environment. Many disinfectants are unable to fully reach efficacy when surfaces are not cleaned prior to application. • In addition to spot cleaning, cat cages will be thoroughly cleaned and disinfected regularly and whenever cage is empty and before a new occupant enters. This is a critical part of reducing infectious disease transmission. • If staff must clean more than one population/area, cleaning will occur in order of youngest and healthiest to least healthy. <ul style="list-style-type: none"> ○ Healthy Kittens > Healthy Vaccinated Cats > Unvaccinated Cats > Sick Cats and Kittens ○ Healthy Pups > Healthy Vaccinated Dogs > Unvaccinated Dogs > Sick Dogs and Pups • The outdoor exercise areas will be included in a regular schedule for cleaning, recognizing that these areas can never be properly disinfected. • Routine sanitation will focus on reducing fomite transmission as well as removing pathogens from the environment. Cat feral dens and transport carriers, toys, food and water bowls, changing gloves etc. will be included in sanitation protocols. This will help reduce infectious disease transmission. • Areas that are difficult to clean or easily overlooked (e.g. tops of cages, drains, food storage bins etc.) will be deep cleaned on a

		regular basis.
2.	Ensure that proper equipment and materials are available and in working order.	<ul style="list-style-type: none"> Sufficient supplies (e.g. hoses, scrub-brushes, paper towels) in good working order will be available. Supplies will be designated and restricted for use in specific areas. This will improve efficiency and reduce fomite transmission.
3.	Ensure appropriate choice and use of disinfectant relative to shelter health concerns.	<ul style="list-style-type: none"> Disinfectants will be selected based upon their efficacy against common pathogens encountered, characteristics of the surfaces requiring sanitation, compliance for appropriate use, and safety issues. Appropriate choice and use of disinfectants is key to minimizing disease transmission. The manufacturer's directions for dilution and application will be followed, including specifications for surface contact times. When pathogens that are environmentally persistent such as parvo viruses, ringworm or calicivirus are suspected or confirmed, disinfectants with proven efficacy will be used to disinfect the area, the cage and its contents after proper mechanical cleaning has occurred. This will help to reduce environmental contamination and risk to other animals.
4.	Increase staffing and use of unpaid staff (volunteers/service workers) to clean facility and provide care of animals.	<ul style="list-style-type: none"> Based on the National Animal Control Association formula (see Appendix I), staffing deficiencies will be addressed to provide the basic minimum of 15 minutes care/animal/day. This will provide basic animal care – feeding and sanitation. Additional staff will be necessary for the performance of additional duties. In order to maintain a humane standard of care for animals in the shelter, staffing will be based on projected daily population numbers.

ANIMAL HEALTH AND WELLNESS

	Prioritized Recommendations:	Anticipated Actions and Results:
1.	Medical rounds will occur daily.	<ul style="list-style-type: none"> A veterinarian will walk through the shelter each morning and observe every animal. By designating a key individual to evaluate animals on a regular basis, this will help to consistently and promptly identify animals in need of care.
2.	Develop, promote, and demonstrate best practices for animal health and welfare at	<ul style="list-style-type: none"> Creating written protocols for everyday practices will allow evolution of a shelter Standard Operating Procedure Manual and support training and consistency in everyday practices.

	TLAC.	<ul style="list-style-type: none"> • Protocols developed by the shelter veterinarian will be put in practice. Oversight of duties will be provided by management and the shelter veterinarian. • The shelter management will review necessary animal health care duties and staffing levels to determine whether change is needed. • Expanding the foster program training and oversight will provide improved management of animals not directly housed at the shelter. • The veterinary staff will be included in logistical planning for the new building to facilitate a smooth transition with a functional shelter team. • Creating a series of agreed upon guidelines for minimum health and welfare of animals in the shelter will help guide animal care and disposition decisions.
3.	Ensure that a functional system for prompt recognition and response to health problems exists.	<ul style="list-style-type: none"> • Staff will understand what constitutes a medical problem and be empowered to obtain care for the animals. Having a system in place that works efficiently will allow animals to receive care promptly.
4.	Separate animals who are most vulnerable to infectious diseases from those most likely to infect.	<ul style="list-style-type: none"> • Unrelated litters of puppies will not be combined. Similarly, unrelated litters of kittens will not be combined. The infectious disease risk of combining single puppies or kittens will be weighed against the benefits of socialization. • Puppies and kittens (<5 months) and nursing mothers with their litters will be separated from adult animals in all areas and staff will handle and clean healthy puppies and kittens before other areas. This will help to minimize the at-risk pediatric animals' exposure to infectious disease in the shelter. • Animals too young to be made available for adoption will ideally not remain in the shelter and will be placed in an appropriate foster situation as soon as possible. • Any animals that cannot be vaccinated will be clearly identified and housed apart from the healthy, vaccinated population. • Animals with infectious disease (e.g. URI) will be housed separately from the general population. Infectious animals will be separated from animals with non-infectious medical problems (e.g. wounds, lameness, injury).

		<ul style="list-style-type: none"> ○ Infectious isolation areas will be low-traffic areas. ○ Procedures for staff entering isolation areas and providing husbandry to the animals will be written and posted. ○ Animals with zoonotic diseases (e.g. ringworm and sarcoptic mange) will be clearly identified as high-risk for transmission of infectious disease, and ideally housed in a separate area. ● Animals will not be housed in the euthanasia room. This room will be considered infectious because animals in poor health are often being euthanized. Animals will also not view euthanasia.
5.	Develop criteria and process for disposition decisions.	<ul style="list-style-type: none"> ● The key members of the decision making team for animal dispositions will be defined. This will guide and support staff. <ul style="list-style-type: none"> ○ The shelter veterinarian will be empowered to make health care decisions including euthanasia for humane reasons. ○ A team process will determine dispositions. ● A defined process will ensure prompt decision-making. ● Reasons for euthanasia as an appropriate outcome at TLAC will be better defined. This will: <ul style="list-style-type: none"> ○ Guide and support staff making euthanasia decisions. ○ Ensure that animals' medical and psychological suffering due to inability to make decisions will be alleviated. ○ Ensure that dangerous animals will not be placed into the community. ○ Ensure that animals with medical issues beyond the means of the community to treat in a timely and appropriate manner will not suffer.
6.	Establish easily followed written feeding protocols.	<ul style="list-style-type: none"> ● An easy to follow written feeding guide will be created based on species, age, weight, body condition score, health status and type of housing situation. This will help guide staff in day-day provision of adequate nutrition. ● The shelter veterinarian will oversee development of the feeding guide. ● Clear instructions for staff will ensure that group housed cats have adequate access to their food. This will help avoid stress

		related feeding issues.
7.	Establish and communicate animal capacity limits for all areas of the facility	<ul style="list-style-type: none"> • SOPs for areas designed as group housing must be developed that outline how animals are grouped, the maximum number of animals per room, along with size, sex, age, behavior and health restrictions. • SOPs for housing animals within primary enclosures (cages/kennels) will also be developed that outline how animals are housed, the maximum number of animals per enclosure, along with size, sex, age, behavior and health restrictions. For example, two adult cats will not be co-housed in a space that is appropriate for only one. This will ensure animals' health and welfare. • It is recommended that the agency use an "all in—all out" approach to the cat habitat areas to ensure disease is contained and the habitat is entirely emptied and disinfected between groups. Additional health screening for ringworm on every cat (blacklight) prior to group housing is suggested. • Ideally, cage size will allow each animal separation between resting and excrement areas and space to attain normal body postures.
8.	Optimize intake protocols and practices.	<ul style="list-style-type: none"> • Written protocols will be developed, incorporated in training, and practices will comply with protocols. • Shelter health care will start with a documented basic physical exam on entry. Intake staff and officers will receive training to be proficient at performing and recording a physical exam on each animal. Sufficient staff time will be allocated for intake processing. Staffing will be based on projected animal intake numbers and the amount of time needed to complete intake procedures. This will help facilitate early recognition of health conditions, segregation of animals appropriately due to health condition and age, and allow initiation of good data collection and management. • Animals will be clearly identified with a neck band or other visible form of identification. • Scales will be located in the intake area and animal weights will be recorded on intake. • The intake area, a central point that all animals pass through

		<p>before entering the shelter population, will be maintained in a sanitary condition to minimize risk for infectious disease transmission. It will be cleaned and disinfected on a daily basis or more often if infectious disease risk is high. Disinfectant will be used regularly on surfaces and whenever another animal is to be examined. Holding kennels will be thoroughly cleaned and disinfected before new animals are placed in the kennel.</p> <ul style="list-style-type: none"> • An efficient process that limits stress and improves care for animals on entry will be prioritized. • Cats and dogs will be separated during intake processing to minimize stress.
9.	Further develop written veterinary guided protocols for the management and treatment of common shelter infectious diseases.	<ul style="list-style-type: none"> • Written protocols will be created for common infectious diseases that outline identification, diagnosis, prognosis, treatment protocols and timelines, where animals are housed/husbandry needs and what constitutes recovery and failure to recover. This will define how TLAC manages disease and allow staff to initiate treatment for common problems under guidelines provided by the shelter veterinarian. • Policies will clearly indicate how decisions for treatment vs. euthanasia will be made, thus allowing shelter practices to follow policy. • In-house treatment will be provided when adequate resources to support care and treatment are available and when prognosis for recovery or management is good. • When changes are noted in severity of disease, prevalence or response to a therapy that previously was effective, shelter prevention and treatment protocols will be reviewed. Additional steps, such as diagnostic testing, will be taken to resolve the problem. <ul style="list-style-type: none"> ○ For example, environmental culturing of the areas housing animals with ringworm would be appropriate. • Clear signs that indicate which animals have infectious disease or are under veterinary care will be posted.
10.	Create and implement a daily written enrichment protocol.	<ul style="list-style-type: none"> • An enriched environment that has minimal noise and includes exercise areas, toys, opportunities to chew and scratch, beds or comfortable, dry resting places will be provided. • Contact with compatible animals and humans will also be

		<p>provided to attempt to provide socialization, minimize stress, alleviate boredom and decrease the onset of stress-related illness and/or psychological deterioration.</p> <ul style="list-style-type: none"> Cats, dogs and rabbits are social animals and engaging in enrichment is critical to their well-being. Animals engaging in play or quiet activities and with bedding and toys in their living space will help adopters envision a particular animal in their home.
<p>11.</p>	<p>The shelter facilities will be reviewed with housing animals for health as a priority.</p>	<ul style="list-style-type: none"> When there are more animals with clinical signs of illness than can be housed in isolation, disposition decisions will be made. These decisions will be based on clear guidelines for treatment that describe selection for treatment for specific diseases, diagnosis, medical care, and what constitutes recovery vs. failure to recover. The cubbies in cat intake will be replaced with cages that can be effectively cleaned and disinfected and provide a safe and clean environment for animals being held. Areas of unsealed or cracked cement will be repaired and sealed to facilitate sanitation and limit environmental disease transmission. Guidelines for health status and age of animals that are allowed in outdoor exercise areas will be developed. This will help prevent disease transmission in areas that can never be fully sanitized.

ANIMAL FLOW

	<p>Prioritized Recommendations:</p>	<p>Anticipated Actions and Results:</p>
<p>1.</p>	<p>Develop a team process for decision making when there are no kennels available.</p>	<ul style="list-style-type: none"> A designated team will gather information, provide input and make disposition decisions when animal housing space is needed. This results in a process for making adequate space available with careful consideration for each animal.
<p>2.</p>	<p>Limit delays in moving animals from intake to outcome.</p>	<ul style="list-style-type: none"> Owner surrendered animals will move from intake to outcome without a holding period. Animals who are relinquished for euthanasia will be examined and a humane outcome determination will be made promptly. This will alleviate potential suffering and maximize use of animal housing space.

		<ul style="list-style-type: none"> • Animals will be processed promptly on intake and moved promptly to an appropriate housing area rather than waiting in intake areas. • Screening examinations/tests before surgery, adoption, foster and transfer will be completed without delay. • Cage cards will readily provide more accessible information about the animal's status (e.g. availability, health status, special concerns). • Data entry will improve so that information about each animal is current and easily accessed. • Transfer, foster and partner agencies will be strongly encouraged to adhere to realistic and mutually agreed upon timelines for pickup of animals. • These actions should result in animals moving more quickly through the shelter system and ultimately provide ability to save more lives.
3.	Optimize spay/neuter process	<ul style="list-style-type: none"> • Shelter management will evaluate the surgery scheduling, recovery holding space and other factors to ensure adequate capacity (either within the shelter or at outside clinics) for spay/neuter to meet the demand. This will prevent unnecessary delays in live release.
4.	Ensure clear cage card and directional signage.	<ul style="list-style-type: none"> • Space in the shelter will be clearly defined to guide the public to appropriate areas within the shelter. Signage will be posted to direct people to areas TLAC would like them to have free access to. • Staff will clearly understand where animals are to be placed (e.g. infectious animals in isolation, court holds in quarantine, healthy dogs/cats in healthy hold waiting to be moved to adoption, etc). This will help maintain best practices for animal segregation.
5.	Designate areas in close proximity to adoptions to be used as "pre-adopt," areas.	<ul style="list-style-type: none"> • Animals who are soon to be available for adoption will be clearly identified and placed near the adoption area to help guide adopters. This will help guide adopters to available animals more readily.
6.	Maintain the in-house population within a defined capacity,	<ul style="list-style-type: none"> • A determination will be made of the maximum number of animals per housing unit and total animals in-house that will be permitted at any given time period based on the ability to provide adequate

	continually evaluating and striving for decreased average length of stay concurrent with an increased live release rate.	<p>care. Setting these guidelines will ensure that the shelter is not extending beyond its ability to adequately provide care for its animals.</p> <ul style="list-style-type: none"> Defining maximum capacity for a shelter is a critical part of maintaining standards of care and good preventative health practices and may allow more rapid movement of animals through the system and into adoption.
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STAFF AND TRAINING AND SUPERVISION

	Prioritized Recommendations:	Anticipated Actions and Results:
1.	Develop and regularly update formal staff training program.	<ul style="list-style-type: none"> Staff training will be provided based on a written policy manual that is kept current. Before staff are given responsibility or allowed to work they will have demonstrated proficiency in their assignments. When a change in procedure is made, it will be communicated to all staff and the operations manual will be updated promptly to reflect the change. This will help ensure consistent and appropriate performance of job duties and that appropriate care of the animals is provided. Infectious disease and zoonosis training will be provided to all staff, including volunteers. This will help all staff understand and implement practices that help ensure the health and well-being of staff and animals. Scheduling regular meetings, trainings and provision of continuing education will allow staff better understanding and performance of day to day work.
2.	Provide training on basic animal behavior, safe animal handling and pain and aggression recognition.	<ul style="list-style-type: none"> Staff will be able to recognize basic body language in dogs and cats and identify pain and handle animals safely and humanely. Behavioral concerns and animals that pose a danger will be recognized.
3.	Allocate time for supervisors to oversee daily operations.	<ul style="list-style-type: none"> Supervisors will be present in the shelter during daily activities. This will ensure that staff are observed performing daily tasks and promote accountability.
4.	Staffing levels should meet the needs of the number of animals requiring daily care.	<ul style="list-style-type: none"> A proactive plan will be developed to ensure that significantly more animal care staff will be available to meet the basic needs of the animal population. This will allow the shelter to meet NACA/HSUS recommendations for basic animal care of 9 minutes cleaning time and 6 minutes feeding time per animal.

		<ul style="list-style-type: none"> Additional staff time will be available to ensure that kennels vacated throughout the day are promptly sanitized in order to accommodate a newly admitted animal.
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COMMUNITY SUPPORT

	Prioritized Recommendations:	Anticipated Actions and Results:
1.	Collaborate with transfer partners to develop a selection process that highlights animals with best opportunity for success that cannot be provided at TLAC.	<ul style="list-style-type: none"> A protocol that includes criteria for selection and realistic deadlines for transfer will minimize delays in animal pick up, minimize suffering and decrease the length of stay of animals.
2.	Expand foster care program.	<ul style="list-style-type: none"> Additional foster caregivers will be identified and trained. This will expand the lifesaving capacity of the program.
3.	Develop a broader volunteer base.	<ul style="list-style-type: none"> Additional volunteer opportunities will be developed and advertised that utilize a wide range of talents and skills. This will benefit the shelter and animals. Oversight of various volunteer programs will be assigned. This will ensure appropriate supervision and team coordination.

SUMMARY

There is tremendous work being done on behalf of animals and the community by Town Lake Animal Center and the energy and enthusiasm is palpable. Thank you for welcoming our visit. Many of the recommendations that have been made in this report require rethinking, repositioning and reprioritizing staff and resources. This report is provided in the format of the Kellogg logic model, which identifies desired outcomes and provides suggested action steps to take to meet that outcome. It does not provide step by step recommendations to achieve the desired outcomes, nor does this report contain all the concerns noted during the 2 day visit. This format is designed to stimulate logical thinking and allow the organization to try various strategies to meet the desired outcome. This report serves to identify and highlight some of the immediate concerns identified by the assessment team that may hinder TLAC's ability to maximize its efforts to increase its live outcomes and provide the very best humane care possible within its resources. The ASPCA will be available to support the work that is required for putting these recommendations into place. We appreciate the opportunity to learn with you through this process and look forward to meeting again soon to prioritize an action plan following this assessment.

Respectfully submitted,

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Appendix I

National Animal Control Association

Formula for Determining Kennel Staffing Needs

$\frac{\text{Human Population}}{\text{(Human Population)}}$	Multiplied by 7% =	$\frac{\text{Incoming Animal Population Per Year}}{\text{(Incoming Animal Population Per Year)}}$
$\frac{\text{Incoming Animals Per Year}}{\text{(Incoming Animals Per Year)}}$	Divided by 365 (days per year)	$\frac{\text{Incoming Animals Per Day}}{\text{(Incoming Animals Per Day)}}$
$\frac{\text{Incoming Animals Per Day}}{\text{(Incoming Animals Per Day)}}$	Times Four* Day Holding Period =	$\frac{\text{Animals in Shelter Per Day}}{\text{(Animals in Shelter Per Day)}}$
$\frac{\text{Animals in Shelter Per Day}}{\text{(Animals in Shelter Per Day)}}$	Times fifteen minutes** per animal =	$\frac{\text{Number of Minutes Needed}}{\text{(Number of Minutes Needed)}}$
$\frac{\text{Minutes Needed}}{\text{(Minutes Needed)}}$	Divided by 60 (minutes) =	$\frac{\text{Number of Hours Needed}}{\text{(Number of Hours Needed)}}$
$\frac{\text{Number of Hours Needed}}{\text{(Number of Hours Needed)}}$	Divided by 3*** (hours for cleaning/feeding) =	$\frac{\text{Staff Needed Per Day}}{\text{(Staff Needed Per Day)}}$

* The HSUS is using the average holding period of four days as a basis for this study. Some animals may be held for a much shorter period; however, many animals may be held for a period exceeding the four day requirement.

** This formula is based on a per-animal time of nine minutes for cleaning and six minutes for feeding.

*** These three hours are solely for the performance of these two tasks, but allowing for further time in the day to perform routine maintenance tasks such as laundry, dishes, lost and found checks, etc.

Note: One way for TLAC to use this information would be to assume the shelter is at capacity (calculate the number of housing units available and their maximum capacity). This would provide maximum animals in shelter per day and required staff to care for a full shelter.