



REPORT TO THE MULTNOMAH COUNTY CHAIR PEDERSON: PHASE 1A - REVIEW AND STATUS OF MCAS RECOMMENDATIONS FROM 2016 TO PRESENT

INTRODUCTION

On January 11, 2023, Chair Vega Pederson announced she would direct her office to lead a review of MCAS practices. This report addresses the first of her directives. It provides a review of previous audits, reports, and recommendations regarding MCAS policies and operations conducted between 2016 - 2022. It includes an accounting of the recommendations made, an update on the implementation status of each of the recommendations, and reasoning for delays in implementation.

Ron Sarazin, consultant, was engaged to prepare this report. He developed the format, gathered MCAS recommendations from 2016 to present, and facilitated collection and editing of status information, primarily gathered from historical documents, interviews with MCAS Director Erin Grahek and Shelter Operations Manager Marian Cannell, and onsite observation.

This report is presented in four parts, 1) 2016 audit and 2018 audit follow-up, 2) 2018 Dogs Playing for Life recommendations, 3) 2020 MCAS Transformative Journey Project recommendations, and 4) 2020 - 2023 University of Wisconsin School of Veterinary Medicine Shelter Medicine recommendations.

1) 2016 AUDIT FINDINGS, RECOMMENDATIONS AND 2018 AUDIT FOLLOW-UP

Background. In 2016, the Multnomah County Auditor completed an audit¹ of MCAS operations. In 2018, the Auditor published an audit follow-up.² In the tables below, the 2016 audit findings, the 2018 audit follow-up, and 2023 status are listed.

¹ [Animal Services Audit Recommendations, Scope, and Methodology | Multnomah County \(multco.us\)](https://www.multco.us/animal-services-audit-recommendations-scope-and-methodology)

² [AnimalServicesFollowUpAuditReport.pdf \(multco-web7-psh-files-usw2.s3-us-west-2.amazonaws.com\)](https://www.multco-web7-psh-files-usw2.s3-us-west-2.amazonaws.com/AnimalServicesFollowUpAuditReport.pdf)

The audit recommendations were provided in five categories, 1) Recommendations to the Board of County Commissioners, 2) to improve record keeping and data quality, 3) to better protect the health and safety of people, 4) to better protect the health and safety of animals in the shelter, and 5) to improve planning and measurement.

Restrictors of Progress. It appears no one was assigned specific responsibility for implementing the audit findings. This could in part be due to changes in the MCAS Director position and the lack of a Shelter Operations Supervisor for the majority of the time after the audit follow-up.

Below are the 2016 audit findings, the 2018 audit follow-up, and current status.

| 1) RECOMMENDATIONS TO THE BOARD OF COUNTY COMMISSIONERS | | |
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| 1) Recommendations to the Board of County Commissioners | | |
| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Support Animal Services in getting access to criminal background information. | Completed | Access to criminal background information was provided at one point, but was inappropriately used and was revoked. MCAS management will evaluate if there is benefit to requesting reinstatement. |
| Provide Animal Services with the funding to increase staffing as needed to meet minimal national standards for providing care to shelter animals. | Completed. Auditor's note: Animal Services requested funding for two additional Animal Care Techs in its FY2017 budget, and the Board approved this request. | The MCAS Director worked with the University of Wisconsin School of Veterinary Medicine Shelter and the Oregon Humane Society to complete a staffing analysis based on national standards and best practices. Staffing elements have been addressed in DCS/MCAS submittal for the FY 24 budget. |

| 1) Recommendations to the Board of County Commissioners | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Establish a policy that provides parameters for when it is safe to re-home animals. | Partially completed. Auditor's note: Instead of the Board, Animal Services appeared to take some action on this. | The shelter has drafted a policy called "Policy for Placement Eligibility and Pathway" to establish uniformity for the placement of pets through MCAS, replacing a previous policy that was less specific. The new policy is currently being reviewed by the MCAS Director. |

2) TO IMPROVE RECORD KEEPING AND DATA QUALITY

| 2) Improve record keeping and data quality | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Conduct manual checks to ensure that there is not conflicting information in the animal records. | Some manual checks are being conducted. This is partially completed. | As reported in 2018, manual checks are completed, but there is no consistent process for who checks, when the checks should be made, and what errors should be looked for. |
| The new animal database should include mandatory fields that must be completed for every animal. | The new animal database (Shelter Buddy) has been implemented. It <i>does not include</i> mandatory fields that must be completed for every animal. This is partially completed. | There are mandatory fields that must be entered in Shelter Buddy for every animal, but they could be better utilized through development of a policy, which is in development, and future training. |

| 2) Improve record keeping and data quality | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Ensure that all euthanized animals are recorded in both the drug logs and the animal records database. | Errors were found when comparing euthanized animal records in the drug logs and the animal records database. This is not completed. | No process is in place to ensure records of euthanized animals in the drug logs match the animal records database. A review of the medical documentation errors, frequency, and nature is planned. |
| The new animal database should produce reports that are accessible online by the public. | Shelter Buddy <i>does not include</i> functionality for providing online access to the public. Important information posted (e.g., photo, location the animal was found) was often missing. Further, not all animals were held for the required 72 hours hold time, making it difficult for the owner to find their pet. This is not completed. | As reported in 2018, Shelter Buddy does not include functionality for providing reports accessible online by the public, but it does post strays and animals available for adoption to the website. There have been no errors regarding hold times observed since November 2022 (and possibly before, but not evaluated). The Shelter Operations Manager and MCAS Director are investigating the feasibility of open data portal functionality provided through ShelterBuddy APIs or Power BI reporting online information about animals in the shelter, including current status and outcomes. Developing this functionality would require IT support. |

3) To BETTER PROTECT THE HEALTH AND SAFETY OF PEOPLE

| 3) Health and Safety of People | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Clearly document what information is disclosed about an animal at the animal's adoption or transfer. | Completed. | All notes in the file are read at the time of adoption, but how it is discussed could be more uniformly completed. More consistent storage of information could aid adoption counseling. Additionally, Counselors sometimes struggle to understand the way medical notes are written, which can lead to misinformation being provided. |
| Document all behavioral concerns and discuss them with potential owners before adoption. Animal Services needs to clarify how it decides an animal is safe. We saw detailed medical histories that provided reasoning for why an animal was euthanized or not. But for animals with behavioral issues, we saw a lack of detailed notes. The reasons for decisions were not easy to determine. Daily behavioral notes for animals and documenting the reasons for decisions would support transparency and consistency. | Behavioral notes are limited, but Animal Services' employees were seen to discuss concerns they knew about with potential owners. This is partially completed. | Behavioral notes are often missing and when provided, are limited in scope. Behavioral concerns are discussed with potential owners before adoption, but frequently based on word of mouth. Medical notes are consistently provided but could require a medical background to understand. |

3) Health and Safety of People

| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
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| <p>Provide ongoing training to employees and volunteers on workplace safety issues, ranging from managing difficult conversations to workplace violence scenarios.</p> | <p>The majority of Animal Services employees took an active shooter training, as well as training in first aid and disaster preparedness. These kinds of trainings need to be provided on a regular, ongoing basis. A schedule could be documented in a staff training plan, which Animal Services needs to develop. This is partially completed.</p> | <p>There is no record of regular, ongoing workplace safety issues training.</p> |
| <p>Provide shelter employees, particularly management employees, with training on County personnel rules, which require that the workplace be respectful, professional, safe, accepting of cultural differences, and free from inappropriate or abusive workplace behavior.</p> | <p>The Animal Services director provided a training to employees on professional workplace behaviors. But Animal Services' management employees need training on personnel rules. For example, from FY2016 through the first half of FY2018, few MCAS managers took training that supports compliance with County policies for harassment and discrimination-free workplaces, per SAP data. Animal Services still needs to develop a staff training plan. This is partially completed.</p> | <p>Little change has been made since the 2018 review. A policy review is conducted annually and when situationally needed. Management staff are provided with training and support regarding staff accountability for adhering to personnel rules. The Shelter Operations Manager is developing a training plan that will include ensuring training on County personnel rules as well changes to Shelter policies and practices. All training will be tracked in Workday and reviewed by the Operations Supervisor at minimum annually.</p> |

4) To BETTER PROTECT THE HEALTH AND SAFETY OF ANIMALS IN THE SHELTER

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Evaluate existing operating procedures and ensure that employees know how to access and use them. | Animals Services seems to have ensured employees know how to access procedures and use them. In that sense, the recommendation has been completed. But, Animal Services needs to ensure policies and procedures are practiced consistently. There was at least one instance in which an employee did not follow the employee/volunteer adoption policy. Completed. | This is back to the 2016 audit stage. 2018 progress has been lost due to staff turnover and staff shortages. However, the Shelter Operations Manager is conducting a comprehensive review of operating procedures. |
| Develop and implement standard operating procedures for areas that lack them. | Completed. | This has aged since 2018. A comprehensive review of operating procedures is underway. |
| Maintain documentation of all training. | Completed. | Documentation for training is inconsistent due to lack of management attention. |
| Remediate the cooling issues in all dog kennels as soon as possible. | Animal Services added swamp coolers in the dog areas, helping to address high temperatures in the summer. Completed. | Air conditioner units have been repaired and are operational. |
| Provide for separation of animal species throughout each animal's shelter stay. | New separate entrances may help alleviate some interactions between different species. Further, there is now a | Current status is as stated in the 2018 audit follow-up. |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| | separate room for small pets. Completed. | |
| Continue to improve housing for individual cats by compartmentalizing housing and increasing each housing unit's space. | Cats in the Cattery and in the Feral room were in housing that met our recommendation, as were many cats in the Intake areas and in Isolation, a room for cats under medical care. While the shelter still uses some single kennels that do not meet our recommendation in its Intake and Isolation areas, we recognize that space constraints likely make it impossible for Animal Services to meet this recommendation at the current shelter facility. Completed. | Current status is as stated in the 2018 audit follow-up. |
| Establish contingency housing to ensure that the shelter can accept all animals brought to it by County residents and Field Services' Animal Control Officers. | Partially completed. | All animals brought to the shelter can be accepted, but due to lack of physical space, there is a lack of species-specific overflow housing other than for dogs and cats, and restricted ability to relocate animals once housed. In addition, the housing for small pets could be improved. |
| Remediate the health and safety issues that Risk Management identified in its Safety Site Visit report as soon as possible. | Animal Services needs to correct remaining issues from the Safety Site Visit | 10 items have been identified as complete out of 78 identified. The last item resolved is |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| | report. Partially completed. | dated 6/14/2020. This effort was interrupted by the pandemic. Nearly half (46%) of the issues listed will require support from facilities for resolution. |
| Implement a formal training program for new staff as well as ongoing training. | Since our initial audit, it appeared that a greater number of staff were receiving training. For example, in 2016 many employees received training on animal handling. But new staff have not received this training. One reason appears to be that management still needs a formal training program for new staff, as well as ongoing training for all paid staff and volunteers. A schedule could be documented in a staff training plan, which Animal Services needs to develop. Regular training on animal handling and behavior helps keep people and animals safe, and could have helped prevent about 30% of recent reported injuries, according to incident report forms. Partially completed. | No formal training program has been implemented due to lack of management and staff time. The employee onboarding process is inconsistent. Managers spend time orienting staff and some training is provided, but this varies across the shelter. Most staff are taught by shadowing someone with no set expectations for what needs to be taught nor evaluation of what the learner has retained. The Shelter Operations Manager is developing a training plan consistent with a review of all policies. |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Maintain documentation of all enrichment provided, and track this information to ensure all animals receive enrichment consistently | The system to document and track enrichment can be simple, such as the kennel-side white boards Cattery volunteers used. But volunteers need to consistently document providing enrichment, so that it is easy to know which animals have received enrichment that day and which have not. Partially completed. | <p>Whiteboard documentation is consistently used in the adoption area. A whiteboard is also available in the intake area, but it is not consistently used. The whiteboards are only used for documenting walks, so other forms of enrichment are not being recorded. No ongoing record is being maintained (i.e., the whiteboards are periodically erased without recording elsewhere).</p> <p>Effort is underway to establish baseline expectations for daily enrichment, including what activities qualify as enrichment, develop a policy, and then train all staff to this expectation.</p> <p>Enrichment recording will be set up for the exception, not the rule. The expectation will be that all animals receive enrichment every day. Management will conduct periodic random checks for accountability and supervisors will be</p> |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| | | directed to provide ongoing audits to ensure the policy is applied. |
| Provide a comprehensive enrichment program to all cats and dogs in every section of the shelter to ensure each animal receives daily social contact, mental stimulation, and physical activity. | Not completed. | As stated in the 2018 audit follow-up, but implementation effort is underway (see status directly above). Additionally, the feline specialist position is being repurposed to focus on pathway planning and enrichment for all species in care. |
| Comprehensively study total staffing needs, and advocate to the Board of County Commissioners for increased staffing as necessary to help protect the health of the animals in shelter care, including: 1) increasing staffing for cleaning and feeding to meet National Animal Care & Control Association guidelines, 2) ensuring adequate staffing to provide the shelter's animals with daily enrichment and consistently prompt behavioral health care. | Animal Services was understaffed for cleaning and feeding animals 66% of the time in FY2017, when compared to the national standard. As a result, they have not provided daily enrichment to all shelter animals. Further, Animal Services continues to rely on volunteers to provide enrichment, but volunteers were not allowed to work with all animals, such as in the adoption areas and the shelter's intake areas, where animals initially stay at the shelter. Volunteers were in the adoption areas but did not consistently track which animals they interacted with, possibly | Status has not changed since the 2018 audit follow-up. The MCAS Director worked with the University of Wisconsin School of Veterinary Medicine Shelter and the Oregon Humane Society to complete a staffing analysis based on national standards and best practices. Staffing elements have been addressed in DCS/MCAS submittal for the FY 24 budget. The animal enrichment program under review, including development of a policy based on best practices supported with training and |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| | leading to inconsistent enrichment for animals. Not completed. | <p>documentation plans. Results will be enhanced from increased staffing and volunteer levels, coupled with changes to their responsibilities and consistent training.</p> <p>For instance, the shelter has the least amount of information about the dogs in intake, so they have to be very cautious for the safety of volunteers. The Shelter Operations Manager is developing a new training program for the most skilled dog volunteers so they can walk and provide enrichment for pets in this area.</p> <p>Volunteers are already cleaning and providing enrichment in the cat intake area and the cattery.</p> |
| Institute a daily rounds program that includes, at minimum, 1) a rounds team involving people from different shelter units, 2) daily decision-making that is clear and specific, and 3) documentation of rounds' observations, decisions, and actions. | Not completed. | <p>Daily rounds are now standard, including people from all shelter units.</p> <p>As of the week of March 27, 2023, rounds have one supervisor or manager leader and a designated note taker.</p> |

| 4) Health and Safety of Animals in the Shelter | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| | | Agendas for rounds are developed by pulling from the shelter database task list information identifying pets in need of discussion. |

4) TO IMPROVE PLANNING AND MEASUREMENT

| 4) Improve Planning and Measurement | | |
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| 2016 Audit Finding | 2018 Audit Follow-up | 2023 Status |
| Planning documents should include, clear and specific project mission that fits into the larger strategic goals, sufficient and appropriate staffing, staff training, realistic and measurable goals, and cost/benefit analysis. | Not assessed | Planning documents are aged and a strategic plan including realistic and measurable goals, supported by appropriate staffing and staff training, needs to be developed. A staffing needs assessment has been completed and a request for funding issued. |

2) 2018 DOGS PLAYING FOR LIFE RECOMMENDATIONS

Background. In 2017, MCAS applied for a Lazin Alive Grant,

“Our existing animal-care staff are maxed-out with other important duties to clean kennels, assist with medical treatment, and serve members of the public. They are actively working with the dogs as they are able, and holding playgroups once a week, but not consistently due to scheduling and other required duties.

Finding effective ways to build up our enrichment and behavior program is our top priority. Our commitment to these dogs is earnest. Our strategy to provide daily enrichment for dogs with behavior issues in order to ready them for adoption is crucial in order to save their lives, maintain and preserve our sheltering capacity for other dogs, and reduce potentially detrimental lengths of stay for adoptable dogs.

Multnomah County Animal Services initially applied for a Lazin Alive Grant to fund a Canine Behavior Modification Tech position. However, ... we determined that prior to focusing on rehabilitating dogs with deteriorating behavior, more focus on providing daily enrichment is needed to prevent behavioral deterioration. A thorough review of our operations, staffing patterns, and practices is needed to make daily enrichment for all dogs a reality.”

MCAS was awarded the grant. The funds were used to underwrite consultation services from Dogs Playing for Life to observe operations and assess current practices for 1) enhancing daily enrichment activities for all dogs and 2) developing individualized behavior interventions for dogs with more challenging issues.

Dogs Playing for Life provided seven areas of recommendations, 1) cultural, 2) facilities, 3) operations, 4) canine enrichment, 5) safer shelter environments, 6) assess and then influence behavior, and 7) honor dogs as individuals.

Restrictors of Progress. Dogs Playing for Life was not contracted to implement their recommendations. Limited staff, changes to staffing organization, and changes in shelter leadership slowed implementation or altered how the recommendations have been or plan to be implemented.

Below are the Playing for Life recommendations provided August 29, 2018 and current status.

| 1) CULTURAL | |
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| 1) Cultural | |
| Recommendation | Status |
| Prioritize time for Animal Care Technicians (ACT) and Animal Care Aides (ACA) to participate in enrichment activities with the animals through schedule changes; Canine Care Specialist (CCS) mentor appropriate staff; management maintain staff focus. | In progress (alternative approach). The specific positions recommended do not exist in MCAS, but the intent will be carried out with the current and requested staffing. For instance, the feline specialist position is being repurposed to focus on pathway planning and enrichment for all species in care. |
| Reframe perspective to enforce that “Every Dog, Every Day!” is accomplishable and mandatory! | No progress. |

| 1) Cultural | |
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| Recommendation | Status |
| <p>Reallocate CCS job from 25% behavioral assessments, 25% enrichment activity, 25% supervising animal “flow’ through shelter, and 20% data entry and reporting to 80%-95% of their time ensuring enrichment for every dog in the facility, primarily by shifting those other responsibilities to the volunteer and / or admin. staff. Also utilize ACTs, ACAs, and volunteers for enrichment through shadowing with the CCS.</p> | <p>In progress (alternative approach). As stated above, the specific positions recommended do not exist in MCAS, but the intent will be carried out with the current and requested staffing. For instance, the feline specialist position is being repurposed to focus on pathway planning and enrichment for all species in care.</p> <p>MCAS is also reallocating ACT 2 positions from the front of the operation to the direct care of the animals, expanding day-to-day care capabilities, including playgroup types of activities.</p> |
| <p>Create a Canine enrichment coordinator position to work under the new CCS position to emotionally and behaviorally maintain daily playgroups and other out-of-kennel opportunities.</p> | <p>In progress. See status directly above.</p> |
| <p>Separate out larger dogs in statistical reporting to paint a clearer picture of where the shelter can focus their efforts to improve services as larger dogs are recognized as a comparative “population at risk” nationwide.</p> | <p>No progress.</p> |

2) FACILITY

| 2) Facility | |
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| Recommendation | Status |
| <p>Add substantial covering to all play yards</p> | <p>No progress. MCAS leadership in partnership with County facilities is engaged in prioritizing and planning shelter improvements, including evaluation of covering all play yards.</p> |

| 2) Facility | |
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| Recommendation | Status |
| Consider unlocking padlocks to backs (non-public facing side) of dog kennels and hallway exits when possible, to reduce “fumbling” with keys and locks with dogs in hand | Complete. No “fumbling” with keys and locks occurs. There are no padlocks on the non-public facing side of dog kennels. It is not clear what the referenced “hallway exits” are. Gates are only locked at the end of day when the shelter is closed. |
| Consider adding visual barriers to the backsides of the kennels | No progress. Kennels have visual barriers on the inside of the kennels but not on the outside. Dogs passing by can make visual contact with dogs inside the kennel. Barriers will be considered. |
| Add natural light source to security building for dogs confined in long term housing | No progress. The security building is inadequate. Adding natural light into the existing structure would be challenging. It likely would be less costly to explore a new structure. MCAS leadership in partnership with County facilities is engaged in prioritizing and planning shelter improvements, including the security building. |

3) OPERATIONS

| 3) Operations | |
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| Recommendation | Status |
| CCS conduct daily walk through to ensure every eligible dog that can be walked is (and assign this responsibility to another staff member when CCS is off) | In progress. Current training and staffing levels for staff and volunteers limit the ability to walk every eligible dog every day. MCAS is training staff and will eventually train volunteers to allow the establishment of a dog walking program, including ensuring every eligible dog that can be walked is. |
| Create a daily task list to ensure every dog has their needs met daily | In progress. The recent restructure of the Feline Care Specialist position to Pathway and |

| 3) Operations | |
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| Recommendation | Status |
| | Enrichment specialist will allow creation of a daily task list to ensure every animal has their needs met daily. |
| Identify and prioritize dogs that are struggling behaviorally for extra care and a shelter exit plan | Complete. The new rounds review model supports this plan. |
| Clean the outside, back side of the kennels first (avoid canines living in their elimination area); ensure waste is removed frequently throughout the day | Significant progress. The MCAS Director is exploring with Facilities installing exterior lighting to facilitate cleaning before sunlight. In the interim, MCAS is purchasing headlamps for staff to ensure frequent removal of waste throughout the day, including early morning. |
| Move from a standardized Behavioral Assessment to a “check point system” | Significant progress. Behavioral Assessment has been replaced with behavioral evaluations through observations. The “check point system” is not yet used, but the new Pathway and Enrichment specialist will focus on implementation. |
| Create a policy that prevents all handlers (staff and volunteers) from taking dogs out of the front of the kennels. | Significant progress. Current handler training and expectations are to remove pets from the non-public (outside portion) side of the kennels. The Shelter Operations Manager is working on a policy to support this approach. |
| Continue to develop a policy allowing mentor volunteer access to intake kennels to support the Every Dog, Every Day (EDED) model and promote community advocacy and enthusiasm | In progress. The shelter has the least amount of information about the dogs in intake, so they have to be very cautious for the safety of volunteers. The Shelter Operations Manager is developing a new training program for the most skilled dog volunteers so they can walk and provide enrichment for pets in this area. |

| 3) Operations | |
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| Recommendation | Status |
| | Volunteers are already cleaning and providing enrichment in the cat intake area and the cattery. |
| Require volunteers and staff to use designated walking/training equipment for each dog | In progress. Walking/training equipment has been purchased and the Shelter Operations Manager is currently re-establishing how and when to utilize the equipment and will write a policy to support. Staff and volunteers will be trained to the policy and the appropriate equipment will be designated for each dog. |
| Consider scheduling blocks during the day for dog handling and engagement to close all guillotines and provide in kennel enrichments, improve safety to handlers by allowing dogs to be handled in less stimulating kennels, reduce stress for dogs by separating from reactive dogs, and facilitating padlocks being off walkway gates at designated times | In progress (alternative approach). Through improvement of the enrichment program and application of a daily and consistent playgroup program, natural pockets of time will be created to provide pets significant reduction in stress. |
| Implement walk boards to track daily enrichment of all dogs, listing eligible dogs by location, recording every outing. | No progress (alternative approach planned). Rather than using walk boards to track daily enrichment, the expectation will be that all dogs receive enrichment every day. Walk boards will be utilized to track day to day outings and information that relates to those outings (training equipment, special diet, etc.). Exceptions to daily enrichment will be tracked using the shelter database. |
| Photograph the board daily and file electronically for future reference | No progress (alternative approach planned). Records of enrichment exceptions will be in the shelter database. |

4) CANINE ENRICHMENT

| 4) Canine Enrichment | |
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| Recommendation | Status |
| Give special emphasis for enrichment to dogs in the intake building, and all green and orange dogs who currently have no eligible volunteer to handle | No progress (alternative approach planned). Green and Orange refers to the levels of dog behavior in the shelter. This is a process that does not currently exist. Improvements to the enrichment program will improve the process of “emphasis” on dogs that need more than the baseline can provide. |
| Provide training to improve playgroups | In progress. Staff are currently receiving individual training to build confidence in dog to dog meets. Future training will be for managing playgroups and later for managing multiple dogs. |
| Create incentives for staff/volunteers to do daily sessions of “click for quiet” to teach and promote calm kennel behavior, reduce barrier reactivity to people, and create a positive association with strangers | No progress. Daily sessions of “click for quiet” will be considered in the future after more fundamental issues are addressed. |
| Implement “Give a Dog a Bone” program for dogs in security to provide enrichment without contact | No progress. Enrichment without contact alternatives, including music and toys, will be evaluated for dogs housed in the security area in the future. |
| Consider initiating a “reading to dogs” Program with children in the afternoon to help promote calm and quiet behavior in the fronts of the kennels while dogs are safely being taken out of the backs for walks and play time | No progress. The plan is to enhance the capabilities of the adult volunteer program prior to allowing underage volunteers. |

5) SAFER SHELTER ENVIRONMENTS

| 5) Safer Shelter Environments | |
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| Recommendation | Status |
| Create “hand off” protocol and signage for more challenging dogs (handler to handler) | No progress. |
| Create laminated alert/caution signs to be hung on kennels (front and back) with date of handling concern and initials of reports, with updates during the CCS daily walk through. Record details of the event in the current monitoring sheets. | In progress. Alert/caution signs exist, but the process for ensuring notes are entered onto the monitor sheets need to be improved. |
| Provide critical safety equipment for handling fractious dogs, such as Kevlar gloves and carabiner clips. | In progress. Kevlar gloves and carabiner clips are in MCAS inventory, but further equipment, such as bite sleeves, should be considered, ordered, and training on use completed and made a part of the ongoing training program. |
| Track concerning interactions with dogs to capture critical knowledge regarding handling and safety but avoid unnecessary or repetitive monitoring that may be unproductively time consuming. | In progress. Confidence in note taking is growing. Staff have been uncomfortable entering notes due to perceived negative feedback received. More thorough note taking and less negative interactions are emerging as this is a topic of training and discussion effort. |
| Create intake exam handling recording system. | Complete. This was done in collaboration with the University of Wisconsin (UWis) School of Veterinary Medicine Shelter Medicine Program project (see below). |
| Enforce ACO’s providing field handling documentation. | In progress. Ensuring documentation is consistently recorded about handling an animal in the field, including putting them in the truck and bringing them to the kennel, is occasionally completed in notes today. A policy will be developed and training |

| 5) Safer Shelter Environments | |
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| Recommendation | Status |
| | completed and tracked to enforce needed field handling documentation. |
| Implement DPFL's Every Dog, Every Day! (EDID!) Enrichment programming | In progress. As stated above, Staff are currently receiving individual training to build confidence in dog to dog meets. Future training will be for managing playgroups and later for managing multiple dogs. There are no plans to bring in DPFL as the program is implemented. |

6) ASSESS AND THEN INFLUENCE BEHAVIOR

| 6) Assess and Then Influence Behavior | |
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| Recommendation | Status |
| Maintain consistent enrichment records; consider only recording significant incidents (both positive and concerning) to more easily identify progression and/or regression. Assume all animals are doing well unless otherwise stated. | No progress. As stated above, walk boards will be utilized to track day to day outings and information that relates to those outings (training equipment, special diet, etc.). Exceptions to daily enrichment will be tracked using the shelter database. |

7) HONOR DOGS AS INDIVIDUALS

| 7) Honor Dogs as Individuals | |
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| Recommendation | Status |
| Clearly identify which behaviors need to be strengthened to help stabilize a dog emotionally and/or to make them more appealing to adopters | No progress. As stated above, walk boards will be utilized to track day to day outings and information that relates to those outings (training equipment, special diet, etc.). Exceptions to daily enrichment will be tracked using the shelter database. |

| 7) Honor Dogs as Individuals | |
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| Recommendation | Status |
| Clearly identify which behaviors need to decrease and/or be extinguished for safety | No progress. As stated above, walk boards will be utilized to track day to day outings and information that relates to those outings (training equipment, special diet, etc.). Exceptions to daily enrichment will be tracked using the shelter database. |
| Redirect self-rewarded behaviors that need to be decreased | No progress. This will be addressed through handler training. |
| Use Gentle Leaders; introduce during play sessions if the dog is not used to them; create signage indicating dogs learning to wear them. | No progress. This will be addressed through handler training and use of the walk boards. |
| Consider using “clicker training” or similar for fractious dogs; ensure they receive enrichment. | No progress. This will be addressed through handler training. |
| Refrain from relying on relationships to progress behaviors (save that for when they go home). | No progress. This will be addressed through handler training. |
| Find creative alternatives to housing dogs for more than 90 days. | In progress. Some long-term housing for dogs is legally mandated and not avoidable. Rounds review and pathway planning are addressing animal throughput expediency. Alternative housing options will be considered. |

Background. In the Fall of 2018, the DCS Director (then Interim) hired Tasha Harmon, a consultant, to help address policies, procedures and practices to improve the MCAS employee working environment.

Employees were trained on interpersonal conflict resolution and a series of listening sessions were conducted to surface organizational culture change needs. A staff team named the Collaborative Improvement Working Group (CIWG) was formed from employees working across MCAS working units to “tackle the matters that need improvement and positive change.” CIWG was supported with a “Coordinating Team” charged with “developing agendas for the CIWG and staff meetings in order to keep the group focused on their tasks.” An Emotional Safety Committee was also formed in December 2019.

In December 2019 through February 2020, DCS staff were charged with developing a plan to continue the work of the consultant and work groups, to, “1) establish and implement clear policies and procedures so that the systems at MCAS are running smoothly and 2) create and foster a workplace culture of safety, trust and belonging so employees are happy coming to work, are fully equipped with tools, resources, trust and confidence to fulfill their job responsibilities.”

DCS staff proposed establishing a project with Jamie Waltz, DCS Director (then Interim) as sponsor and DCS Director’s Office staff as project manager. Project team members were to be 1) Martine Coblenz, DCS Equity & Organizational Culture Change Manager, 2) Cynthia Trosino, DCS Director’s Office, HR, and 3) Wade Sadler, Animal Services Director.

Project outcomes and next steps were presented in three areas, 1) support for managers at MCAS, 2) support for all staff at MCAS, 3) support for the Collaborative Improvement Work Group (CIWG).

Restrictors of Progress. Progress has been limited and the project stalled due to the lack of a Shelter Operations Manager, the onset of COVID, and the departures of DCS leadership, including Wade Sadler, and Jamie Waltz. Further, there is an inability to shut down the facility operations to conduct the envisioned extended all staff meetings or retreats for dedicated collective team building.

³ Based on “Draft MCAS Transformative Journey Project Proposal” initiated December 30, 2019 and last updated February 13, 2020, written by Martine Coblenz and Mariana Parra on the request from the DCS Director Jamie Waltz

Below are the desired outcomes, their planned next steps, and current status.

| 1) SUPPORT FOR MANAGEMENT AT MCAS | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1) Support for the Managers at MCAS | | |
| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
| <p>Solidifying a Leadership team that is on the same page about both the workplace culture (behaviors, group norms, etc.) and their institutional policies and practice.</p> <ul style="list-style-type: none"> All managers at MCAS have a clear understanding and mutual agreements on carrying out MCAS policies and procedures | <ol style="list-style-type: none"> Carrying forward the Division’s mission by helping them establish their own priorities for the year <ul style="list-style-type: none"> Conducting an offsite leadership retreat specifically facilitated around building trust and sense of team. Collaboration with the Director’s Office and/or outside resources supporting ongoing leadership meetings Support in capacity building through training, identifying strengths and weaknesses and how to give and receive constructive criticism. | <p>Limited progress. MCAS established the MCAS North Star, completed leadership team discussions, and held several staff meetings where institutional policies and practices were discussed, led by the MCAS Director (Sadler) and reinforced by the DCS Director (Waltz).</p> <p>No offsite was completed.</p> <p>Capacity building through training was infrequently completed, no inventory of strengths and weaknesses was completed, and no training on giving and receiving constructive criticism has been completed since 2020.</p> <p>The current MCAS Director and Shelter Operations Manager are working with the Leadership team to establish common understanding and implementation of policies, updating outdated policies and practices, and working to build trust and sense of team through effective dialogue, reinforcement of</p> |

| 1) Support for the Managers at MCAS | | |
|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------|
| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
| | | the North Star, and modification/clarification of roles and accountabilities. |

2) SUPPORT FOR ALL STAFF AT MCAS

| 2) Support for all staff at MCAS | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
| <ul style="list-style-type: none"> ● Staff can work collaboratively with one another to complete their tasks. ● Staff have a sense of their own value and that their colleagues value them. ● Staff are engaged in staff meetings, feel they have purpose and can accomplish good. ● Staff have trusting relationships where they can show vulnerability (not afraid of reactions from peers). ● Staff can check in with one another and hold one another accountable. ● Staff are on the same page about what they are working towards. ● Staff have a clear and mutual understanding of how decisions are made at MCAS. | <ol style="list-style-type: none"> 1. Facilitated dialogues within the unit level centered around safety, trust and belonging. <ul style="list-style-type: none"> ○ Giving employees an opportunity to process pain, trauma and harm they have experienced through a restorative approach. ○ Create opportunities for trust and team building. ○ Revise unit level agreements. 2. Training within the unit levels <ul style="list-style-type: none"> ○ Compassionate communication ○ Equity and empowerment lens in decision making ○ Hands on conflict resolution practice at the unit levels | <p>Limited progress. Several staff meetings were held in 2020 and 2021, mostly virtual due to the pandemic, to discuss employee concerns around safety, trust, and belonging.</p> <p>Some staff training was provided on the County's equity and empowerment lens in decision making and the leadership team engaged in considerable discussion on the topic with the University of Wisconsin team.</p> <p>No other training and no job shadowing/mentoring was completed.</p> <p>The Emotional Safety Committee, if formed, is not active.</p> <p>The current MCAS Director and Shelter Operations Manager are conducting interviews and interactions</p> |

2) Support for all staff at MCAS

| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <ul style="list-style-type: none"> ● Staff are clear about everyone’s roles and responsibilities. | <p>on real time issues by utilizing the tools learned (ladder of inference, assumptions, managing communication about sensitive issues and ways to provide and receive feedback)</p> <ol style="list-style-type: none"> 3. Creating inter-unit job shadowing and mentorship opportunities 4. Establish the Emotional Safety Committee <ul style="list-style-type: none"> ○ Establish the committee’s purpose, agreements, etc. | <p>with all staff to establish a foundation of trust.</p> |

3) SUPPORT FOR THE COLLABORATIVE IMPROVEMENT WORKING GROUP (CIWG)

3) Support for the Collaborative Improvement Working Group (CIWG)

| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> ● Solidifying the group as a team (especially as new members come on board). <ul style="list-style-type: none"> ○ Review (and revise) the team agreements ○ Co-facilitate meetings with | <ol style="list-style-type: none"> 1. Addressing the issues that span across all work units: <ul style="list-style-type: none"> ○ Utilizing a tracking tool that incorporates the issues in an accessible and manageable way. | <p>The Collaborative Improvement Working Group (CIWG) is not active. However, the intent of this group will be carried out through the MCAS Director’s and Operations Manager’s continued work to improve</p> |

| 3) Support for the Collaborative Improvement Working Group (CIWG) | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Desired Outcome | Next Steps (as of February 2020) | 2023 Status |
| <p>skill building in mind.</p> <ul style="list-style-type: none"> ● Identifying CIWG members on taking on certain roles and responsibilities ● Staff will continue to see and feel more changes are being made from the issues that have been raised. <ul style="list-style-type: none"> ○ Staff will feel happy coming to work ○ Staff will feel seen and heard and valued | <ul style="list-style-type: none"> ○ Utilizing the processes/tools for decision making. <ol style="list-style-type: none"> 2. Addressing the issues around emotional safety. <ul style="list-style-type: none"> ○ Determine how emotional safety is incorporated in all of the above groups. 3. Support and connecting CIWG members to resources and training opportunities for capacity building <ul style="list-style-type: none"> ○ Meeting facilitation ○ Project management ○ Other leadership opportunities. | <p>staff engagement in policy development.</p> <p>Consideration for future establishment of committee work, such as the CIWG, will follow the staff engagement work currently underway and staffing plan including in the FY 24 budget funding request.</p> |

2020 - 2023 JOINT EFFORT WITH THE UNIVERSITY OF WISCONSIN TO CREATE SHELTER EXCELLENCE RECOMMENDATIONS⁴

Background. MCAS formed a consultation partnership with the University of Wisconsin (UWis) School of Veterinary Medicine Shelter Medicine Program in April 2019. The UWis Shelter Medicine Program team is widely considered to be a leader in the forefront of the animal welfare industry, with decades of experience in the field of shelter medicine. UWis is providing their services free of charge based on MCAS commitment to equity and evidence-based approaches for shelter medicine.

⁴ Based on “Journey to the MCAS North Star of Equity and Quality of Care” published July 2022, with updates.

The goal of the joint work is to provide evidence-based recommendations and training to support MCAS in becoming a model of excellence in progressive animal services. The UWis philosophy is to ensure equity in the delivery of services to all communities, especially communities of color, through positive interactions with animal services, increase access to care and services through community outreach and partnerships, and to commit to providing excellence in shelter care and management.

The work began with a site visit from UWis in 2019 to review the existing shelter layout and procedures. Nearly every week starting early in 2020, members of the MCAS management team met via Zoom with members of the UWis team to discuss improvement recommendations, philosophies, best practices, obstacles and constraints, and to review progress. Members of the UWis team have periodically visited to observe and work with the MCAS management team and staff.

Restrictors of Progress. Progress has been slow due to the pandemic, MCAS staffing shortages and turnover, a nationwide veterinarian shortage, and physical limitations of the shelter. The pandemic restricted MCAS operations, including interactions with the public, and the ability for the UWis staff to visit as frequently as they would have liked to provide hands-on guidance to the shelter. Staffing shortages and turnover result in difficulty finding time to train and the frequent need to train new employees. It also limits the time to practice changes and solidify new practices. The shelter is also on their third MCAS Director during this time and operated most of this time without a Shelter Operations Manager. Physical limitations of the shelter restrict animal housing and flow, and complicate public access.

Below are descriptions of the UWis recommended fundamental best shelter practices, work completed to date, work currently underway, and considered next steps.

SHELTER OPERATIONS FUNDAMENTAL BEST PRACTICE

The length of time an animal remains in the Animal Shelter matters. Shorter is better. A fundamental recommendation from UWis to MCAS is to minimize each animal's length of stay, keeping them in the shelter only as long as they need to. Like humans in hospitals, the longer an animal is in a shelter, the more they are exposed to potential physical and emotional damage. Extended shelter stay causes stress, affecting mental and physical health. Damage can be mitigated with enrichment, but there is no replacement for a home. Decreased immune systems and extended proximity to other animals can lead to illness.

To manage the animal length of stay in the shelter, UWis encourages MCAS to analyze the finite capacity of care the Shelter has and to not exceed it. The finite capacity of care is due to Shelter facility design, space limitations, processes used, barriers to reunification and adoption, and current staffing levels. Focus of the UWis engagement has been on improving each of the factors as best as possible.

Operations should be designed for efficiency of care, reducing delays and wasted resources that have negative effects on animals. For instance, more consistent application of efficient cleaning standards preserves staff time to do enrichment and other activities beneficial to the animal. Fast and accurate decision-making processes based on clear roles and guidelines can ensure animals get the attention they need and don't linger in the shelter workflow.

If the shelter is full, UWis recommends animal intake be temporarily limited. If too many animals are in the shelter, the ability to treat the animals with appropriate care is reduced. Limit shelter intake to match or be below the speed animals leaving the shelter to increase the quality of housing and care provided to animals during their stay in the shelter. This will improve the well-being of both animals and staff.

Work is underway to increase the capacity of care in the MCAS shelter by adding staff, continuing to improve and stabilize internal operations and training, and removing barriers to reunification and adoption.

Starting in mid-2023, MCAS, along with the City of Chicago, plan to work with UWis to change current field practices to best meet community needs while not exceeding the capacity of care.

Sometime in the future, the Multnomah County Animal Shelter might be renovated or replaced. In 2019, the Department of County Assets allocated funds to develop a Facility Master Plan. These funds support initial planning for the future capital needs of the Animal Shelter, provide for the review and redesign of the MCAS organizational approach, and will result in a model of the new or renovated shelter to increase the capacity of care.

WORK COMPLETED TO DATE

Since early 2020, the UWis and the MCAS team have focused primarily on improving shelter operations and staff training and capability. Not all improvements attempted have been successful. Change is hard, and even more so during a pandemic and with limited staffing. Below is a description of each of the areas of change attempted and status.

Revised intake process to focus care on animals that need it most (2019)

What is the change? Animals are now processed into the shelter consistently by Animal Care. Each animal receives a cursory exam to identify obvious health issues and are sent to Animal Health when appropriate for immediate care.

Working well. Additional kennels were added to the Intake area to facilitate consistent holding of all newly arrived animals. Staff assignments for Animal Care were modified to allow focus on Intake operations and training was provided for employees and added to the onboarding training for new staff. A secure refrigerator was provided for the Animal Care team to use during intake. Intake for cats and dogs were separated and a table added to the dog intake area to make it easier for the Intake team to handle smaller breeds.

Struggling. Changes in responsibilities were difficult for several of the Animal Care staff, leaving them feeling overwhelmed by the new procedures and volume of arriving animals. Consistent documentation has been a struggle, although that is improving. Shortages in Animal Health staffing, primarily the Veterinarians, frequently results in frustrating delays in medical attention provided to all but the most urgent care needs.

Revised behavior evaluation process (2020)

What is the change? UWis discussed that studies show formalized behavior testing is not representative of animal behavior in the home. It is a snapshot in time during an often-stressful event for the animal. In response, MCAS ceased performing the formalized test called SAFER (Safety Assessment for Evaluating Rehoming) and replaced it with best practice behavior journaling and monitoring in daily rounds. The goal is to apply a problem oriented veterinary behavior record for concerns and management, using SOAP: Subjective...what is seen, Objective...what is measured, Assessment...what best practice says to do, Plan...a pathway toward improvement through behavior medication protocol in addition to enrichment and behavior management. Observations recorded in SOAP can also be useful for potential owners to help in their selection decision.

Working well. Rounds are consistently providing animal behavior observation by a cross-section of MCAS staff. Application of behavioral medication protocol on intake for animals exhibiting the most severe behaviors provide a humane way to help the animal calm down until they can be moved into a less stressful environment, such as a quiet area of the shelter (often an office) with a comfortable place to sleep, toys to play with, and comforting interactions with staff or volunteers.

Struggling. Staff shortages have resulted in MCAS putting the use of SOAP on hold. Observed behaviors are still journaled during rounds and added to the animal's record and decisions made for enrichment and behavior management. These observations, however, are informal and less effective than the recommended SOAP approach, although they are being used to inform potential adopters or foster families. Further, staff has struggled to accept not using the formalized SAFER test. Some also have had a hard time participating in recording observations rather than recording their personal conclusions of what the animal needs and how safe the animal would be in the home.

Revised pathway and care planning (2020); enrichment of communications between staff units through database management (2022)

What is the change? The goal is to increase the shelter capacity to care for animals by eliminating unnecessary waiting times for animals. All processes from animal arrival to the shelter to animal departure from the shelter were reviewed to encourage frequent evaluation of animal need and reduction of waiting time before animal placement. This evaluation surfaced the need to enrich communications between staff units, which led to development and adoption of a new set of status and sub-status categories used to track what is currently happening for the animal and trigger changes appropriate to their needs. In-depth review of what appropriate needs are for animals, concentrating on dogs and cats, was included in the revised pathway and care planning.

Working. Several steps in the shelter animal pathway were streamlined by increasing attention to animal status and appropriate next steps for their care as they moved through the shelter. This included Intake, In-care, and outgoing status and sub-statuses being adopted. The incidents of animals being overlooked, or next steps being confused, are now rare.

Struggling. Staff shortages have resulted in inconsistent training and application of the new status and sub-status categories. Limitations in the Shelter Buddy software also resulted in having to adopt some status and sub-status combinations that are not intuitively obvious and thus hard to accurately and consistently record and interpret, leading to errors. These errors are usually caught during rounds, but reliance on inspection is less effective than reliance on initial accuracy. Staff shortages also reduce the frequency of evaluating animal needs and thus can contribute to additional waiting time before animal placement. Facility limitations also contribute to added waiting times for animals in part due to the need to move animals occasionally to make room.

Improved daily rounds (2020)

What is the change? Historically, the primary purpose of rounds was to review severe medical or behavior issues and decide if continued care is to be provided or the animal should be euthanized. This change refocuses daily rounds to provide ongoing observations of each animal's well-being, care needs, and appropriate next steps in the animal's journey through the shelter. Daily rounds provide observation of each animal in the shelter, review of their medical and behavioral status and planned pathway, and decisions and communication regarding next steps. Rounds include all four units: Animal Care, Animal Health, Client Services, and Field Services. The result is to find outcomes for animals as soon as possible including reunification, transfer, adoption, or, in extreme cases, euthanasia. Rounds also can trigger targeted campaigns to promote adoptable animals with extended lengths of stay or special needs. Rounds include pathway decisions, including identifying animals ready for pre-selection, meaning they can be presented to potential adopters with the understanding that the animal will remain at the shelter during their stray-hold in case the animal's owner shows up.

Working. Rounds are conducted every day. Observations are being made and recorded on daily monitoring sheets and entered into Shelter Buddy, the shelter's primary animal tracking database. A manager is always in charge of the agenda and a note taker is always assigned.

Struggling. Training is needed to help all staff and volunteers understand the thoughtful effort involved in the rounds and how the observations and decisions work for the health of the animal. The new status/substatus developed during 2022 are not yet consistently applied and thus requires additional review during the rounds. Finally, euthanasia reasoning needs to be better documented.

Improve pet retention with Pets for Life (2020)

What is the change? Focus on pet retention efforts by supporting animals in the community at risk of being surrendered to a shelter, or owners with financial or other barriers to access pet care resources.

Working. MCAS began preliminary work with an outreach group called Pets for Life to develop a program that would integrate with the work of field services officers.

Struggling. There were immediate financial barriers that prevented MCAS from moving forward. All established donation funds that were considered to develop the program are considered restricted to animals in the care of the county, and there are limitations to how extensively those funds may serve animals in the community. MCAS hopes to develop a plan to build capacity for this emerging animal welfare best practice in the future.

Add portals to every cat kennel (2021)

What is the change? Added portals to every cat kennel in the shelter that didn't already have them installed to extend available space for cats, and to add vertical space. This program is championed by The Million Cat Challenge, and Dr. Newbury's colleagues, Dr. Kate Hurley and Dr. Julie Levy.

Working. All cat housing now includes portals.

Work to improve staff capabilities and ability to accept change (2022)

What is the change? Staff are committed and experienced to the health and wellbeing of animals in the shelter. Several of the changes recommended by the UWis are uncomfortable because they are different from the past practices and require a shift in thinking to understand. On April 13, 2022, an in-person all-staff presentation with UWis was held to help staff have a shared understanding of where all these changes are heading and why they are important. It was emphasized that a core outcome desired of the changes is to focus on equity to improve services. It was also emphasized that an animal shelter is not the place to modify an animal's behavior. It is a place to support the animal's welfare in a stressful situation. Holding an animal back with the aim of behavior modification is not appropriate. That is better done outside the shelter.

Working. MCAS management reinforced in this meeting the importance for staff to apply appreciative inquiry to help them share what is working well and identify strengths. This is consistent with the Department of Community Services Equity Strategic Plan. Many staff asked questions during that meeting and continue to ask questions as they encounter practices they have concerns about.

Struggling. This was a one-time event. While successful, change is a process and needs to be continued. With limited staff, the availability of time to carry out successful change is limited. Further, staff turnover results in some staff not having experienced even that one-time event. Most volunteers also did not participate.

Complete a comprehensive review of staffing needs and submit a request to the Board of County Commissioners for increased staffing (2023)

What is the change? In January 2023, a comprehensive total staffing needs study, with support from the UWis and the Oregon Humane Society, based on national best practices, was

completed by the Shelter Director for all areas of the shelter except field operations. This analysis was used to prepare a budget request through the Department of Community Services to the Board of County Commissioners.

Reassign staff to better utilize strengths and balance workload (2023)

What is the change? Evaluate staff and management assignments in the shelter and modify to better utilize their strengths and balance workload.

Working. In late January, 2023, the organizational structure of the Animal Care team was changed to better utilize the strengths and weaknesses of the individual supervisors. Programs that were more public forward facing (Adoptions, Admissions, etc) were placed under one supervisor and programs that were more “Back of House” focused (Enrichment, Daily Care, Volunteer, etc) were placed under another supervisor.

Working. In addition to the separation and reassignments of duties being more suited to the strengths and weaknesses of both the program and the supervisors, it also created a better distribution of the number of personnel under each supervisor. The shift went from three-fourth of the Animal Care staff being under one supervisor, to a more even distribution between the two.

Struggling. There is an inadequate number of staff to provide full coverage and continued staff and management turnover result in an enhanced level of repeat training. A staffing analysis has been completed and submitted as part of the budget, which will reduce this challenge.

WORK CURRENTLY UNDERWAY

Build trust and understanding between volunteers, staff, and management

What is the change? Chronic understaffing, frequent changes in the MCAS Director position, a long-term vacancy in the Shelter Operations Manager position followed by a failed placement in 2021 in that position, and repositioning of shelter’s role from long held practices (e.g., shifting the shelter’s role from modify an animal’s behavior to supporting the animal’s welfare in a stressful situation) has created a nearly a perfect storm for developing distrust between volunteers, staff, and management. The new MCAS Director and the new Shelter Operations Manager have inherited the benefit of the UWis recommendations, but also the damage that comes from incomplete and/or inconsistent attempts at change, and misunderstandings that come from lack of consistent communications and training. This is further complicated because

of the passion employees and volunteers have for the animals in the shelter. If they don't understand the reasons for the changes that are underway, they likely interpret many management decisions as resulting in harm to animals.

Status. The new MCAS Director and Operations Manager are working to provide consistent messaging, have requested a budget request to stabilize staffing at reasonable levels to allow for adequate training and completion of shelter work, and will continue to encourage staff to approach concerns with appreciative inquiry. They are explaining the 'why' behind changes underway or being considered and will utilize the strengths of Organizational Change Management from the Multnomah County Central HR Management Team to help practice effective change management.

Implement changes to the shelter phone system and addition of Waitwhile software and to enhance public access

What is the change? The MCAS phone system used to work with the public has two challenges. First, the "Adoption Line" is a cell phone that is used to contact people interested in adoption. A potential adopter returning a call can only leave a message if no one is available to answer. Second, the main phone line does not allow a caller, perhaps making an inquiry about a lost animal or to set up an appointment for possible reclaim, to leave a message. The caller will receive a message telling them to call back during open hours if their call is not an emergency, and provides a number to call if their call is an emergency.

Status. The phone system is in the process of being updated to include phone tree capability to direct messages to the appropriate support area in MCAS, reducing triage staff time and speeding up the time for staff to respond to the requestor in most cases.

The shelter is also implementing Waitwhile⁵, a web service designed to encourage positive interactions with the public as they request services from the shelter via the web.

Review, revise, document, and prepare an ongoing training plan for all processes within the Shelter (2023)

What is the change? The MCAS Manager and Shelter Operations Manager worked with the UWis staff late in 2022 and early 2023 to review all shelter processes.

⁵ [Waitwhile: Customer Flow, Appointments, & Waitlist App](#)

Status. The Shelter Operations Manager is now completing a comprehensive review of all shelter policies and creating process alternatives to reflect current and planned staffing levels. She will develop a comprehensive supervisor, staff, and volunteer training plan. She has created an Intranet portal to house all policies, documentation, and training modules as they are developed. Employee training records will be maintained in the County Human Resource Information System and a system to track volunteer training will be developed.

Develop a more community-oriented and support-based humane law enforcement program

What is the change? Modify field practices to become a community-oriented, support-based humane law enforcement program.

Status. UWis worked with a study group to evaluate Diversity, Equity, and Inclusion patterns from MCAS enforcement data. They also conducted a site visit to ride-along with Animal Services Officers and interviewed them about their experiences. Discussions regarding options and decisions about changes to implement are on hold but planned to resume after critical shelter processes and staffing challenges are addressed.

Complete a pilot project to increase pet retention in underserved communities

What is the change? In connection with supporting pet retention efforts and serving community members in need, UWis recommended identifying underserved communities within the county for a pilot program. They also recommended partnering with other county service providers to identify mutual clients.

Status. Data has been collected identifying animal service deserts and areas of underservice in the county and provided to UWis. Discussion regarding where and how a pilot project could be conducted are on hold but planned to resume after critical shelter processes and staffing challenges are addressed.

Conversations have been held with DCHS programs for seniors, veterans, and disabilities in search of how mutual clients can be better supported. They will resume after critical shelter processes and staffing challenges are addressed