Checklist of Key Statements

from the 2022 ASV Guidelines for Standards of Care in Animal Shelters
and the Journal of Shelter Medicine and Community Animal Health

Published by the Association of Shelter Veterinarians ©2023
How to use this document

Each of the 553 statements included in this checklist were written, edited, and approved by the ASV’s Board of Directors and Guidelines Taskforce of authors of the Second Edition of the ASV Guidelines for Standards of Care in Animal Shelters, published in the Journal of Shelter Medicine and Community Animal Health in December 2022.

Key actionable statements in the Guidelines use an unacceptable, must, should, or ideal format:

- **Unacceptable** practices need to be avoided or prevented without exception
- **Must** practices are necessary to ensure humane care
- **Should** practices are strongly recommended, and compliance is expected in almost all circumstances
- **Ideal** practices are implemented when resources allow

This checklist document is intended to assist shelters and their consultants measure their operations against those recommended (or not recommended) in the 2022 ASV Guidelines for Standards of Care in Animal Shelters, and to help shelters prioritize and advocate for needed changes when identified. It is meant to be supplementary to the Guidelines document, which provides context and justification. This is a self-assessment tool, not a regulatory or legal document, and the ASV is not an accreditation body that can confirm or deny compliance.

This checklist is based on the ASPCApro.org resource “Shelter Care Checklists: Putting ASV Guidelines into Action,” which was among many created for the first edition of the ASV Guidelines published in 2010. Thank you to the authors of both Guidelines editions for the content, the ASPCA checklist authors, and Abigail Appleton for organizing and collating these statements. Layout by Lena DeTar.

The mission of the Association of Shelter Veterinarians is to advance and support the practice of shelter medicine in order to improve community animal health and well-being; this checklist is offered as a tool to support that mission. For more information about the Guidelines and the Association of Shelter Veterinarians, visit [www.sheltervet.org](http://www.sheltervet.org).
Section 1: Management and Recordkeeping

1.1 General

- Shelters **must** have a clearly defined mission or mandate, adequate personnel, up-to-date policies and protocols, a system for training and supervising personnel, and management practices aligned with these guidelines.

- The shelter’s mission or mandate **should** reflect the needs of the community it serves.

- The community’s needs **should** be regularly reviewed, and strategies and goals updated accordingly.

1.2 Management structure

- Veterinarians **should** be integrally involved with development and implementation of the shelter’s organizational policies and protocols.

- Shelters **must** have a clearly defined organizational structure that outlines accountability, responsibility, and authority for management decisions.

- This organizational structure **must** be communicated to all staff and volunteers.

- Lines of authority, responsibility, and supervision **should** be in writing, reviewed periodically, and updated when roles change.

- Decision-making **must** take into account resource allocation as well as population and individual animal health and welfare.
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- Authority and responsibility for tasks and decision-making must be given only to those who have the appropriate knowledge, training, and when applicable, credentials
- A formal relationship with a veterinarian must be in place to ensure oversight of medical and surgical care in the shelter (also in Medical 6.2)
- A shelter’s veterinarian must have knowledge about their particular population
- A shelter’s veterinarian should have training or experience in shelter medicine
- The shelter’s veterinarian should be consulted on all policies and protocols related to the maintenance of medical and behavioral animal health

1.3 Establishment of policies and protocols
- Operating beyond an organization’s capacity for care is an unacceptable practice (also in Population Management 2.1)
- Protocols must be developed and documented in sufficient detail to achieve and maintain the standards described in this document
- Protocols should be reviewed and updated regularly
- All personnel must have access to up-to-date protocols
- Shelter management must routinely monitor and ensure compliance with protocols
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1.4 Training
- Personnel training **should** incorporate all relevant aspects of working in the organization
- **Shelters must** provide training for each shelter task
- Personnel **must** demonstrate skills and knowledge before proficiency is assumed
- Documentation of training **should** be maintained and reviewed regularly as a part of professional development and performance reviews
- When licensing or certification is required to perform specialized duties, as in veterinary care or euthanasia, personnel performing these tasks **must** be credentialed
- Continuing education **must** be provided for all personnel in order to improve skills and maintain credentials
- **Shelters must** provide all personnel the information and training needed to recognize and protect themselves against common zoonotic conditions
- Shelter personnel having any form of contact with animals **should** have proper training in basic animal handling skills, animal body language, and bite prevention strategies

1.5 Record keeping and animal identification
- **Shelters must** adhere to the elements of record-keeping defined within regulatory requirements
- Digital systems **should** be used for record keeping, preferably software systems designed for animal shelters
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- The software system used by a shelter **should** be able to generate basic population level reports as well as individual animal records
- Each animal **must** have a unique identifier and individual record
- Shelters **must** have an organized system by which animal identification information can be quickly and easily matched to animals in enclosures and their shelter records
- A means of identification **should** be physically affixed (e.g. collar and tag) or permanently inserted (microchip), when it is safe to do so
- Shelter records **should** capture all pertinent medical and behavioral information
- Records **must** be maintained for animals in foster care and other offsite housing locations just as they are for shelter-housed animals
Section 2. Population Management

2.1 General

☐ Shelters must practice active population management

☐ Operating beyond an organization’s capacity for care is an unacceptable practice (also in Management and Record Keeping 1.3)

☐ Policies and protocols must be in place to ensure an organization operates within its capacity for care

☐ Housing capacity calculations must be based on the ability to promote each animal’s positive welfare

2.2 Determining Capacity for Care

☐ Trained personnel must be scheduled to meet daily animal care needs and efficiently and effectively accomplish each critical task

☐ Services such as surgery, veterinary visits, or transport should be scheduled in anticipation of an animal’s eligibility for that service

☐ Foster programs must have sufficient personnel to provide support to caregivers and animals

☐ Medical, surgical, and behavioral services for foster animals must be provided in a manner that promotes animal welfare and minimizes LOS

☐ Shelters should engage with one another to leverage resources and maximize each organization’s strengths
2.3 Operating within Capacity for Care

☐ An organization’s policies for admissions and outcomes should be based on their mandate, mission, and the needs of their community

☐ When appropriate, admission policies should prioritize retention over shelter intake

☐ Decisions about intake must consider whether admission is the best option for the animal or their situation

☐ Admission must be balanced with the ability to provide appropriate outcomes, minimize LOS, and ensure the shelter remains within its capacity for care

☐ An animal must only be admitted if the shelter can provide the care they require

☐ Organizations that are impacted by unpredicted intakes (e.g. disasters and large-scale investigations) must have a plan to flex their operations to increase their capacity for care

☐ Every attempt must be made to locate a lost animal’s owner, including careful screening for identification and microchips, in the field and at the time of intake

☐ Shelters should remove barriers to local outcomes

☐ Medical or behavioral care that can reasonably occur outside of the shelter, either in foster care or after adoption, should be identified to minimize time in the shelter environment

☐ Regardless of whether animals are on site or in foster care, decision-making and animal movement must optimize LOS
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Section 2. Population Management

☐ The entire shelter population, including animals housed in foster or off-site, **must** be regularly assessed by knowledgeable personnel with decision-making ability and authority

☐ Any needs identified during population rounds that could compromise welfare or extend the shelter stay **must** be addressed promptly

☐ All animals physically in the shelter **must** be monitored daily to identify housing, care, or service needs

☐ A shelter animal inventory, including all animals in foster care, **should** be taken and reconciled daily

2.4 Monitoring population data

☐ At a minimum, shelters **must** track monthly intake and outcome type for each species by age group

☐ Data collection **should** include information about health and behavior status at intake and outcome

☐ LOS data, broken down by age category, species, status, and location, **should** be regularly analyzed to identify bottlenecks, mismatched resources, and capacity for care concerns

☐ Population level data **should** be reviewed and analyzed regularly to ensure that operations align with the organization’s goals, purpose, and policies

☐ Population level metrics are **ideally** monitored as a community through transparent sharing of data

☐ Live release rates or save rates **must** be evaluated in the context of animal welfare and cannot be used alone as a measure of success
Section 3. Animal Handling

3.1 General

- Handling **must** be humane and appropriate for the individual animal and situation
- Shelter personnel **should** offer high-value treats or food when handling animals or performing procedures
- When needed, medication **should** be used to minimize fear, anxiety, and stress and enhance safety during handling

3.2 Restraint

- The minimal amount of physical restraint needed to accomplish necessary animal care without injury to people or animals **must** be used
- Forceful restraint methods **must** not be used, except in extraordinary circumstances
- Handling **must** minimize the risk of escape

3.3 Handling equipment

- A variety of humane equipment that facilitates animal handling with minimal or no hands-on contact **must** be available
- Control poles **must** only be used when alternatives for handling dogs are insufficient to protect human safety
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☐ It is **unacceptable** to use control poles on cats or small dogs

☐ Animals for whom handling equipment is necessary for long-term safe handling **should** receive positive reinforcement training to minimize fear, anxiety, and distress during its use

☐ Animal shelters **must** have written protocols and readily accessible equipment for breaking up dog fights to prevent human and animal injury
Section 4: Facilities

4.1 General

- The shelter facility **must** include sufficient space to allow for the execution of essential shelter operations and programs as required by mission or mandate.
- Both the quantity and design of housing **must** be appropriate for the species, the number of animals receiving care, and the expected length of stay.
- Facility design and use **must** provide for proper separation of animals by species, predator/prey status, health status, and behavior.
- Housing in foster care **should** meet or exceed the guidelines for in-shelter housing.

4.2 Primary enclosures

- Shelters **must** have a variety of housing units available to meet the individual needs of animals, including physical, behavioral, and medical needs.
- The primary enclosure **must** be structurally sound and maintained in safe, working condition to prevent injury and escape.
- Primary enclosures with wire-mesh bottoms or slatted floors are **unacceptable**.
- The use of cages or crates intended for short-term, temporary confinement or travel is also **unacceptable** as primary enclosures.
- It is **unacceptable** to stack or arrange enclosures in a manner that increases animal stress and discomfort, compromises ventilation, or allows for waste material contamination between housing units.
Animals **must** be able to make normal postural adjustments within their primary enclosure, including standing and walking several steps, sitting normally, laying down at full body length, and holding the tail completely erect

Individual adult cat housing that is less than 8 ft² (0.75 m²) of floor space is **unacceptable**

**Ideally**, individual cat housing provides 11 ft² (1.0 m²) or more of floor space

The primary enclosure **must** allow animals to sit, sleep, and eat away from areas of their enclosures where they defecate and urinate

Multi-compartment enclosures **should** be provided for the majority of animals housed in the shelter

Cat housing units **should** be elevated off the floor

Cat cages **should** face away from each other or be spaced more than 4 ft (1.2 m) apart

Primary enclosures with indoor–outdoor access are **ideal** for most animals, especially when held long term

Enclosures that include outdoor space **must** protect animals from adverse weather; provide choice for thermoregulation; protect from predators; and prevent escape, theft, or harassment

All dogs **should** be given the opportunity to hide within their enclosure

A soft resting place that elevates animals off of the floor **should** be made available for all animals
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Section 4: Facilities

☐ All cats must be given the opportunity to hide within their enclosure

☐ Feline primary enclosures must allow scratching, climbing, and perching

☐ Cats must have a litter box large enough to comfortably accommodate their entire body and allow for proper posturing

☐ Housing that provides animals with additional space, enrichment, and choice within their enclosure must be provided for animals remaining in the shelter long-term (i.e. more than 2 weeks)

☐ It is unacceptable to house animals in an enclosure that would require the use of forceful animal handling equipment for daily cleaning and care

☐ Except for a brief, emergency situation, it is unacceptable to house animals in facility spaces not intended for animal housing (e.g. bathrooms and hallways)

☐ Tethering is an unacceptable method of confinement for any animal

4.3 Co-housing

☐ The size of a primary enclosure for cohousing must allow each animal to express a variety of normal behaviors and maintain distance from roommates when they choose to do so

☐ A minimum of 18 ft² (1.7 m²) of floor space per adult cat should be provided for cohousing

☐ Appropriate resources (e.g. food, water, bedding, litter boxes, and toys) must be provided to minimize competition or resource guarding and ensure access by all cohoused animals
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❑ For cohoused cats, a variety of elevated resting perches and hiding places must be provided to increase complexity and choice within the living space

❑ Random cohousing of animals in shelters is an unacceptable practice

❑ Unrelated or unfamiliar animals must not be cohoused until health and behavior are assessed

❑ No more than six adult cats should be cohoused in a primary enclosure

❑ No more than two to four adult dogs should be cohoused in a primary enclosure

❑ Puppies and kittens under 20 weeks of age must not be cohoused with unfamiliar animals except when the benefits outweigh the risks for all animals involved

❑ Dogs should be introduced outside of their primary enclosures in pairs or groups to determine compatibility prior to cohousing

❑ Turnover within groups must be minimized to reduce stress and social conflicts as well as the risk of infectious disease exposure and transmission

❑ Individual animals and group dynamics must be monitored to recognize signs of stress and social conflicts in cohousing enclosures

❑ Individual enriched housing must be provided for animals who are fearful or behave aggressively toward other animals, are stressed by the presence of other animals, require individual monitoring, or are ill and require treatment that cannot be provided in cohousing

❑ Cohousing animals who fight with one another is unacceptable
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☐ Shelters must have a means of isolating infectious animals

4.4 Isolation housing

☐ Isolation housing must meet the medical and behavioral needs of ill animals

☐ Different species must not be housed within the same isolation room

☐ Separate isolation areas must be provided for animals with different highly contagious diseases to prevent coinfections with multiple pathogens

☐ Isolation rooms must be designed so that they do not open directly into another animal housing area

☐ Isolation rooms should have access to a sink for handwashing and be set up with space for treatments, examinations, and storage for dedicated supplies

☐ Isolation rooms must be clearly labeled to indicate current use and necessary precautions

☐ Human and animal traffic through isolation spaces should be limited

☐ Ideally, isolation rooms are designed with windows to allow observation of animals from a corridor without needing to repeatedly enter the room

4.5 Surfaces and drainage

☐ Primary enclosures and all animal areas must be able to be fully sanitized and withstand repeated cleanings
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- A sealed, impermeable surface, such as resinous epoxy or resinous urethane, is recommended for shelter flooring and should be considered for new facilities.
- Points where walls meet floors should be sealed to prevent water intrusion and the accumulation of organic matter and pathogens.
- Drainage systems must be designed to prevent standing water and cross-contamination of waste between housing units.
- Floors should be gently sloped to enable waste and water to run into the drains, particularly in animal housing areas.
- Drain covers must be designed to prevent injury or escape.
- Drain covers should be easily removable for routine cleaning.
- Outdoor primary enclosures or portions of primary enclosures that are outdoors must have nonporous, durable floors that allow for sanitation and proper drainage.

4.6 Heating, ventilation, and air quality
- Environmental temperature must be maintained between 64°F (18°C) and 80°F (26.6°C).
- Animals must be monitored individually to ensure the environmental temperature is comfortable.
- Necessary measures must be taken if an animal appears too cold or too hot.
- Relative humidity should be maintained between 30 and 70%.
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Ventilation **must** be maintained at a high enough rate to ensure adequate air quality in all areas of the shelter including in the primary enclosure

Ventilation **must** not compromise recommended ambient temperatures

All ventilation systems **must** be regularly maintained based on manufacturer recommendations

Air from isolation areas **should** be exhausted outside and not recirculated

Ultraviolet irradiation **must** not be relied on as the sole method for ensuring good air quality or infectious disease prevention

4.7 Noise control

Noise **must** be minimized in animal housing areas

Noise and vibration-producing equipment and mechanical systems **should** be located as far away from animal housing as possible

Prevention and mitigation strategies to minimize the impact of noise **should** be implemented in facility design, added to existing facilities, and incorporated into shelter operations

Preventing visual contact between dogs **should** not be used as a sole strategy to reduce barking

4.8 Lighting

Lighting **should** promote a safe working environment and effective observation of animals and the enclosure
Facilities should be designed to offer as much natural light as possible

When natural lighting is not available and artificial light is used, it should approximate natural light in duration and intensity to support circadian rhythms

4.9 Enrichment spaces

All enclosed outdoor spaces should have double door entry points to keep animals safe and reduce the risk of escape

4.10 Intake Spaces

Shelter admission areas should be separated from adoptions and other client-facing areas

Animal intake should occur in a designated quiet space away from the main pattern of foot traffic

Cages and kennels in intake areas should only hold animals until their initial intake assessment has been completed

Intake rooms should have elevated surfaces to place animals in carriers off of floor level

4.11 Drop boxes

The use of ‘drop boxes’ where live animals are placed in unmonitored receptacles for later intake is unacceptable
4.12 Facility design and planning

- In order to meet the changing needs of the community and services offered by the shelter, flexibility in operational and spatial use should be incorporated into designs for remodeling and new facilities.

- When designing a new facility or undertaking a significant renovation, shelters should consult with a shelter veterinarian and an architect experienced in shelter design.

- Shelters must avoid large warehouse type rooms when designing housing.

- When remodeling or planning a new facility, the movement of animals, people, and supplies should be incorporated into the design.

- Animal shelter design should provide an environment that also serves the needs of personnel and clients.
Section 5: Sanitation

5.3 Sanitation practices

☐ Shelters **must** have a sanitation plan for all locations in which animals are present

☐ Sanitation protocols **should** be based on pathogens, routes, and risk of transmission

☐ Sanitation protocols **must** include steps for removal of organic matter, cleaning, and disinfection

**Ideally**, sanitation protocols will be developed in consultation with a veterinarian experienced in shelter medicine

☐ Sanitation products **must** be diluted and used according to label instructions or published recommendations

☐ Disinfectants used in animal areas **must** be effective against non-enveloped viruses, such as parvovirus, panleukopenia, and calicivirus

☐ Alternative methods of disinfection such as ultraviolet light, steam, freezing, and air filtration systems **must** not be relied on as the sole means of sanitation in shelters

☐ Sufficient personnel **must** be assigned to complete sanitation tasks promptly each day so that animals spend most of their time in sanitary conditions

☐ Sanitation **should** proceed in an order that minimizes both the risk of pathogen transmission from infected animals and the exposure of vulnerable animals
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Section 5: Sanitation

Sanitation practices **should** be observed regularly to ensure consistency with written protocols.

During an outbreak, protocols **should** be reviewed and practices observed to ensure efficacy against suspected pathogens.

Enclosures **must** be completely sanitized before being occupied by a different animal.

It is **unacceptable** to spray primary enclosures while animals are inside them.

Drainage systems or operational practices (e.g. squeegee and towel drying) **must** prevent the accumulation of standing water.

**Ideally**, mopping is avoided in animal housing areas.

When mopping cannot be avoided, personnel **must** ensure that both cleaning and disinfection of the floor surface occur.

Spot cleaning **should** be conducted at least daily when an animal will remain in the same enclosure.

5.4 Reducing pathogen spread

**PPE should** be selected based on specific pathogens and exposure risks within each population.

Appropriate PPE **should** be used in each area and disposed of or sanitized before proceeding to care for other animals.

Protective garments **must** be changed between handling each animal when there is a high risk for disease transmission.
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☐ Personnel should wash hands after removing PPE

☐ Hand hygiene stations should be available in or near every area where contact with animals occurs

☐ Ideally, hand hygiene stations are sinks that allow washing with soap and water, and drying with single use towels

☐ Hand sanitizers should not be relied on as the sole means of hand hygiene

☐ Hand sanitizer should only be used on hands that are visibly clean

☐ Sanitation protocols must address hand hygiene for shelter staff, volunteers, and visitors

☐ All items that come into contact with animals should be sanitized on a regular basis, whenever visibly soiled, and when in direct contact with bodily fluids

☐ Separate cleaning supplies must be designated for each shelter area or be sanitized prior to use in each area

☐ Transport cages and traps, as well as vehicle compartments used for animal transport, must be sanitized before being occupied by a different animal

☐ Mobile equipment such as rolling trash cans, shopping carts, and food or treatment carts should be assigned to one area or be sanitized between areas

☐ Objects with scratched, damaged, and porous surfaces are difficult or impossible to completely disinfect and should be used with caution or discarded between animals

☐ All bedding and other textiles used at the shelter must be discarded or laundered and thoroughly dried when visibly soiled and before reuse with a different animal
Organic debris (e.g. feces) should be removed from items before laundering.

Automatic watering devices and water bottles should not be used if the watering valve cannot be sanitized before being used by another animal.

Food and water bowls must be sanitized in a different location or at a different time than litter pans or items soiled by feces.

Basins used to sanitize food and water bowls and litter pans should be thoroughly sanitized between uses.

5.5 Other shelter areas

Dedicated boots that can be sanitized or disposable shoe covers should be used in potentially contaminated or protected areas, such as isolation and surgery.

Footbaths must not be relied on for infectious disease control in the shelter.

It is unacceptable for animals to walk through footbaths.

Animal waste and bodily fluids must be removed from indoor common spaces as soon as possible.

Feces must be removed from outdoor areas between animals or groups.

Outdoor areas around the shelter must be kept clean.

Access to areas that cannot be sanitized should be restricted to adult animals who have been vaccinated, dewormed, and appear healthy, or animals for
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whom the benefits of such access outweigh the risks of disease exposure or transmission

☐ Standing water should not be allowed to accumulate in or around the shelter

5.6 Wildlife, rodent & insect control

☐ All food must be protected from wildlife, rodents, and insects

☐ Rodent and insect control solutions must be safe, humane, and effective
Section 6: Medical Health

6.1 General

- Health care for animals in shelters is a necessity and must include attention to overall well-being
- Shelter medical care must begin at or before intake and continue throughout the shelter stay
- When medical treatment is necessary, it must be provided in a timely fashion
- Shelters must provide species-appropriate preventive health care; this includes implementing protocols that strengthen resistance to disease and minimize exposure to pathogens
- Individual animal health must be addressed within the balance of decisions and practices that support overall population health
- Shelters should have a protocol for making decisions about which animals and conditions to treat, and which animals and conditions they cannot treat

6.2 Veterinary oversight and medical recordkeeping

- A formal relationship with a veterinarian must be in place to ensure oversight of medical and surgical care in the shelter (also in MRK 1.2)
- Personnel providing medical care must have the skills and equipment to administer prescribed treatments safely and effectively
- All medical practices and protocols must be developed in consultation with the shelter’s veterinarian
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Section 6: Medical Health

- When a medical concern falls outside of standard protocols or does not respond to treatment as expected, a veterinarian must be consulted.

- Medications and treatments must only be administered by prescription or in accordance with written protocols provided by a veterinarian.

- Medication should only be prescribed when there exists a reasonable presumptive diagnosis, the ability to administer as directed, and a plan to monitor the course of disease, so that success or failure can be determined.

- When drugs are used or dispensed, it must be done in accordance with federal and state regulations.

- A medical history must be requested for all animals presented to the shelter and added to the medical record.

- Shelters must document all medical care rendered to each animal in the medical record.

- A record of the animal’s medical care must be provided in hardcopy or electronic form when the animal leaves the shelter’s care.

- Each animal’s individual health status must be evaluated, documented, and monitored beginning at intake.

6.3 Medical assessment

- Each animal must receive at least a cursory health assessment by trained personnel at intake to check for signs of infectious disease or problems that require emergency medical care.

- A comprehensive physical examination by a veterinarian or trained personnel should also be performed.
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Section 6: Medical Health

- **Ideally**, this physical exam is performed within 24 hours of intake

- Animals with signs of infectious disease at intake should be isolated until determined to be low-risk to the population

- Heightened precautions to prevent disease transmission should be taken when handling more susceptible animals, such as juveniles, older animals, and those with underlying conditions

- Trained personnel must visually observe the health and well-being of every animal at least once every 24 hours

- **Ideally**, daily monitoring observations take place before cleaning, so that food intake and condition of the enclosure, including feces, urine, or vomit, can be noted

- A medical staff member should attend population rounds with representatives from other departments

- At minimum, an examination by trained personnel, including weighing and body condition score, should be repeated on a monthly basis

- A comprehensive exam should be performed at least every 6 months

- Grooming and bathing are essential components of animal care and must be provided when necessary for animal health or comfort

6.4 Essential wellness and preventive care

- Shelters must have a written vaccination protocol developed under the supervision of the shelter's veterinarian
Shelters must properly handle and store vaccines according to manufacturer guidelines.

The location for specific vaccine injections should follow administration site guidelines.

Shelters must have protocols for recognizing, managing, and reporting adverse vaccine reactions, and required treatments must be accessible.

For all core vaccines except rabies, shelters should use modified live virus or recombinant vaccines (MLV) rather than killed products because they provide a faster immune response.

Eligible dogs and cats should be vaccinated against rabies before leaving shelter care.

Rabies vaccines must be administered following state and local guidelines and the most recent Compendium for Animal Rabies Prevention and Control.

Feral cats should receive all core vaccines at the time of spay-neuter, regardless of age.

Adult animals must be vaccinated with core vaccines at or before intake.

Animals housed in shelters should be vaccinated with core vaccines even if ill or pregnant.

Puppies and kittens housed in shelter facilities must begin core vaccinations at or before intake starting at 4 weeks old and must be revaccinated every 2 weeks until 20 weeks old.

Puppies and kittens housed in foster care must begin core vaccinations at or before intake starting at 4 weeks old and must be revaccinated at the veterinarian’s discretion every 2–4 weeks until 20 weeks old.
Animals **should** receive anti-parasite treatments at or before intake and throughout their shelter stay.

An effective parasite control program, including medications and environmental control, **should** be designed with the supervision of a veterinarian.

Feces **should** be promptly removed from animal housing and exercise areas.

Shelters **should** have policies regarding testing, prevention, and management of heartworm disease.

Shelters **should** seek veterinary input when developing a feeding protocol for their animal population.

Food that is consistent with the nutritional needs, health status, and species of the individual animal **must** be provided at least daily.

Food **must** be fresh, palatable, free from contamination, and not shared between enclosures.

Fresh, clean water **must** be available to animals unless there is a medical reason for water to be withheld for a prescribed period of time.

**Ideally,** healthy adult dogs are fed twice daily, and cats are fed multiple small meals or allowed to forage throughout the day.

When managing starved animals or those with unique nutritional needs, veterinary input **must** be sought.

Healthy puppies and kittens as well as lactating and pregnant animals **must** be fed small amounts frequently or have food available through the day (i.e. free-choice).
Food intake **must** be monitored daily.

Each animal **should** be fed to meet individual needs and prevent excessive gain or loss of body weight.

Body condition and hydration status of animals **must** be monitored.

Cohoused animals **should** be monitored during feeding times, so that appetite and conflicts around food may be addressed.

Food and water dishes **must** be safe, sufficient in number, and of adequate size.

Supplies of food **must** be stored in a manner to prevent spoilage or contamination.

Shelters **should** have a protocol for the care of pregnant, nursing, and neonatal animals.

Shelters housing pregnant, nursing, or neonatal animals **must** ensure that additional disease prevention, nutrition, and stress reduction measures are taken.

Any animal observed to be experiencing pain, suffering, or distress; rapidly deteriorating health; life-threatening problems; or suspected zoonotic medical conditions **must** be promptly assessed and managed.

### 6.5 Responding to health concerns

Infectious disease protocols **must** include measures both to minimize transmission and to ensure appropriate care of the infected animals.
The shelter veterinarian should be consulted on all policies and protocols related to the maintenance of medical and behavioral animal health.

Pain must be recognized and treated to alleviate suffering.

Failure to provide treatment for pain is unacceptable.

Protocols for the treatment of painful conditions should be created by a veterinarian.

Pain control provided must be of an appropriate strength and duration to preempt or relieve pain.

When pain can be anticipated, as with surgical procedures, pain control should be provided before the painful event.

The use of controlled drugs must be supervised by a veterinarian as required by regulatory statutes.

Animals must be reassessed frequently to determine the efficacy of pain relief provided.

When the pain relief provided is inadequate, emergency medical care must be provided.

An emergency medical plan must be in place to provide appropriate and timely veterinary care for any animal who is injured, in distress, or showing signs of significant illness.

The emergency medical plan must indicate how staff will recognize and report medical conditions requiring emergency care.

The emergency medical plan should specify whether emergency services are provided on site or through an outside veterinary clinic.
Foster care providers should be given clear instructions about how and when to access emergency and after-hours care.

If the emergency medical plan cannot be implemented or fails to relieve suffering, the animal should be euthanized.

The legal status of the animal must not prevent treatment to relieve suffering.

Shelters must have a means of isolating contagious animals.

Animals with a suspected infectious disease must be isolated until diagnosis by a veterinarian or treatment determines them to be a low risk to the general population.

Allowing animals with severe infectious disease to remain in the general population is unacceptable.

When the number of cases increases above typical for the shelter, when signs are severe or not responding to treatment as expected, and when a zoonotic condition is suspected, diagnosis or identification of specific pathogens should be sought.

When an animal dies from unexplained causes, a necropsy should be performed.

During an outbreak, a risk assessment to identify potentially exposed animals must be performed based on the confirmed or suspected pathogen.

During an outbreak, physical separation must be established between sick, exposed, at-risk, and unexposed animals or groups of animals.

Animal handling and foot traffic should be limited during disease outbreaks.
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Section 6: Medical Health

- During an outbreak, all at-risk animals should be monitored for signs of disease at least once a day
- Animal care staff should be educated on the clinical signs of the disease of concern and on the process for alerting medical staff
- Shelters should avoid returning recovered or exposed animals to the general population, while there is significant risk that they may transmit disease to other animals
- Shelters must also ensure federal, state, and local laws are followed concerning reportable diseases
- As part of the outbreak response, relevant protocols should be reviewed to ensure control measures are effective against the suspected pathogen
- In the rare instance that depopulation is considered, an experienced shelter veterinarian must be consulted beforehand

6.6 Population health surveillance
- Shelters should track animal population health trends (e.g. morbidity and mortality) and develop targeted strategies to address concerns

6.7 Rehoming considerations
- Adopters or others receiving animals from shelters should be informed about any disease or condition known to be present at the time of outcome
- Shelters should have and disclose policies that specify whether or not they provide care for medical conditions that are ongoing or occur after adoption
Section 7: Shelter Surgery

7.1 General

❑ It is **unacceptable** for organizations to allow shelter animals to breed

❑ When animals that are already pregnant are admitted, shelters **should** prevent birth from occurring in the facility, instead seeking alternatives such as spay or foster care

7.2 Spay-Neuter

❑ Shelters **should** sterilize all animals before adoption or ensure that they will be sterilized after their outcome

❑ Shelters performing post-adoption sterilization **must** have a system for keeping track of unaltered animals and ensuring that surgery is completed in a timely manner

❑ The final decision regarding acceptance of any patient for surgery **must** be made by a veterinarian based on a physical examination, available medical history, and capacity of the surgical team

❑ Granting an exemption from a spay-neuter requirement **should** only occur when performing the procedure puts the patient at significant risk

❑ When considering sterilizing patients with medical conditions, veterinarians **must** weigh the benefits and risks to that animal, others receiving surgery that day, the shelter population, and the community population

❑ Shelters that perform their own sterilization surgeries **must** follow the current ASV Veterinary Medical Care Guidelines for Spay-Neuter Programs,
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which includes establishing policies and protocols for managing related complications and emergencies

☒ Sterilization status should be documented for each animal

7.3 Other Surgeries

☒ All surgical practices and protocols must be developed in consultation with a veterinarian familiar with the sheltering organization, its population, and facilities

☒ Non-sterilization surgeries performed in the shelter setting, including dentistry, must adhere to the ASV Spay-Neuter Guidelines regarding surgical suite, anesthesia, analgesia, and principles of sterility related to instrumentation and surgical practice

☒ Ideally, shelters without the capacity to perform these surgeries partner with outside organizations, specialists, or transport partners to obtain necessary care

☒ following orthopedic procedures, patients must receive appropriate rehabilitation and pain management

☒ Ideally, orthopedic patients requiring extended care are not housed long term at the shelter

☒ Medical records should document the dental exam, diagnostics, and treatments performed

☒ Non-anesthetic dental probing, scaling, and polishing is unacceptable
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- **Ideally**, intraoral radiographs are taken in patients undergoing dental surgery
- Dental procedures, including radiology, **must** be performed by appropriately trained and credentialed individuals based on state and local regulations
Section 8: Forensics

8.2 Laws and regulations

☐ Shelters, veterinarians, and humane investigators must be familiar with animal abuse and neglect laws in their jurisdiction and know how to report suspected cases

☐ Veterinarians must be aware of their state’s animal cruelty reporting requirements and liability protection statutes

8.3 Forensic investigation policies

☐ Shelters should have a policy that outlines the scope of forensic services provided

☐ Those investigating a suspected case of animal abuse or neglect must first ensure that they have the legal right (e.g. seizure, warrant, or owner consent) to examine, treat, and document the condition of the animal or scene

8.4 The veterinary forensic evaluation

☐ The veterinarian should have access to information about the scene, evidence collected, allegations, and known or reported history

☐ Evaluation and opinion formation for forensic purposes must be conducted by a veterinarian

☐ A key part of forensic evaluation is a forensic physical exam or necropsy with documentation, for which shelters should have standard protocols

☐ Forensic physical examinations and diagnostics must be conducted in a timely manner to preserve evidence
Photographs should be of sufficient quality to serve as evidence, and they should be managed to ensure proof of origin and integrity.

8.5 Managing evidence

- Humane investigators and veterinarians involved in investigating animal abuse and neglect must be prepared to maintain chain of custody protocols.
- Monitoring and response to ongoing treatment should be documented as evidence throughout recovery.

8.6 Training

- Veterinarians routinely involved in the investigation of animal cruelty should complete additional training in veterinary forensics or criminal justice.
Section 9: Behavior and Mental Well-being

9.1 General

- Shelters **must** provide behavioral care that considers the needs of individual animals as well as conditions experienced by the entire population.

- All shelter personnel **should** receive training about common behavior concerns at a level of detail appropriate to their position and job tasks.

- All relevant personnel **must** be trained in animal body language, objectively describing behavior, and how to interpret and respond to animal body language and behavior.

9.2 Stress and welfare

- Shelters **must** have comprehensive protocols in place for recognizing and mitigating stress and associated negative emotions including fear, anxiety, and frustration.

- Animals **must** be monitored daily in order to detect trends or changes in well-being and respond to their behavioral needs.

- Actions **must** be taken to respond promptly to behavioral needs that impact welfare.

- Any animal experiencing mental suffering, distress, or behavioral deterioration **must** be urgently assessed and treated.

- Alternative housing and placement options **must** be urgently pursued for distressed animals not responding to behavioral care.

- Distressed animals not responding to behavioral care **should** be humanely euthanized when other options are not feasible or available.
9.3 Intake

- Personnel **must** collect a thorough behavioral history at or near the time of intake, including the reasons the animal was brought to the shelter and previously observed behavior.
- Available information about aggressive behavior **must** be recorded and include an objective description of the animal’s actions and the circumstances.
- Personnel **must** use the available history to tailor animal care, meet the needs of individuals, and protect the safety and welfare of people and animals.
- Shelters **must** work to minimize stress at the point of initial contact and throughout an animal’s stay.
- Assessment of an animal’s behavior **must** begin at the time of first contact or intake and continue throughout their stay.

9.4 Environmental management

- Shelters **must** have policies and protocols for managing the environment in a manner that supports animal mental health and well-being.
- Feral animals **must** not be housed in the shelter except for a brief period of time related to the delivery of veterinary care.
- Prey species **must** be housed away from predatory species at all times.
- Cats **should** not be handled or housed within spatial, visual, or auditory range of dogs.
Animals **should** be provided with a consistent and structured environment that minimizes reassignment of enclosures, caregivers, and schedules.

### 9.5 Enrichment and socialization

- **Enrichment must** be given the same significance as other components of animal care, such as nutrition and medical care, and is never considered optional.

- Positive social interaction, mental stimulation, and physical activity that meets each animal’s needs **must** be provided daily, outside of the activities of feeding and cleaning.

- Dogs **must** be provided with daily opportunities for activity outside of their kennels, unless doing so creates an unmanageable risk to the health or safety of people or other animals.

- Cats **must** be offered regular opportunities to express natural behaviors, including physical activity and exploration.

- Shelters **should** provide all animals with opportunities to engage in healthy social contact with people and other animals of the same species.

- Shelters **should** optimize human and animal safety by limiting the number of dogs in playgroups based on competency of personnel, play yard size, individual dog behavior, and shelter resources.

- A broad range of positive socialization experiences **must** be provided to puppies and kittens.

- While in the shelter’s care, young puppies and kittens **should** be housed with their littermates and their mother.
9.6 Behavior assessment

- It is unacceptable to expose cats to dogs in the shelter as a test to determine if the dog can safely live with cats.

- An overall behavior assessment must collect and consider all the information about the animal, including history and behaviors observed during all shelter and foster interactions.

- Through the process of behavior assessment, shelter personnel must strive to learn as much as possible about each animal to aid in optimizing their care, pathway planning, outcome decisions, and adoption matching and counseling.

- Behavior that requires intervention or affects how an animal can be safely handled must be entered into the animal’s record and communicated with shelter personnel promptly.

- When animals are experiencing high levels of stress or fear when interacting with people or other animals, they must not be forced to interact.

- Interactions with animals must not intentionally or carelessly provoke negative emotional states or undesirable behavior.

9.7 Responding to behavior or welfare concerns

- Behavior care and outcome decisions must be based on current animal behavior science.

- Animal training must be based on Least Intrusive Minimally Aversive principles and the Humane Hierarchy of Behavior Change in accordance with current professional guidelines.

- Except when safety is an imminent concern, personnel should not use anything other than mildly aversive training methods.
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- **Ideally**, animal trainers and behavior consultants are certified or have graduated from a program that assesses knowledge and skills
- Behavior modification protocols **must** incorporate scientific principles of animal behavior and learning
- It is **unacceptable** to use physical force as punishment to modify animal behavior
- Before implementing behavior modification, shelters **must** ensure they have the necessary resources to support such plans
- Behavior medications **must** be strongly considered to address welfare concerns related to emotional health
- Behavioral health concerns **must** be objectively assessed and diagnosed to ensure that medications are prescribed when indicated, with clear goals for treatment and outcome
- Behavior medications **must** only be administered under the advice of or in accordance with written protocols provided by a veterinarian, and all drugs **must** be dispensed in accordance with federal and state regulations
- When behavior medication is prescribed, it **must** be part of a comprehensive plan to help address the animal’s condition
- For all animals staying in the shelter more than a few days, appropriate levels of additional enrichment **must** be provided on a daily basis
- Housing that provides animals with additional space, enrichment, and choice within their enclosure **must** be provided for animals remaining in the shelter long-term
- Animals who are housed long-term **should** be spayed and neutered
Long-term confinement of any animal who cannot be provided with basic care without inducing stress or compromising safety is unacceptable.

9.8 Risk assessment of animals displaying aggressive behavior

- Shelters must promptly respond to behavior that poses a significant safety risk
- Shelters must have protocols and criteria in place that attempt to identify and manage animals at high risk of causing harm to shelter personnel, the public, or other domesticated animals

9.9 Rehoming considerations

- Adopters and foster caregivers must be counseled on providing safe, gradual, and controlled introductions of shelter animals to children and resident pets
- Foster caregivers and prospective adopters should be allowed to adopt or foster without bringing their own animals to the shelter
- A record of the animal’s behavior should be provided in hardcopy or electronic form with the animal at the time of transfer, foster, or adoption
Section 10: Euthanasia

10.1 General

- All animals and people **must** be treated with respect during the euthanasia process
- The euthanasia process **must** be as free from pain, fear, anxiety, and distress as possible
- A veterinarian with appropriate training and expertise for the species involved **should** be consulted when establishing euthanasia protocols
- Agents and methods deemed unacceptable in the AVMA Guidelines for the Euthanasia of Animals are **unacceptable** to use in shelters
- Depopulation **must** only be used as a last resort when all other methods to address the situation have been exhausted

10.2 Euthanasia process

- Euthanasia protocols **must** be created and followed to support consistent euthanasia practices
- Protocols **should** have options to accommodate individual animal’s behavioral and physical needs and ensure human safety
- Prompt intervention **must** occur if complications are noted during the euthanasia process
- It is **unacceptable** to euthanize an animal without confirming that the animal is the individual the shelter intends to euthanize
For stray animals, a final check of local missing animal listings *should* be performed to confirm that there are no matches before performing euthanasia.

Immediately prior to euthanasia, animals *must* be scanned for a microchip, either to confirm known microchip identity or in case previous scanning was incomplete.

It is **unacceptable** to euthanize an animal without verifying legal eligibility.

Death *must* be verified by trained staff before disposing of the animal’s body.

Euthanasia methods *must* be reliable, irreversible, compatible with the species, age, health and behavior of the animal, and ensure a smooth loss of consciousness followed by death.

Pre-euthanasia drugs *must* be administered when their use is necessary for a smooth euthanasia process.

Each animal's weight (actual or assessed) *must* be used to calculate adequate drug doses.

Unless an animal has been verified as unconscious, intra-organ injections are **unacceptable**.

Gunshot is **unacceptable** as a routine method for euthanasia of dogs, cats, or other small companion animals.

Inhalation of carbon monoxide is an **unacceptable** method of euthanasia for companion animals in shelters.
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10.3 Environment and equipment

- A separate room **should** be designated for euthanasia in a quiet area away from the main pattern of foot traffic.
- The room used for euthanasia **should** be well lit and large enough to accommodate the necessary people and equipment.
- Only people with defined roles in the euthanasia process **should** be in the room when the procedure is being performed.
- The euthanasia environment **must** be set up to minimize discomfort and distress and accommodate the individual animal’s behavioral and physical needs.
- All equipment used during the euthanasia process **must** be easily accessible and in good working order to ensure a safe and humane euthanasia process.
- A new needle **must** be used to administer euthanasia drugs to each animal.
- Appropriate personal protective equipment **must** be utilized during the euthanasia process to avoid injury to personnel or transmission of disease.
- Euthanasia equipment and surfaces **should** be cleaned after each use.
- The entire euthanasia room **should** be sanitized regularly.
- All drugs used during the euthanasia process **must** be stored, administered, and documented in accordance with federal and state regulations.
- Storage and final disposal of animal remains **must** be in compliance with all applicable laws and regulations.
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- It is **unacceptable** for shelters to euthanize an animal solely for research or educational purposes

10.4 Personnel considerations

- Personnel performing euthanasia **must** be appropriately trained and maintain all necessary certification as required by state or local regulations
- The safety and well-being of personnel **must** be incorporated into euthanasia protocols and policy
- Systems **must** be in place to prevent, recognize, and address fatigue and distress related to euthanasia in shelter personnel
- Euthanasia decision-making **must** occur through a transparent process that lessens the decision-making burden on any one individual
Section 11: Animal Transport and Relocation Programs

11.1 General

- Decision-making in relocation programs **must** prioritize decreasing length of stay
- It is **unacceptable** to transport animals when the transport itself is likely to be harmful to their immediate or long-term health or welfare

11.2 Responsibilities for relocation programs

- All participants in the relocation process **must** follow federal regulations for animal transportation as well as local or state regulations for both source and destination locations
- For commercial air transport, organizations **must** consult with the airline for specific requirements
- Emergency plans **must** be made prior to transport
- Written agreements between all parties involved in the relocation program **should** be developed and reviewed regularly
- Animal health and behavior **must** be accurately described and communicated between relocation partners
- A contact person **must** be identified at each transfer point
- A record of each animal’s travel from source to destination **must** be kept
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- Public health and safety **must** be considered in the design of relocation programs and protocols
- Organizations engaging in relocation **should** track standard metrics for transported animals
- Unless there are extenuating circumstances, animals **should** not be returned to the source even in the event of unexpected medical or behavioral concerns

11.3 Responsibilities at the source

- All eligible animals within a source population **must** be vaccinated at or before intake
- **Ideally**, all dogs 6 months of age and older are tested for heartworm disease prior to relocation
- The animal’s health and behavior records **must** be shared with the destination
- When required, a valid health certificate (CVI) and proof of rabies vaccination **must** accompany each animal
- Animals **must** be examined by trained staff within 24 hours prior to travel and deemed fit for transport
- A veterinarian **must** confirm that animals with medical concerns or recovering from surgery are fit for transport
- Animals being transported **must** be provided with visual identification
- **Ideally**, animals are microchipped before transport
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Section 11: Animal Transport and Relocation Programs

- Each primary transport enclosure must be marked with each animal’s unique identifier
- A copy of the manifest for each transport, identifying each animal on board, must be maintained in an accessible location separate from the vehicle itself

11.4 Responsibilities during transport

- Primary transport enclosures must be large enough for animals to stand and sit erect, turn around normally while standing, and lie in a natural position without lying on another animal
- Unfamiliar animals must not be transported together in the same primary enclosure
- Ideally, animals are introduced and acclimated to the transport carrier prior to transport in order to reduce associated stress
- The primary enclosure must not have sharp edges, and the flooring must prevent injury, discomfort, and leakage of fluids into other enclosures
- Absorbent bedding must be provided during transport unless it poses a risk to an individual animal’s health
- In a transport vehicle, kennels must be positioned in a manner that ensures adequate airflow and temperature regulation within each primary enclosure
- Primary enclosures must be loaded in a manner that minimizes animal stress or discomfort while allowing direct visual observation
- Primary enclosures must be secured to prevent movement within the vehicle, and doors secured to prevent accidental opening
- In an emergency, operators must be able to swiftly remove animals
During transport, cats should be provided with a hiding space or visual barrier that allows ventilation and monitoring.

Ideally, all cats are provided with access to a litter box during long-distance transport.

Cats and dogs are ideally transported in separate vehicles.

If cats are transported in a vehicle with dogs, they must be housed in a physically separate space with special consideration given to visual and noise barriers.

Kittens or puppies less than 8 weeks old should be transported with their mother when possible and should be transported in a single enclosure large enough for her to lie down with legs extended for comfort and to facilitate nursing.

Behavior medications should be considered when an animal is likely to have emotional welfare concerns during transport.

It is unacceptable for a relocation program to transport animals that are sedated or anesthetized to the point that they are unable to swallow, walk, or thermoregulate.

Department of Transportation (DOT) regulations promote the safety of drivers and those around them and should be followed even when transporters are not licensed or subject to them.

Vehicle operators must be licensed and trained in use of the specific vehicle they will be operating.

The temperature of the animal compartment in the vehicle must be monitored, and action taken if low or high temperatures occur.
For animal safety, ambient temperature **must** be maintained above 45°F (7.2°C) and below 85°F (29.5°C), and humidity maintained between 30 and 70%

To ensure comfortable conditions, ambient temperature **should** be maintained between 64°F (18°C) and 80°F (26.6°C)

Operators **must** ensure that air in the animal compartment is fresh and free of vehicle exhaust fumes

To detect poor air quality, carbon monoxide detectors **should** be placed in the animal compartment

Vehicle drivers or animal attendants **must** have sufficient training in animal health, welfare, and safety to recognize and respond to animal needs during transport

For transports longer than 4 hours, two drivers **should** be present to monitor and reload animals

At minimum, every 4 hours, the vehicle **must** be stopped, and a visual observation of each animal **must** be performed

For juvenile animals, a small meal **should** be given no more than 4 hours before departure, and small amounts of food **should** be provided every 4 hours throughout transport

For both adults and juveniles, water **must** be provided at least every 4 hours during observation stops

Food **must** be provided at least every 24 hours for adult animals

During transport, driving time to an intermediate or final destination **should** not exceed 12 hours per day, and loading and unloading of animals **should** not exceed 1 hour each
Transport that exceeds 12 hours of travel must be broken up with an overnight rest stop at an intermediary location.

Total transport time from the source to a final destination should include no more than 28 hours confined to a transport vehicle, including loading and unloading time and excluding an overnight rest stop.

Dogs must be walked or exercised on trips that require an overnight stay.

Animals should never be left unattended in a transport vehicle unless sufficient monitoring capabilities are in place, and attendants are able to immediately respond to animal care needs.

Cats must have access to a litter box if being housed overnight.

If transporting animals from different sources on separate vehicles is not possible, animals from each source are ideally housed in separate compartments.

Whenever animals from different sources are held in the same vehicle or facility, protocols that minimize exposure and cross-contamination between populations must be in place.

11.5 Responsibilities at the destination

The destination shelter must have sufficient trained personnel ready to receive and evaluate animals upon arrival.

Each animal admitted through a relocation program must receive a brief health assessment at intake.

Veterinary services must be accessible upon arrival.
The destination facility **must** have adequate housing prepared for the arriving animals without displacing the existing population.

Destination shelters **should** maintain an active working knowledge of the source organization, which includes familiarity with the common diseases, preventive healthcare, and biosecurity practices at each source organization.
Section 12: Disaster Response

12.1 General

- All shelters should be prepared to respond when directly affected by a disaster

- Deviations from these Guidelines as the result of a disaster should be as brief and as minimal as possible

12.2 Mitigation

- Shelters should take steps to anticipate, detect, and mitigate the impacts of disasters

- Shelters must identify and plan for reasonably anticipated disasters, including those most likely to occur in their geographic area

12.3 Preparedness

- Every sheltering organization must have a written plan that outlines the actions the shelter will take in response to likely emergency scenarios

- The written disaster response plan should be accessible by all personnel, used to train staff during disaster drills, and regularly reviewed and updated

- Disaster response plans must detail how shelters will provide essential services to all animals currently in care, including those in foster homes

- Plans should detail how necessary supplies will be acquired, and include evacuation strategies in the event that supply chains or utilities (e.g. water, food, and heating or cooling) are disrupted

- Emergency plans should include a process for preemptively relocating the shelter’s population in advance of the event when appropriate
Since the risk of zoonotic disease spread may increase during disasters, plans must include steps to control transmission

Shelter disaster plans should indicate the personnel structure necessary to provide essential animal care services during a disaster

Training specific to the roles personnel will fill during a disaster, including safety considerations, should be provided before starting the work

Individuals participating in multi-agency disaster responses should complete National Response Framework (NRF) and National Incident Management System (NIMS) training, including Incident Command System (ICS) modules

Disaster planning should include provisions to address the physical and mental stress experienced by personnel, community members, and responders

Human safety must be the first priority of any disaster response plan

If a shelter is part of an established disaster response team, a written plan should specify its particular role and the other organizations the shelter will be working with

Shelters responding to disasters as part of a coordinated response should draft memoranda of understanding (MOUs) with their governmental and nongovernmental response partners

12.4 Response

Response plans should be followed as soon as a disaster is anticipated or has occurred

When indicated, an ICS should be initiated rapidly to designate and maintain a clear chain of command and communication infrastructure
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☐ Each animal admitted during a disaster must receive at least a cursory assessment at intake to check for signs of infectious disease, any conditions that require emergency medical care, and exposure to hazards

☐ Animals admitted during a disaster should be given core vaccines, including rabies and parasite control

☐ Animals must be decontaminated when applicable

☐ Shelters must make concerted efforts to reunify pets displaced by a disaster

☐ Shelters outside of the disaster area accepting impacted animals must be able to provide appropriate care and outcomes for their existing population before volunteering to accept displaced animals

☐ Shelters should have a system for managing physical and monetary donations during disaster response and recovery

☐ Shelters should track resources used during disaster response and recovery

☐ Shelters must anticipate the arrival of self-deployed volunteers during a disaster and must address how these individuals will or will not be used

☐ Veterinary professionals must only provide medical treatment or services when they hold a license to practice in that jurisdiction or are exempt from this requirement

☐ Even during a disaster, oversight of use and storage of controlled substances must remain with the individual identified as the responsible party on the DEA license for that premise
12.5 Recovery

If damage to the shelter building, grounds, or local infrastructure is a concern, a full safety assessment must be made prior to resuming normal activities in that area or facility.

Shelters must tailor placement efforts when their community is impacted by a disaster.

Shelters should provide additional services that support keeping pets with their owners in the time frame immediately following the disaster.

Following a disaster, shelters should debrief and evaluate their planning, response, and recovery processes, so that adjustments to their plans can be made.
Section 13: Public Health

13.1 General

- Both within their facilities and in the larger community they serve, shelters **must** take precautions to protect the health and safety of animals, people, and the environment.

13.2 Personal protective measures

- In order to protect personnel from exposure to workplace hazards, shelters **must** provide PPE such as gloves, smocks, goggles, face masks, face shields, shoe covers, and ear plugs.
- PPE **must** be available in types and sizes to accommodate all personnel, including those with special concerns such as latex allergies.
- Personnel **should** wear gloves when handling animal waste or fluids.
- Personnel **should** wash hands frequently, especially after handling animals, and after removing PPE.
- Personnel **should** wash their hands before eating, smoking, or touching their face.
- Personnel and visitors **should** be discouraged from eating, drinking, or bringing pacifiers, teething toys, or baby bottles into animal housing areas.
- Animals **should** not be present in areas designated for human food preparation or consumption.
13.3 Workplace hazards

- Shelters must comply with local, state, and federal health and safety regulations regarding chemical, biological, and physical hazards in the workplace.

- When working with hazardous chemicals, PPE such as eye protection or respirator face masks must be worn as indicated by the product label.

- Shelters must promptly dispose of biological waste (animal waste, animal tissues, and carcasses) in a manner that follows state and local regulations.

- Shelters must follow regulatory guidelines for the disposal of unused medications.

- Controlled medications must be disposed of or wasted in a manner that follows regulations, prevents environmental contamination, and prevents human diversion.

- Smoking must not be allowed in animal shelters.

- Shelters must follow industry guidelines for the proper disposal of sharps.

- Supervisors must advise persons injured at the shelter or by a shelter animal to seek medical care.

- Both environmental and behavioral noise abatement strategies should be used in animal housing and holding areas.

- Hearing protection must be worn by employees working in environments where volume is at or above 100 dB cumulatively for 15 minutes.

- When volumes exceed 85 dB at any point in time, hearing protection should be worn.
The public **must** be prevented from having contact with animals who pose a high risk of biting by clearly marking and restricting access to areas where these animals are held

Shelters **must** consider public safety when making outcome decisions regarding animals who pose a risk of serious harm

A record of all known bite incidents **must** be provided in hardcopy or electronic form to adopters, fosters, or transfer partners

Shelters **must** follow regulations for reporting animal bites to humans

At intake, shelter personnel **must** ask owners or finders if the animal being admitted has bitten anyone within the past 10 days

Animals who have bitten a human **must** be managed according to state and local regulations, including quarantine of the animal or euthanasia for rabies testing when required

Personnel who routinely work with animals **should** receive pre-exposure vaccinations against rabies in accordance with the current recommendations of the Advisory Committee on Immunization Practices

At intake, shelter personnel **must** ask owners and finders of incoming animals about recent wildlife bites or exposures

Shelter personnel **should** look for and document evidence of wounds that could indicate a potential rabies exposure

Animals who have potentially been exposed to rabies **must** be managed with guidance from the NASPHV Rabies Compendium, and in accordance with state and local health regulations

Shelters **should** vaccinate all animals eligible for rabies vaccine prior to leaving the shelter
Shelters **should** have a protocol for responding to zoonotic diseases, including communication regarding potential exposures.

Access to animals with known zoonotic conditions **should** be limited to those necessary to provide appropriate care.

Enclosures of animals with suspected zoonotic disease **must** be clearly marked to indicate the condition and necessary precautions, such as recommended PPE, handling, and sanitation practices.

Shelters **must** disclose the risk of known zoonotic disease to personnel, transport partners, foster care providers, and adopters.

Routinely using antimicrobials to prevent infection in healthy animals is **unacceptable**.

Antimicrobial use **must** be tailored to appropriate clinical conditions, used judiciously, and evaluated for therapeutic effect.

Animal shelters **should** monitor their populations for signs of unusual or severe disease.

Animal population management **should** be used to reduce the risk of developing novel or emerging pathogens.

**13.4 Human well-being**

Shelters **should** strive to become workplaces that emphasize staff wellness through a positive organizational culture, fair pay, hours and expectations, provisions for self-care, and ready access to mental health support systems without repercussions.

When mental health concerns are communicated or observed, personnel **should** be encouraged to seek professional help.