

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

2022 ASV Guidelines Standards of Care in Animal Shelters How to use this document

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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 <u>Second Edition of the ASV</u> <u>Guidelines for Standards of Care in Animal Shelters</u>, 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.



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 1: Management and Recordkeeping

1.1 Ger	neral
	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 Ma	nagement 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 Est	ablishment 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



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1.4 Training		
	Personnel training \boldsymbol{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



2022 ASV Guidelines Standards of Care in Animal Shelters Section 2. Population Management

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 De	termining 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		



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2.3	Operating	within	Capacity	for Care	2
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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



2022 ASV Guidelines Standards of Care in Animal Shelters 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 Mo	nitoring 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



2022 ASV Guidelines Standards of Care in Animal Shelters Section 3. Animal Handling

Section 3. Animal Handling

3.1 Ger	neral
	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 Res	traint
	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 Har	ndling 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



2022 ASV Guidelines Standards of Care in Animal Shelters Section 3. Animal Handling

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



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Section 4: Facilities

4.1 Ge	neral	
	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	
1.2 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	



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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 ft 2 (0.75 m 2) of floor space is ${\bf unacceptable}$
Ideally, individual cat housing provides 11 ft ² (1.0 m ²) 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 (1.2m) 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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	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 ft 2 (1.7 m 2) 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



2022 ASV Guidelines Standards of Care in Animal Shelters Section 4: Facilities

	Shelters must have a means of isolating infectious animals
4.4 Isol	ation 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 \boldsymbol{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 Sur	faces 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 Hea	ating, 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	
1.7 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	
1.8 Lighting		
	Lighting should promote a safe working environment and effective observation of animals and the enclosure	



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	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 Eni	richment spaces
	All enclosed outdoor spaces should have double door entry points to keep animals safe and reduce the risk of escape
4.10 In	take 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 D	rop boxes
	The use of 'drop boxes' where live animals are placed in unmonitored receptacles for later intake is unacceptable



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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



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Section 5: Sanitation

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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	Sanitation practices \boldsymbol{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 Rec	ducing 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



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	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 Oth	ner 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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Section 5: Sanitation

	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 Wil	dlife, rodent & insect control
	All food must be protected from wildlife, rodents, and insects
	Rodent and insect control solutions must be safe, humane, and effective



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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 \boldsymbol{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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	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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	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	



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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



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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)



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	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	



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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



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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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	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 Reh	oming 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	



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 7: Shelter Surgery

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 Spa	y-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,



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 7: Shelter Surgery

	which includes establishing policies and protocols for managing related complications and emergencies
	Sterilization status should be documented for each animal
7.3 Oth	ner 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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 7: Shelter Surgery

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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 8: Forensics

Section 8: Forensics

8.2 Lav	vs 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 For	ensic 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	e 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



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evidence throughout recovery

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

8.6 Training

Veterinarians routinely involved in the investigation of animal cruelty **should** complete additional training in veterinary forensics or criminal justice



2022 ASV Guidelines Standards of Care in Animal Shelters Section 9: Behavior and Mental Well-being

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 Stre	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		



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 9: Behavior and Mental Well-being

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 Env	vironmental 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

2022 ASV Guidelines Standards of Care in Animal Shelters Section 9: Behavior and Mental Well-being

	Animals should be provided with a consistent and structured environment that minimizes reassignment of enclosures, caregivers, and schedules
9.5 Enr	ichment 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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 9: Behavior and Mental Well-being

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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 9: Behavior and Mental Well-being

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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 9: Behavior and Mental Well-being

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



2022 ASV Guidelines Standards of Care in Animal Shelters

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 Eu	uthanasia 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	



2022 ASV Guidelines Standards of Care in Animal Shelters

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



2022 ASV Guidelines Standards of Care in Animal Shelters

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



2022 ASV Guidelines Standards of Care in Animal Shelters

	It is unacceptable for shelters to euthanize an animal solely for research or educational purposes
10.4 Pe	ersonnel 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



2022 ASV Guidelines Standards of Care in Animal Shelters Section 11: Animal Transport and Relocation Programs

Section 11: Animal Transport and Relocation Programs

11.1 G	eneral
	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 Re	esponsibilities 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



	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 Re	esponsibilities 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



	Each primary transport enclosure $\displaystyle {must}$ 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 Re	esponsibilities 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 R€	esponsibilities 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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 12: Disaster Response

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12.1 G	eneral
	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 M	itigation
	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 Pr	reparedness
	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



2022 ASV Guidelines Standards of Care in Animal Shelters

	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 ${\bf should}$ 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			



2022 ASV Guidelines Standards of Care in Animal Shelters

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



2022 ASV Guidelines Standards of Care in Animal Shelters

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.o Ke	ecovery
	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



2022 ASV Guidelines Standards of Care in Animal Shelters

Section 13: Public Health

13.1 G	eneral
	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 P€	ersonal 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



2022 ASV Guidelines Standards of Care in Animal Shelters

13.3 Workplace hazard	1	L.	3		3		V	١	/	C)	r	k	r)	la	Э	C	e	,	h	ĉ	1	Z	а		(d		9	
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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



2022 ASV Guidelines Standards of Care in Animal Shelters

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



2022 ASV Guidelines Standards of Care in Animal Shelters

	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 Hu	uman 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

