Sandra Newbury, DVM
Koret Shelter Medicine Program
Center for Companion Animal Health
University of California, Davis

www.sheltermedicine.com

www.facebook.com/sheltermedicine
Daily Rounds:
How to Decrease Length of Stay

“Just the Way to Start Your Day?”
Daily Rounds
Primary Goals

- Excellent quality of care

- Minimize length of stay through efficient practices

- Maximize life saving capacity!
Why efficiency?

Improved Care  Efficiency
Who benefits?

or

Foster homes

or

Rescues
And…

“Shelley”
What can I do for you today?

- Who are you?
- How are you?
- Are you where you need to be?
- Do you need something today?
- Do you need something scheduled?
Who does daily rounds?

- Shelter staff
- Shelter veterinarian
- Shelter / Kennel manager
- Field services supervisor
- Shelter director
- Adoptions coordinator
- Foster coordinator
- Foster parent
- Other volunteers
Who does Daily Rounds?

- Veterinary involvement in population management is ideal
- Knowledge, training, and authority to make decisions
- Support staff for follow up
- System to communicate and follow through on decisions and required actions
- Accountability
Rounds Team

- Someone from each department
- More than one person
- Day to day consistency
- Shared responsibility
Dane County Humane Society Rounds Team

- Animal Care
- Animal Medical Services
- Adoptions
- Veterinarian
Hillsborough Co – HART

- Humane And Responsible Team
  - HART is composed of 2 employees of the following sections:
  - Shelter, Field, Veterinary Services and Volunteer Section.
  - The manager of each section designates which employees will serve in the HART.
  - The daily HART walks will require one representative from each section but scheduled HART meetings will require two representatives of each section.
  - If a section has no representative for a daily walk, the section foregoes the walks but will support the HART decisions for that day.
  - Vet services will have a third back-up for rescue purposes.
  - The HART decisions are final.
Daily Rounds: Goals

- Early recognition of problems or needs
- Prompt animal evaluation and movement

Use of resources

Improved life saving capacity

Capacity for care

Staff and animal stress

Crowding

Illness and disease

Length of stay
Daily Rounds: Priorities

Timely Care

- Clear and **specific decisions** made on or before due out date (end of holding period)
- Any follow up must have **clear actions** defined with deadlines
- Deadlines for **follow up** must be within a short period following the due out date
Early identification of problems

- Welfare
- Disease control
- Staff/Public Safety
- Animal Safety
- Intervention planning
- Need to go home
Animal Care Days and Length of Stay

- Effect on individual animal health
- Effect on daily population
- Effect on pressure to comingle
- Foster rescue program capacity to receive/rescue
Risk of Problems

Time in Shelter

Daily Rounds Basic Checklist

✓ Census
✓ Identification
✓ Paperwork
✓ Wellbeing
  ✓ Health
  ✓ Behavior
✓ Housing
  ✓ Area
  ✓ Type
✓ Current needs
✓ Pathway
✓ Dates and schedule
Daily Census Audit

- “Inventory” auditing system
- Check all locations
- All accounted for in shelter
- All accounted for in the computer
- Start with intake area
Animal Identification

Neckbands or collars on all animals
Cage cards on all kennels
Cage Cards and Animal Information

- **Kennel No:** LFB142
- **Animal No:** A198772
- **Name:** UNKNOWN
- **Color:** WHITE & BROWN
- **Breed:** PIT BULL
- **Sex:** FEMALE
- **Age:** 3 YR 0 MO
- **Intake Date:** 01/23/2007
- **Review Date:** 01/26/2007
- **Intake Type:** STRAY / FIELD
- **Intake By:** 1901
- **Intake Time:** 10:05 pm

**State:** IN ESTRUS
# DCHS Cage Cards

<table>
<thead>
<tr>
<th>Name</th>
<th>#</th>
<th>Admitted Date</th>
<th>Neutered</th>
<th>Spayed</th>
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<td>Color</td>
<td>Age</td>
<td>Sex</td>
<td>Breed/Type</td>
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<tr>
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<td>Surrendered / Return</td>
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<tr>
<td>Culture: Woods: + / -</td>
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<tr>
<td>BC: Y / N ____________ (date of bite)</td>
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<tr>
<td>Admitted:</td>
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<td>Holds: Finder’s / Last Med OK</td>
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<tr>
<td>Weight: kgs/lbs</td>
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<tr>
<td>Front</td>
<td>Four</td>
<td>Diet</td>
<td></td>
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<tr>
<td>Microchip: + / -</td>
<td>Letter Sent:</td>
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<td>NAME</td>
<td>#A2053 8552</td>
<td>ADMITTED DATE</td>
<td>NEUTERED</td>
<td>SPAY</td>
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<tr>
<td>COLOR</td>
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<td>AGE</td>
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<td>BREED/TYOE</td>
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<td>Main St, Deforest</td>
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<td>SURRENDERED / RETURN</td>
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<td>CULTURED</td>
<td>1/23 Woods: + 0</td>
<td>HAIRLOSS: Ears</td>
<td>BC: Y/N</td>
<td>Holder / Finder / Last Name Med OK</td>
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<td>1/23</td>
<td>TESTED</td>
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<tr>
<td>WEIGHT</td>
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<td>DECLAWED</td>
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<td>MICROCHIP</td>
<td>+ 0</td>
<td>LETTER SENT</td>
<td>7/25</td>
<td>WSGF/M</td>
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</table>
Facilitating Daily Rounds: Daily Monitoring

- Daily monitoring supports animal care and decision making
Group housing rounds

- Monitor during feeding time / enrichment feeding
  - Appetite?
  - Conflicts around food?

- Hands on / out of hiding

- Specific checks

- Weekly weight checks
Animal observation
Every animal, every day

- Illness?
- Stress?
- Appearance?
- Appetite?
- Attitude to passers by?
- Health or behavioral red flags
Infectious disease red flags

- Bloody or severe diarrhea
- Vomit or diarrhea with other signs of disease
- Neurological signs
  - Including eyes
- Oral ulcers with fever or swelling
- Circular patches of hair loss
- Dead in cage – always check for parvo/panleukopenia

http://www.aspcapro.org/stay
http://www.sheltermedicine.com/node/303
Behavioral red flags

- Trembling/shaking
- Frozen or tense/stiff body posture or cowering into corners/gutters etc. for more than 1 hour (e.g. see below)
- Pressing or facing into the corner of the enclosure (e.g. see below)
- Constant or frequent growling, hissing, or lunging at the front of the cage
- Failure to eat for more than 24 hours, with medical causes ruled out
- Efforts to escape to the point of self-injury, e.g. blood on mouth or paws from chewing or clawing to escape
- Severely messing up or destroying cage (e.g. overturned litterbox, food or water dishes; feces and urine smeared everywhere)
- Eliminating outside the litter box within the shelter environment (as opposed to history of inappropriate elimination)
- Stereotypic behaviors such as repetitive pacing, spinning or lunging
- For group housed animals (including littermates and “bonded pairs”)
- Food guarding or inability to access guarded food within the enclosure
- Attacking or being attacked by another animal within the enclosure

Emergency red flags

- Fever > 106.5 or temperature < 99
- Severe dehydration
- Severe lethargy/non-responsive to stimuli
- Trouble breathing
- Seizures
- Blue, very pale or brick red gums
- Recent history of being hit by a car
- Acute severe lameness or injury with bone exposed
- Major wounds or any fresh wound requiring sutures
- Injury to the eye
- Bleeding or extensive, easy bruising
- Suddenly swollen abdomen
- Cat with possible urinary blockage (unable to urinate or straining to urinate)
- Pregnant animal in distress
- Evidence of pain, such as restlessness, vocalizing, panting, or failure to bear weight on a limb, or any condition that would be expected to be painful

Every animal, every 2 weeks (at least)

- Out of the kennel
- Hands on interaction
- In for check from foster care?
- Weight loss/gain
- Sores / matts
- General health
- General behavior
- Overall well being
Longer term

- Vet exams twice each year

- More often if problems are identified

- Veterinary evaluation as needed for appropriate case management for animals who are:
  - Geriatric
  - Ill
  - Debilitated

-ASV Guidelines for Standards of Care
Housing Area

- Condition
- Evidence of illness
- Appropriate housing for time period
- Stretch to full body length?
- Hard or soft surfaces?
- Toys?
- Contact with animals and humans
- Exercise
Daily Rounds: Monitoring for Illness

- Injuries or need for immediate care
- Vigilance may vary with level of disease
- Response to suspects?

Are you looking at me?
Plan for Intervention

- Written protocols for how to respond
- Care and welfare of sick animals
- Protecting the group
- Community interactions?
Medical Rounds / “Med boards”
Medical Rounds

<table>
<thead>
<tr>
<th>Treatment Log</th>
<th>Tracking Sheet Done</th>
<th>Entered in Computer</th>
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<td>Age K YA 7/2</td>
<td>Location 1</td>
<td>Location 2</td>
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<tr>
<td>Description/Name</td>
<td>Location 3</td>
<td>Location 4</td>
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<td>Treatment Initiated By</td>
<td>Location 5</td>
<td>Location 6</td>
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<th>URI signs observed over a length of illness</th>
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<tr>
<th>URI Score (0,2,3)</th>
<th>Eye Score (0,1,2)</th>
<th>Mouth Score (0,1,2)</th>
<th>Name User(Y/N)</th>
<th>Hydration Status (0,1,2)</th>
<th>Temperature (°C)</th>
<th>Appetite (+,-)</th>
<th>Urine (+,-)</th>
<th>Coughing/Tracheal Sounds(Y,N)</th>
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<tr>
<td>2</td>
<td>2</td>
<td>2</td>
<td>Y</td>
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<td>35.0</td>
<td>+</td>
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<td>C0</td>
<td>2x16 x 14 x 10</td>
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<th>Pr</th>
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<th>Am</th>
<th>Pr</th>
<th>Am</th>
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# Urgent clipboard

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<th>Date</th>
<th>Location</th>
<th>Booking Number</th>
<th>Description</th>
<th>Problem</th>
<th>Requester Initials</th>
<th>Diagnosis / Treatment / Plan</th>
<th>Seen by</th>
<th>Entered</th>
<th>Re-check</th>
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</table>

- Paired with verbal report
- Checked constantly throughout the day
Detection Difficulties

**Disease**
- Incubation
- Infection may precede clinical signs
- Inapparent Carriers
- There may never be clinical signs

**Stagnation**
- Missing Paperwork
- Incorrect or incomplete information
- Difficult to access information
What’s missing?
Cage side information

- Multiple locations
- Mobile computer work stations
- Confirm information
- Changes stages or status
- Record new findings
Cage side information

7/23 - dental □ UR PM + L molar file?, Senior □ (3y)
Rest of med ok until.
7/23 - Chin acne?, melile FC
7/23 - Housemate "Socks is FC, hold for results."
7/25 unable to examine. poss. PU/PD, dental dx?
poss NAC?
Keep records!

- Record weights (daily)
- Food intake and elimination
- Record all treatments given
- Record all vaccinations site, route, serial numbers
- Record all tests

- Records should be readily accessible
Public Paperwork

- Strengths identified?

- Problems appropriately identified for adopters / staff?

- Information about interventions or resolution?
Daily Rounds: Monitor for Stagnation

What am I waiting for?

- Is this animal where it should be?
  - Disease
  - Behavior
  - Adoption

- Why is this animal still here?

- What does this animal need today?
Follow Up: Action Steps

- Straight to adoption!
- Transfer of strays to appropriate holding facility
- Behavioral and/or medical assessment needed
- Spay/neuter surgery
- Medical procedures required before adoption
- Movement from isolation or quarantine post-recovery
- Rescue group contact and pick-up
- Finder contact
- Behavioral and/or medical care to alleviate suffering and improve adoptability
- Euthanasia – decision and performance
## Action steps

<table>
<thead>
<tr>
<th>Cat</th>
<th>Adoptable</th>
<th>Status Name</th>
<th>Gender</th>
<th>Age</th>
<th>Breed</th>
<th>Color</th>
<th>Date Available</th>
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<td>M</td>
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Daily Rounds Action List

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<tr>
<th>Date</th>
<th>Animal #</th>
<th>Cage #</th>
<th>Reason/Diagnosis</th>
<th>Action Required</th>
<th>Date Action Required</th>
<th>Requested by</th>
<th>Entered into computer</th>
<th>Date Completed</th>
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http://www.sheltermedicine.com/node/387
Rounds notes

Date: 7/18

- 7/12 (Date on clipboard)
- Date of note: 7/18
- Initials: A.M.S.
-绿色标记: PM64
- Red marker: 1508
- 1503
- 1502
- 1503
- 1508
- PM4
- PM8
- PM18

Other notes:
- D.S. 1506 fungal
- Cultures known
- D.O.W. clean eyes as needed
Follow-up Duties

Rounds Follow-up Duties breakdown

Some of these duties have been incorporated into the rounds walk through due to wireless internet and the laptop/cart. Investigation of anything PP related can be done while on rounds and cage cards updated promptly. Other lists still require tracking during rounds and post-rounds follow up.

General
1. Make PetPoint changes: stages, sexes, names, locations, check holds.
2. Make test list but confirm these cats have not already been tested. Make sure that adoptable cats whose cards do not indicate a test has been done are actually tested, and update cage cards.
3. Investigate mysteries (e.g. strange surrender reasons, verify PC/stray letters, etc.) and record on cage card as needed.
4. Start cats on meds (if not moving to isolation) and ensure newly discovered URI cats have a green tag and a tracking sheet entry.
5. Add foster candidates to request log on g:drive and email group to notify of new additions.

Find more examples of follow-up duties at the end of the sample how to from Dane County Humane Society on www.ASPCApro.org/stay
Flow-through Planning
Flow-through

- Pre-intake planning and diversion
- Define pathways at intake
- Identify and ensure adequate capacity at critical flow-through points
- Check pathway each day at rounds
- Evaluate efficiency and quality of each pathway’s service
## Flow-through planning

### Intake to Outcome Flow-Through Pathways

<table>
<thead>
<tr>
<th>Intake</th>
<th>Adoption</th>
<th>Transfer</th>
<th>Euthanasia</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Immediate MTA</td>
<td>MTA post-holding</td>
<td>MTA offsite</td>
</tr>
</tbody>
</table>

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What does a pathway look like?

INTAKE

Intake Evaluation

Stray Holding

Care and Housing

Adoption

MTA Exam

Spay / Neuter

Adoption
Changing Paths

- Evaluate pathways for each individual daily for fit
- Change pathways as needed with new targets for action and re-evaluation
Evaluating the pathways

- Capacity compared to actual numbers
- Efficiency / Delays
- Quality of service
Evaluating flow

- Identify problem areas for animal flow through

- Balance capacity including staffing in critical areas to eliminate waiting time for animals
  - Daily rounds
  - Health evaluations
  - Spay / Neuter
  - Transfer / Rescue / Foster coordination
  - Movement to off site adoption center
  - Euthanasia
Thank for your caring!

Special thanks to the ASPCA for the partnership that makes my position possible.

It is the work you do that makes this possible, over and over again.
Upcoming ASPCApro Webinars

aspcapro.org/webinars

• Addressing Causes of Animal Suffering  (August 8)
• Promoting Your Grant to Attract More Funding (August 14)
• How Are Lost Pets Found?  (Sept 5)
• Canine Behavior and Acoustics  (Sept 12)