

To Whom it May Concern Affiliated with the Nevada Humane Society,

My name is James and I am a recent resigned staff person at NHS. Upon leaving I had a conversation with upper management about my concerns during my time at the shelter. I would like to document my concerns and expand on them more here.

I began working at NHS in August of 2022 and left in April of 2023. I worked as a Kennel Technician on dog staff until January of 2023. Overlapping with this, I began as the Dog Foster Coordinator, the first of this position, in December of 2022 and continued until I left.

Admittedly, I do not have a background in animal care. The absence of my animal care background is common and problematic with NHS. This trend is made worse by a lack of knowledgeable training in dog handling and other basic animal care industry knowledge. I began on dog staff because I had just moved to Reno, needed a job, and wanted to work with animals. My background and core competency is in working with people; I have a Master's in Counseling and am trained as a psychotherapist.

Throughout my time at the shelter I had many different people confide in me about their concerns with NHS. Various people of all levels of hierarchy have disclosed to me about negative experiences and frustrations; volunteers, foster caregivers, former staff, staff from county, rescue groups, co-workers, management, donors, and trainers. People's negative experiences have been with clinic, euthanasias, lack of fair compensation, and dog staff policies ranging from cleaning, lack of dog handling training, gatekeeping of dog care, lack of transparency, the isolation of dogs from each other and people, lack of stimulation and enrichment, and the long lengths of stay including in Winter. For context, in Winter dogs are in smaller kennels, taken out of their kennels even less (15 minutes a day, and sometimes not at all), and interact with and see less people (only some dog staff and not volunteers) than dogs in the viewing pod kennels. Dogs are in Winter between intake and their evaluation, for behavioral reasons, including if they don't have an outcome plan (meaning they essentially sit there), for medical reasons, and even as they are available but the viewing pods are crowded. This is the section in the back of the shelter that I worked in as a Kennel Technician.

I have interacted with people who have been on staff and left because they have knowledge and experience of animal care practices nationally recognized. They are very upset by NHS' lack of embodiment of allegedly widely accepted policies including failures to maintain minimum animal care standards as recognized by the Association of Shelter Vets, or ASV. Noted concerns relate to reducing lengths of stay, evaluations, fostering, socialization such as play groups, adoptions, fear free approaches to dog behavior, and more. I am not the person to speak to these policies and their national context more specifically. I just deeply encourage NHS to take seriously that many different people with experience and credentials are frustrated for valid reasons.

I am obviously not holding the whole picture; none of us are. However I am sorry to say that an important part of my own concerns with the dog care at the shelter that I feel qualified to speak on are the outlooks of Amber, David, and Heather, Dog Manager, Supervisor, and Evaluator, respectively. It is quite simple; *they are very negative*. This is no revelation. They speak transparently about being cynical. My very first impression of the shelter was being interviewed by Staci, Amber, and Flea and I walked away with the clarity that Amber is burnt out. Amber and

David are *very distrustful* of people including their staff, volunteers, and adopters. They have consistent and pervasive compassion fatigue from being at the shelter for so long. David allegedly comes from a background with police dog training. I didn't see evidence of him being experienced with dogs and I have in fact heard of him undermining other behaviorists demonstrating more skill. I have seen that dogs' behavior can worsen around him because they are picking up on his energy around them. A background with police dogs is a very different orientation and arguably counterproductive for working with traumatized dogs in kennels. With Amber, again, it's quite simple. She doesn't *want* to be there doing that job. I'm not going to go into questioning why, then, she is. I will say that there is a narrative that things are just barely being held together and so people who have been at the shelter for longer are needed and that there aren't other people to do it. This is what's called a scarcity mindset which can develop from temporary circumstances (like how COVID impacted shelters) but isn't actually true. Therefore, dog care is being managed from a lens that reinforces this negativity.

While the pessimism is out in the open, the gravity of its impact on the animals well-being and staff morale is not seriously enough acknowledged. I wouldn't be compelled to write this letter if it weren't for the harm being done to dogs as a result of the negligence of individuals and the shelter addressing this burn out. More dogs are "behaviorally" euthanized. Dogs (especially in Winter) are only out of their small kennels for 15 minutes a day and even then they are alone in the yard. They are not playing with and learning corrective behavior from each other. They are not playing with and receiving enrichment and stimulation and attention from knowledgeable people. When I started, the kitchen door that connects to the large play yard was kept open so *that* dogs who were outside would get the chance to socialize with people coming in and out of the kitchen. Now, this door is kept closed. Dogs are highly social animals, and while they are at the shelter they are going through a traumatic, stressful, and confusing time. This neglect of their mental and emotional care because of endless distrust is not only harming the dogs but is also negatively impacting the morale of staff, volunteers, and the public as well as decreasing the "adoptability" of the dogs. Again, Amber, David, and Heather's distrust leads to gatekeeping which is an effort to falsely over control rather than learn from the dogs themselves. Our work would be so much easier and more rewarding if we trusted more people to clean kennels, the dogs to teach each other, and the public to learn how to engage with dogs at the shelter and in their homes. Instead, due to compassion fatigue we are removed from the framework that caring for dogs is really quite intuitive and that we are also animals that need not "other" them by, amongst other things, pathologizing their behavior in the context of unfamiliar and restrictive surroundings.

The thing is, I'm frustrated, yes, and deeply concerned, because no matter the intent, we have to be objective enough to be accountable for our negative impacts. But I'm actually really sad. When it comes down to it, I really *want* Amber to be doing what she wants. When I've asked her, she says that her passion is working with exotic animals. And I just really want this for her, seemingly more than she wants it for herself.

I think the concerns I'm trying to express are demonstrated well by the recent dog foster experience of Hot Cocoa, who I've worked with in Winter and as foster coordinator. Hot Cocoa is a one year old male Husky. He came to NHS November 21, 2022 as a stray from county animal control. As a young husky he was adopted within a few days and returned again within a couple of days due to a "family emergency" of the owner. He was adopted a second time after a few days and returned again within 3 days due to "nipping at owners mother" when he was being shooed away when he was seeking out food while she was cooking. He "never broke skin, or made any real contact." Again, Hot Cocoa was adopted for a third time within a few

days and returned after 4 days due to “nipping and a bite incident.” The notes about what happened are as follows:

*Per owner, Hot Cocoa bit both owners. The first incident was 12/7 noon time, owner found Hot Cocoa chewing and grabbed Hot Cocoa by the collar took him to the crate, Hot Coco resisted so owner pushed Hot Cocoa into the crate right above Hot Cocoa's tail, he turned around bit the hand that was holding the collar. The bite did leave puncture wounds and caused MINIMAL bleeding. The second incident was 12/8 in the evening, owner was picking up the Childs toys and putting them away. He thought the owner was playing and trying to get the childs toys and then grabbed onto to owners forearm, owner pushed Hot Cocoa off and crated him; there was only bruising left behind.*

*THIS DOG NEEDS SOMEONE WHOSE PATIENT, HAS TIME TO TRAIN HIM, TRAIN HIM CORRECTLY. HEAVILY ADVISE ADOPTERS NOT TO CRATE HIM WHEN HE'S "PUNISHED". BE SURE TO NOTE THAT HE DOES PLAY ROUGH. He's a good dog who needs someone who can tolerate some unwanted behaviors and whose willing to work those behaviors out of him- redirecting behaviors rather than scolding- he has separation anxiety and doesn't do well when yelled out.*

From here, Hot Cocoa went on a 10 day bite quarantine, which I assume was justified by the “MINIMAL bleeding.” Hot Cocoa began a bite quarantine on December 9th, 2022 and from there was considered “unavailable” in Winter. He was considered behaviorally “dangerous” by Amber, David, and Heather and a plan for him to receive the correct, patient behavioral training or an outcome from the shelter weren't done. He sat in Winter for two months.

In early February I was able to find him a foster for a weekend sleepover. His foster caregivers said he was mouthy and at the end of the weekend when they were transferring him to his next foster they had to pull over because he was too aroused while they were driving. Otherwise, they reported that things went well.

After this weekend sleepover, Hot Cocoa went on superbowl Sunday directly to a foster home with a staff person from our clinic. She reported having “husky experience” and a desire to train him, and she is *staff*. When I came back into the shelter I learned that she had brought him to the Carson City shelter at 11pm the same night (how this was possible is unclear) due to him lunging at her when she tried to get him to go into his kennel by pushing him from behind, despite that this type of correction is consistent with what the third owner reported doing that escalated the situation (the first foster reported that he would go into his kennel voluntarily and that when they wanted him to go in they just tossed treats into the kennel rather than pushing him). This is also despite the note that this is not how he should be punished, which is not surprising given the kenneling he has been enduring. The staff foster caregiver reported that she tried to “correct” him multiple times and each time he would lunge and try to bite until *he walked away*.

These weekend interactions happened while his caregivers were not administering his medication prescriptions, including Trazodone, a sedative that is now given to a large population of the dogs when they get to the shelter. This is a controlled substance that was therefore initially not being sent home with dogs. However the side effects for rapid withdrawal can be hallucinations, anxiety, and even seizures. So now the dogs are sent home with Trazadone, however there's no guarantee that prescriptions are being given and it is common for dogs to be returned within a few days for behavior issues.

The staff foster didn't communicate with me, and so when I learned that Hot Cocoa was back at the shelter, I invited Amber to join me in sitting down with her to go over the specifics of what happened. When I turned to Amber and asked her what her thoughts were after the clinic staff member had left the room, she didn't express concern about the person's mishandling/training skills. Instead, she was focused negatively on Hot Cocoa's behavior in response. I was baffled by the foster's escalatory behavior with the dog and Amber's reaction. After this, Amber and David expressed to me that they wanted to euthanize Hot Cocoa because he should have been able to tolerate the person's behavior towards him. At this point I went ahead and got a trusted trainer and licensed dog behaviorist, Josh Green from Barkside, involved. After working with Hot Cocoa he said, "There's nothing wrong with this dog."

Hot Cocoa then sat, again without training or an outcome plan, but also without being euthanized, for over another month, again in Winter, until I was able to place him in a foster home with a volunteer. A volunteer who, in fact, is "patient, has time to train him, [and] train him correctly." He "can tolerate some unwanted behaviors" and is "willing to work those behaviors out of him- redirecting behaviors rather than scolding" and doesn't yell at him; all of which were identified early on as what Hot Cocoa needs. In all, Hot Cocoa has spent almost an entire 4 months in Winter. Hot Cocoa has now been in this foster home for two weeks and is doing very well, the details of which are reflected in his foster's notes and videos, Joel Nelson. Joel echoed Josh's initial impressions and reported to me after his first meeting with Coco, "there is nothing wrong with this dog." In foster Hot Cocoa does not display aggression, resource guarding, or dog reactivity to small, large, female, or male dogs, and he is "the star" of his ZoomRoom obedience class he attends with five other dogs he sits side by side with. He is still considered "unavailable," is receiving training from his foster caregiver, and ultimately in need of a permanent owner that isn't the shelter.

I was told by dog management after the experience with his second foster that he was still alive because I was advocating for him. This means that Hot Cocoa would have had his life ended for being "unsafe" when it was clear to me that the fault was on humans not properly handling him including staff and fosters. If this preventable issue was addressed, *was believed* that it *could* be addressed, then Hot Coco could have had a chance to be happy and thrive much sooner. How many Hot Cocoa's have instead been brought to the behavioral board, a board that makes decisions based on Amber's initiating, and only requires three of five votes in favor in order to euthanize a dog the next day without transparency even amongst staff, and of which Amber and David are two of the five members, with fatal outcomes?

In summary, I am concerned about the well-being of the dogs at NHS and their needs being met. I am concerned with things carrying on the way that they currently are instead of longer term (five years or more) staff reflecting honestly. I am deeply concerned about the unnecessary euthanasias, low morale, under socialization and increased reactivity of dogs, and lack of implementation of standards of care resulting from Amber, David, and Heather's negativity. The many dogs that depend on NHS could otherwise thrive under the care of a more knowledgeable, professional, and compassionate team.

Sincerely,

James