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**To:** [Animal - Advisory Board](#); [schieveh@reno.gov](mailto:schieveh@reno.gov)  
**Cc:** [REDACTED]  
**Subject:** Animal Welfare at Nevada Humane Society  
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To Whom it May Concern,

I am writing today as I feel I have a moral responsibility to the pets of northern Nevada as well as the people employed by Nevada Humane Society. I was an employee of NHS from August 2020-November 2022. I currently am employed by VCA baring blvd as a veterinary technician in training. In those two years at this organization I went from a person who was eager and excited about starting my journey in the animal well fair industry, to someone who was so burnt out and overworked I didn't know if I ever wanted to work in this industry again. When I first started, I was a part-time cat care staff. I grew through this organization to hold other positions such as the small animal care-giver, full-time cat care-staff, and my last position as a full-time animal intake coordinator. Over the course of my employment at NHS and the longer I stayed at this organization, the more I began to see its flaws. NHS is not alone in having flaws as a organization, however, when it coms to caring for living beings these flaws border on negligence.

What I would like to talk about first is how I got the position of small animal care-giver. I was still working in my part-time position on cat-staff, but I was struggling to afford day-today expenses as part-time. There were no fulltime positions open, so I opted to try and work two part-time positions. At about the same time that I was looking for a second position with NHS, I started to notice how little care the small animals (rabbits, guinea pigs, rats, etc.) were receiving. I started to dig a little more in trying to find out whos responsibility it was to care for these animals. in doing so I found out there was no official small animal care-giver positon, and that it had been delegated to the front desk staff when the COVID-19 pandemic hit. While I can understand the need for this during the strict quarantine period, when the shelter began to open up again and started in-taking larger amounts of small animals, this position should have been reinstated. Instead, the front desk staff that was already short-staffed and overworked with the influx of people adopting, were expected to provide all of the care for the small animals as well. As expected, these animals were not receiving the standard of care that should be provided at NHS. I had to spear-head a campaign along with another co-worker to get administration to open a position dedicated to caring for the small animals. This process took around 3 months from the first time I brought up the lack of care to a manager. A staff member who had only been working in the animal welfare industry for approx. 1 year at that point should not have been the only voice advocating for an entire department of animals not receiving the care expected of an animal WELFARE organization. That was just the first of the many incidents that occurred during my time there that made me question the organization.

Another group of animals that I feel consistently get forgotten about by NHS management are the barn cats. The care that the barn cats receive at this shelter borders on neglect. In my time there I watched barn cats sit in room 7 for periods of 3 weeks up to multiple months, stuck in a small den inside a metal cage. This is the worst case scenario for these cats. They are not socialized, not used to being inside, and a staying coped in these metal cages causes extreme stress for these animals. Something needs to be done about the way the barn cats are handled at NHS. The semi-social or companion cats are also included in this group. They are usually housed in the back in small metal cages as well while trying to socialize these cats. The first thing I learned about proper care for cats in shelters is that they need a place to hide. Not having a place to hide can lead to increased behavior issues and increased stress for the cat which has implications on their health. One of the techniques the main care giver for these cats used to socialize these cats was to take away their place to hide as well as any blankets or source of comfort. This led to these cats in many cases completely shutting down or becoming more aggressive/reactive. I would frequently find cats hiding in their own litter boxes out of desperation for somewhere to hide. This treatment is inhumane.

When I transferred to the intake coordinator position I was dealing with a lot more animals (every animal that came through our doors to be exact) and learning a lot more about the way NHS functioned. Unfortunately, I mostly saw disfunction. One of the departments at NHS I ran into the most issues with was unfortunately the Clinic. Not only is there NO clinic staff in the building on the weekends (animals don't get sick on the weekends, right?), but they would frequently leave early without informing care staff. From the time I was a part-time cat staff I was warned from other employees to avoid the clinic if I could as the people who worked in there were a tight clique that didn't enjoy mingling with the other departments. From what I could tell in interacting with them, this was very true. When I became the intake coordinator, I would say the treatment I received from the clinic staff was nothing short of straight up bullying. I felt like I was transported straight back to middle school, and this should NEVER be how someone feels in their place of work. Multiple members of staff had bad attitudes constantly, they would very obviously play favorites among the staff, and there were points where I would be completely ignored when trying to find help. Not only were the technician and assistant staff unfriendly, the shelter veterinarians (this excludes the Dr's hired within the last year as they all seemed very eager to work in the shelter.) had reputations for being scary and less than kind. I had the misfortune of experiencing this first hand. In my time as the intake coordinator (1 year), I started a list of times there was inadequate care given by the veterinarians in my iPhone notes app. When I left that list was very very long. It was so long for me to write every incident out would have this email as long as a novel. So, I'll just mention a couple that were really unfortunate cases.

The first time I recorded an incident for this list, was at the start of what is called "kitten season". It was around 3:30-4pm (the clinic team is supposed to be in shelter till 5pm) and I received a call from an employee at our Carson City location. He informed me he was rushing to our location with a kitten that had a large puncture wound to its abdomen. Of course the first thing I did after ending this call was inform our clinic. This is when I was told by the two doctors on staff at the time that they both had places to be and they were leaving before they could see this cat. The other intake coordinator and I had to basically beg them to give this cat medical attention. Sadly, there are many, many stories just like that one. The next incident I'll tell you about led to me reaching out to the animal care manager at the time about the treatment I received. This happened near the end of the day, it was probably around 4:30pm. We had a dog that was being surrendered by its owner due to it declining in health. When I went into the admissions room to retrieve this dog just by looking at it I could tell this dog was actively crashing. He couldn't hold himself up, he was agonal breathing, and showed no response to external stimuli. I rushed him to the clinic immediately, this dog was dying in my arms as I ran back there. When I entered the clinic Dr. Slatin was in the treatment area with two assistants. I rushed in and exclaimed that I needed help and a doctor as this dog was NOT OKAY and I believed he may be dying. The only response I got from Dr. Slatin was to be yelled at and told "I don't have time for this". I was honestly in shock from this. Another assistant took the dog from me and I walked out of the clinic crying. This dog was humanely euthanized that night. Sadly, nothing came from the email I sent to my manager, and that was not the only time I left the clinic

The clinic weren't the only employees at NHS that were part of the reason morale at NHS is so low. There were many employees at NHS that seemed to take out their own personal anger or feelings of frustration on their fellow employees. One in particular is an employee who almost seems untouchable due to her tenure with the organization. She not only bullied fellow employees when she deemed they weren't doing something correctly ( this included things like using 2 paper towels instead of 1, or filling the cat water bowls as you went rather than all at once at the end of cleaning as she liked), she would go out of her way to inspect the other departments and tattle on them if she felt they weren't up to her standard. This is not conducive to a healthy work environment between coworkers, and its disheartening NHS continues to let her and others treat their coworkers like this simply because they have been working there for a while.

Not only is there an issue with the relationship among staff at NHS, but also among those in the administration. My biggest issue with the management at NHS is how out of touch they seem to be with how the shelter functions. I can almost guarantee if you went into the admin office and asked someone working in there if they knew how we cleaned the kennels, the majority would not know the protocols. It's very hard to work for someone when they do not even respect the work you do enough to know what it

entails. In my opinion the CEO, Greg Hall, is the worst when it comes to understanding the everyday functions of the shelter. As a CEO I do not feel Greg is providing the guidance and leadership it so desperately needs. He does not provide a workplace where his employees feel valued. Paying its employee adequate wages is a big issue at NHS. I remember one time the previous HR manager was asking us how she could raise morale, but made sure to specify raises weren't an option even though she knew "they paid us peanuts". That is a direct quote. After having worked with this company for 2 years, when I left I was only paid 25 cents more than the starting wage. I was shocked by this, but later found out that every time I had supposedly received a raise based on merit, the entire organization received the same raise. I even had to have a meeting with Greg to ask to be paid the same wage as as my fellow intake coordinator and equal. All this told me was that my time, effort, skills, and knowledge was only worth 25 cents to them. This is just one example of how I did not feel valued as an employee. NHS seems to be relying solely on the care and love in the hearts of its employees to keep it running, and eventually this care will get burnt out.

There is also a big safety issue at NHS. As the intake coordinator I worked solo 3 out of 4 days. This meant I was alone in a room with cats and dogs that had never gone through our evaluation process and most of the time their history was unknown. It was part of my job to vaccinate all of the animals that came through intake, and I was expected to do this by myself most of the time. This is very dangerous, and something that would never happen at my current vet hospital. How is one person expected to safely restrain an animal and use a needle to inject the vaccine at the same time. While I thankfully do not have any incidents of injury due to this, there were multiple times I can close. If I deemed that I was unable to vaccinate an animal and asked for the clinic to complete the vaccine, I was met with resistance and even was told i was not allowed to ask the clinic to vaccinate animals I could not on my own. Anytime this concern was brought up it was ignored due to being "short staffed". This issue even came to the point of the previous CEO, Rory Adams, reprimanding my fellow intake coordinator (in the middle of the hallway with others near by) for not vaccinating a dog that tried to bite her and the admissions coordinator multiple times. They were both threatened with disciplinary action for this incident. This tells me NHS does not care about their employees safety and was a tipping point in what led me to leave.

The last issue I will discuss, were the poor decisions I saw being made by managers and supervisors regarding proper placement of animals with behavior issues. There were multiple times I witnessed animals, mainly dogs, being adopted into what I deemed quite frankly were dangerous situations. The one example that comes to mind first was a dog named Hennessey. Hennessey was a very sweet dog, however, he was an easily excitable dog with a strong prey drive. He had restrictions against kids under either 8 or 12 years old, small dogs, and cats. He also had a bite history, but we believed that with the right home Hennessey could be a wonderful dog. Unfortunately, he did not go to the right home the first time he was adopted. The dog care supervisor now manager and adoptions manager at the time allowed this dog to be adopted into a home with two young children (the first 1-2 yo and the second 8-9 yo), and two small dogs. They allowed this despite employees having explained the restriction to the Woman adopting Hennessey as she was becoming aggressive and rude with staff members. Despite many members of staff expressing discomfort with the adoption, it went through. Hennessey was returned within a matter of weeks and one of the small dogs was in the emergency vet hospital as Hennessey had tried to play with him a bit too rough. Instead of having their employees backs those in charge allowed this adoption to happen and endangered both animals and children. I sent an email to my manager at the time expressing my feelings about the situation and again felt there was no follow up.

I stayed a NHS for as long as I could stand before my mental health declined so significantly it was impacting my relationships outside of work. I still care very much for the pets and the people who are still at NHS, that is why I am writing this email. Something needs to change, and it needs to change now. The pets at NHS are suffering from the lack of care they are receiving, and the staff is also suffering while trying their best to provide what they can to the animals. When I left NHS I was not alone. My entire intake department of 4 people quit within 2 weeks, and this was only a small portion of everyone who left around the same time. Everything I wrote here is only a portion of all of the issues arising at Nevada Humane Society. If change doesn't happen and soon, the animals and staff at NHS will continue to suffer from it tremendously.

Thank you,

Jacklyn Wolfe