

Attention:
 Greg Hall, CEO
 NHS Board of Directors
 Washoe County Regional Animal Services Advisory Board

Dear NHS Board of Directors and Mr. Hall,

I would like to start with an introduction. My name is KC Gardner, and I am writing to you all today to express my concerns over a pattern of what I believe to be incompetency of NHS dog staff that is leading to dog suffering, unsuccessful adoptions and dangerous situations for the public. I am not alone in these concerns. They are shared by my customers and other respected qualified K9 experts in our community.

I have worked in the breeding, training, handling and grooming industry since 1992, when I traded a legal career in the military for my dogs. I have been very active in fostering, personally, I have had dogs of my own that received their Canine Good Citizenship Certification with the AKC and Tricks Ribbons. As well as, Field Trials, Water Dog, Gun Dog, Splash Dog awards for competitions; ALL with positive reinforcement training. Building trust with my dogs, as opposed to hurting or scaring them into doing the behaviors I ask. I am a certified AKC CGC, CGCU, CGUC and TRICKS dogs Evaluator as well as ADPT nationally recognized. I train 40+ dogs DAILY, to transition into new homes and STAY there.

I work with multiple adoption/rescue groups to better the chances of these dogs in need, on many different levels. I donate MY personal grooming services (so dogs have a better chance of getting adopted). I donate my training time and time in my gym (so dogs that have been in a facility for extended stays have some zoomie time and TRAINING).

I donate free services so adoptive families have the resources to keep a shelter dog in their home for the life of the dogs. I give all adoptive families a free evaluation and a free private training to get off on the right foot and hit the ground running.

I DO WHAT I DO SO ADOPTED DOGS SUCCEED.

I currently regularly donate my time and facility weekly to local rescue groups and shelters, welcoming dogs and volunteers to use my facility and experience in providing enrichment and obedience training. I used to provide this service to NHS, but have elected to cease doing so based on my observations of the quality of NHS dog staff, NHS adoption practices and lack of basic level of care as recommended by the Association of Shelter Veterinarians (ASV) not provided to NHS dogs.

Here are my **FIRST HAND** experiences. There are countless others I have heard from my clients, community colleagues and advised on over the last year.

Last year one of your senior dog staff **David Smith** visited my facility, along with one of your brilliant handlers (Josh Green) to tour my facility and see what we offer our dogs and customers. While inviting him into "my home" I found him argumentative and with seemingly no knowledge of even the most basics of dog enrichment and psychology. He kept telling me he had a history of "training police dogs". I have NEVER spent 45 minutes arguing with a person over how to handle shelter dogs, until this visit. He had no understanding of dogs, except some crude and cruel protection and aversive handling of dogs. **NO** person should ever try to relate to a shelter dog using fear and pain, for any kind of training. This logic not only escaped him but frustrated him.

Even if he does have his alleged experience, which I question, this by no means qualifies him to work with shelter dogs, as their needs for health and success is quite the opposite of police and military dogs. Police and military dogs are trained to elicit stress and aggression using pain, fear and other aversive techniques. This is the exact opposite of what a qualified shelter dog staff member should be doing.

In addition, while anecdotal, the behavior of the dogs around David Smith tells me all I need to know. He doesn't seem qualified and has the wrong energy for vulnerable shelter dogs. Put simply, dogs don't like David. He doesn't have the passion or knowledge to see their success. He elicits stress and aggression in them.

At one point, he was on the leash with a shelter dog the volunteer brought to us, and **I personally removed the leash from his hand and told him he can not handle a dog that way.**

If **David Smith** is senior dog staff at NHS this represents a serious quality control and executive level management failure at NHS. If he is so inappropriately unskilled, how good can the people he trains and manages at NHS be? How could he even get hired to begin with?

In addition, last month **David** came in my store asking for more donations and more free training offerings for NHS adoptions. He was contentious and disrespectful to my Front Desk Supervisor, who ultimately felt for the dogs at NHS and donated a gift card. Based on his representation of NHS in our community, my concerns about NHS treatment of animals and the concerns and experiences of my customers with NHS, she made it clear that we no longer support NHS.

There are serious failures and incompetency in NHS adoption practices, such as misleading adopters about dogs, misdiagnosed behavior problems, and inappropriate matching of dogs and homes. This unfairly misleads adopters and most importantly creates dangerous situations for adopters and our community. Young large breeds adopted out to elderly couples, dogs who haven't been properly screened into home with resulting injuries to current dogs or people, a lack of dedication to finding the appropriate match for adoptive dogs, refusal to take the dogs back when these things occur, have resulted in damage to families, pets and most importantly the dogs being adopted out and marked as DANGEROUS. Often resulting in unnecessary euthanasias.

NHS practice of drugging dogs on Trazodone and Gabapentin is excessive and dangerous. The heavily drugged dogs the adopters meet in your meeting rooms is unfair and misleading. The public thinks they are getting a calm gentle dog, when in fact they are often getting a hyper aroused, understimulated dog with behavior problems. Then, NHS sends these dogs to their new home with no Rx refills or instructions on how to gently detox these vulnerable animals. Within 2 days the dogs are rapidly detoxing in a new and stressful environment. Often leading to damage of property, bites and potentially seizures.

The side effects for rapid detox of Trazodone

- Constipation
- Diarrhea
- Dry mouth

- Headache
- When stopped abruptly: agitation, [anxiety](#), sleep disturbance
- Low blood pressure
- Manic episodes
- Serotonin syndrome: hallucinations, agitation, delirium, coma, fast heart rate, muscle tremor, dizziness, stomach upset
- Increased risk of bleeding
- Hyponatremia
- Seizures

It is completely unethical and dangerous to send a heavily drugged dog with no prescription refills to a new home with well meaning, but unskilled adopters. This practice can and does lead to bites, for which the dogs ultimately pay more with their lives.

My customers and myself are busy people with many demands on our time, but it would appear that things have gotten so bad at NHS that we must finally say something. I am not alone in my refusal to financially support the NHS anymore. Many donors are frustrated at the lack of executive level and staff competency, and thus animal suffering, we all see. We are not alone in our concerns about the state of decline at the NHS over the last few years. I have witnessed some of the most amazing NHS employees, who's sole dedication was to the welfare of ALL these animals; lost and sacrificed due to politics and management's incompetence. Often these people have extensive animal care credentials and experience, take their concerns to NHS executive management and nothing is done. I do understand that the NHS truly has to be run like a business. However, it is imperative that businesses operate with knowledgeable, reliable, caring employees. In the case of the NHS, THIS IS NO LONGER THE CASE.

I request the following from the NHS Board in writing:

I encourage the board to do their due diligence and look into what actual qualifications David Smith has.

What verified qualifications does David Smith have?

Who promoted him to his current position and what qualifications and knowledge did they have to do so?

What ongoing evaluation and training standards is he being held to?

Is he responsible for training NHS dog staff?

Is he responsible for any behavior modifications or evaluations?

Why are so many dogs at NHS misdiagnosed with behavior problems that in my professional opinion are not accurate?

Who evaluates dogs and diagnoses their behavior?

What qualifications do they have and what evaluations standard practices are being followed?

Who is in charge of adoptions and dog meet and greets?
What qualifications do these people have?
Who is training them?

Why are so many dogs at NHS drugged on Trazodone and Gabapentin and sent home with no prescription refills?
Is this still in practice?
If not still a practice, when did this change and for how long was it a practice?
What percentage of the total dogs in the NHS are currently on Trazodone and Gabapentin and how does this compare to nationally recognized standards and at what dosage?

There is a saying in dog behavior modification that “energy travels down the leash”. I believe the same is true in any organization. It is the responsibility of the NHS Board to ensure that executive management is knowledgeable and necessarily qualified to not only provide ethical and appropriate care for these animals, but also to be capable of hiring the correct, appropriately educated, caring staff.

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