

Cat Care meeting 2-11 - Minutes

- 1) medicators:
 - a. No continuity between hours between each medicator – hard to budget for
 - b. Concern about continuity in shifts but also concern about 12 hour meds – need to make sure that is done appropriately
 - c. Pay can be afforded with moving other things around, becoming more efficient in tasks and purchasing meds, food, adopting more cats
 - d. No consensus made among Cat Care members but it was agreed that more consistency would be good
 - e. At this time, no supervisor is named but board will work on job description – Jackie G. will be first choice; in the meantime, supervisory duties fall to Joan and HR Committee (chair: Lori Peterson)
- 2) Preventative measures – weighing, checks consistently
- 3) Food and medication – canned vs. dry; cats shouldn't have so much moist food because they are not physically set up to have that much
- 4) Time element – food needs to be made sure it is eaten
- 5) Extra time for cleaners to assist in miscellaneous tasks
- 6) Not enough litter boxes in the rooms to accommodate rooms with larger numbers of cats
- 7) Plain and simple – we are overcrowded
- 8) Training for other medicators
- 9) Keep up on worming and vaccinations
- 10) Mini-seminars on vaccines, sub-q
- 11) Policies and procedures
- 12) Vet care procedures need to continue to be followed until recheck with that vet – vet care form is in place
- 13) Lance Huffer – dentist in Lakeville, only certified animal dentist in area
- 14) Michiana Humane Society to go no-kill? Influence to that effect
- 15) Amoxicillin is much less expensive, must use this instead of Clavamox which is very expensive
- 16) We need a list of the meds – Jackie is working on that
- 17) Foster cats – fosters need to call in to get the authorization to go to the vet – we can't diagnose cats directly but we should do fecals for every room at least once a month
- 18) Insurance covers cats for the first 30 days no matter what, even if they don't continue
- 19) Special needs cats in foster – generally going to the vet for special need issue – need to ask about the vets that are in our network or at least try to work with that vet – how can we get discounts and assistance from these vets
- 20) Dr. Bailey – all drug companies (?) have to write so much off and must give away a certain amount on a quarterly basis – we can apply quarterly to get this as free or highly discounted
- 21) Easier from a budgetary standpoint to order smaller amounts more often
- 22) Wet food – shouldn't be fed as often as it should according to Dr. Fehrs
- 23) We can get Evanger's grain free food at 56 cents a can – 178 cases (1 pallet) – Brett will store the food at his shop if we want to buy it – 81 cases are already paid for on

- the Facebook drive – some more of this food will be at the store during the weekend event for people to buy at \$7 to donate to the shelter –
- 24) Disco – needs to be low ash count for urinary cats – as long as the urinary issue is kept in check; CD dry would be ok, Diamond Naturals has repaired diarrhea in a lot of cats (Eagle Prism is current brand – 96 cents per pound) Diamond Naturals - 92 cents; meat should be first ingredient, no corn wheat or soy; Wellness or EVO would also be ok – we will start dry food in Disco on regular basis as long as it meets the requirement of having low ash count
 - 25) Food to buy – we make no money selling food to others; it's more work to keep food for colonies – Joan has the list of people who purchase food on a regular basis; could we raise the price slightly and still continue
 - 26) Friskees will slowly be reduced in favor of higher quality foods
 - 27) McAfee House Call visits – Dr. Andrea coming out of maternity leave soon – Brett will follow up
 - 28) Foster care protocols – Pam (with Tess) is no longer paying her half of invoices and asking for full price; Sue has not called back on this; Marti will handle this issue but recommendation is to make these folks use our vets – regulate this more carefully to ensure that care is under control and costs are as well
 - 29) Unity grant – helps with people who need finances for caring for their cats – check came in October; grants were earmarked “Pets for People” for LaPorte County; more grants are being applied for
 - 30) Michigan City Animal Clinic – Carol A. will approach Bailey to see if he would like to be a participating vet in a discount proposal
 - 31) Geriatric panels for checking – preventative measures will ensure less trouble later
 - 32) Get an account with Clinilab? (mentioned by Paulette)
 - 33) Ringworm – almost over in both rooms – 1 more week – should be done this weekend
 - 34) Cleaning – Joanne mentioned that deep cleaning needs to be done in each room on a more regular basis – more than just scooping boxes and mopping; difficult to do now with current cleaners under constraints – need consistency in methods and cleaning products
 - 35) Board is in process of writing shelter operating procedure including cleaning – please consult list of links provided below and from agenda
 - 36) “Cleaning parties” 2-4 people not a large number needed
 - 37) Joan needs to be included in this discussion
 - 38) Home Depot grant written for possible donation of money for cleaning supplies
 - 39) Could post on Facebook for cleaning help as well

Cat Care Committee Meeting

2-11-13

Agenda

- 1) For discussion - Medicator job responsibilities, shift structure, and policies review to ensure policies are clear and updated
- 2) For discussion - Shelter operating procedures - feeding and care guidelines review, including Disco

- 3) For discussion – Foster care protocol
- 4) Our vet network and negotiated vet discounts
- 5) Status of McAfee "house call" visits
- 6) Status of ringworm issues in Kiki and Freckles update

Links of interest:

- <http://www.petsmartcharities.org/resources/feline-forum/> - some great presentation slides available here
- Shelter operating procedures from ASPCA (includes link to a manual template): <http://www.aspcapro.org/standard-operating-procedures.php>
- Webinars on standards of care for animals and shelter guidelines: <http://www.aspcapro.org/webinar-series-guidelines-for-standards.php>

Recent concerns noted by volunteers and board members:

- After cats are returned from vet visits/surgeries requiring follow-ups or ongoing treatment, we need to make sure sheets are written for checks as well as any prescribed meds to ensure that at least one or two medicators have a look at them (i.e., checking mouths for swelling or problems after dentals)
- Procedures for making appointments for vet care of shelter cats
- Procedures for checking on cat well-being room-by-room (Jackie, Jeanne, Barb)

Update on Medicator Shifts

It was decided by the board to be implemented beginning February 18, 2013 the following updates to Medicator roles:

Jackie assumes head medicator position, others continue as subordinate medicators

Special projects for Jackie in the short term:

- 1) Inventory Meds
- 2) Clean out cabinets where food prep is done, and where files are being stored.
- 3) Try to get a room a day into PetPoint if not already in. This will allow us to start making sure all vaccinations are done.

Things the head medicator does in the day would include:

- 1) Feeding and food monitoring
- 2) Weekly weighing
- 3) Vaccinations and vaccination monitoring
- 4) Regular fecals in each room
- 5) Inputting medical information into PetPoint
- 6) Organizing files and medication supplies
- 7) Ordering medication supplies as needed
- 8) Determining vet care for cats as needed and coordinating vet visits
- 9) Consulting with veterinarians, room moms, volunteers, and others when needed (but she should understand that she is not to act as a personal slave to any room mom or volunteer who wants to dominate her time all day, which can and will happen on a regular basis if she is not allowed to be assertive)
- 10) Supervision of other medicators including weekend performance record review and consults and observations during mornings
- 11) Regular reporting of medication activities, issues, and performance with Cat Care chairperson.

Other medicators

AM Weekday medicators:

- 1) Perform early morning checks of all cats including fecal and vomit monitoring
- 2) Prepare and feed morning meal and monitoring food intake
- 3) Consult with head medicator upon her arrival on site

Weekend medicators would do essentially what they have always done on their regular shifts, and may also be asked to do some of the same things the head medicator does in the week:

- 1) Feeding, food monitoring, and medicating (primary responsibility)
- 2) Inputting medical information into PetPoint
- 3) Organizing files and medication supplies
- 4) Consulting with veterinarians, room moms, volunteers, and others when needed
- 5) Consulting with each other and the head medicator (electronically, via phone, or in person as available)
- 6) Possible other duties (inventorying, writing up a "check list" for the head medicator for the week on issues they notice, etc)

Ongoing concerns:

- If the system doesn't work out, what do we do next?
- What if any medicator needs to call off work for a day, including Jackie? Do we have enough fill-ins available?