



Animal Shelter Alliance of Portland

Pet Evaluation Matrix Development Timeline & Process 2008

- 1/21/08 Strategy proposed to create Pet Evaluation Matrix (PEM)
- 2/7/08 Strategy approved by ASAP Coalition
- 2/21/08 First meeting by ASAP Asilomar Subcommittee (a combination of ASAP shelter veterinarians and ASAP executive leadership)
- 3/6/08 Report to ASAP Coalition regarding progress to date
- 4/3/08 Initial presentation to ASAP Coalition re PEM elements with first draft of potential conditions/categories
- 6/17/08 Initial training to all shelter staff regarding Asilomar Accords and PEM
- 7/10/08 Meeting to discuss Asilomar Advisory Committee (AAC) and establishment of 12/31/08 as final due date for PEM
- 7/30/08 22 ASAP coalition shelter members and their key staff attend a PEM training session at Banfield, the Pet Hospital
- 8/11-15/08 Invitations sent to 20 representatives of rescue groups, dog trainers, veterinarians, animal behaviorists to join AAC (participants were chosen from the four county ASAP region with a broad representation of various economic areas)
- 9/11/08 First meeting of AAC. In attendance, 4 veterinarians, 4 rescue groups, 5 dog trainers, 3 ASAP members. Existing PEM reviewed, several conditions moved into different categories, introduction of cost factor by AAC.
- 10/7/08 ASAP Shelter reps review results of AAC, discuss proposed behavior matrix
- 10/9/08 Second meeting of AAC. Behavior criteria and behavior specific matrix introduced.
- 10/10/08 ASAP members post invitation to public meeting on proposed PEM on their websites. Pass it forward invitation sent to AAC members. Invitations sent to news media for distribution. However, no mention appeared in any media formats.
- 10/30/08 Public Forum held. 40 individuals attend though all but one are other rescue groups or volunteers from shelters.
- 11/20/08 Third meeting of AAC is scheduled but too few attendees RSVP; meeting is canceled. AAC members are emailed revised PEM with public comments incorporated. Feedback is positive and appreciative of the involvement.
- 12/4/08 Draft of final PEM is presented to ASAP members. A last few comments are incorporated into PEM
- 1/08/09 ASAP Coalition votes to accept 12/31/08 PEM as amended.



Final Edition

Animal Shelter Alliance of Portland Pet Evaluation Matrix

12/31/08

Healthy

The term “Healthy” means and includes all dogs and cats eight weeks of age or older that, at or subsequent to the time the animal is taken into possession, have manifested no sign of a behavioral or temperamental characteristic that could pose a health or safety risk or otherwise make the animal unsuitable for placement as a pet, and have manifested no sign of disease, injury, or congenital or hereditary condition that adversely affects the health of the animal or that is likely to adversely affect the animal’s health in the future.

Cats and dogs who meet the definition of “healthy” are reasonably healthy, well-adjusted pets over the age of eight weeks. These animals do not need medical, behavioral or foster care and are ready to be made available for adoption.

Animals may be old, deaf, blind, scarred, or disabled, but are not in any pain, do not require medical treatment, and are social, healthy, friendly pets. Age, breed and time at the shelter do not affect the definition of "Healthy."

Behavior

Healthy categorization includes animals that have no identified behavioral problems.

Healthy categorization includes animals that exhibit normal levels of species typical behaviors.

These include but are not limited to:

- Scratching inanimate objects-cats
- Jumping on elevated perches – cats
- Play
- Digging
- Vocalization – barking/meowing
- Initial shyness/submissive behaviors when exposed to novelty (new people, objects, situations)

Treatable-Rehabilitatable

*The term “**treatable**” means and includes all dogs and cats who are “**rehabilitatable**” and all dogs and cats who are “**manageable**.”*

*The term “**rehabilitatable**” means and includes all dogs and cats who are not “healthy,” but who are likely to become “healthy,” if given medical, foster, behavioral, or other care equivalent to the care typically provided to pets by reasonable and caring pet owners/guardians in the community. (The prognosis must be fair to good to meet this definition. The following are only examples and are not inclusive)*

Medical

- URI/kennel cough
- Parasitic infestation
- Conjunctivitis
- Fracture < \$750 to treat
- Ringworm
- Mange, localized
- Bite wound
- Acute Dental Issues
- UTI
- Dermatitis, mild, non-allergic
- Pregnant
- Neonatal kittens and puppies over the age of 4 weeks of age w/o mom
- Unweaned kittens and puppies w/mom
- Weaned kittens and puppies <8 weeks
- Other health conditions with a reasonable prognosis to return to healthy state. <less than \$750 to treat

Behavior

Species typical/ normal behaviors which are excessive or problematic. These behaviors can be alleviated or controlled through training, neutering or environmental changes. This includes but is not limited to behaviors such as:

- Barking in response to environmental noises/territorial breeches (someone walking by house/someone ringing doorbell)
- Excessive digging
- Poor leash manners (e.g. pulling)
- Play/exploratory chewing
 - Mounting
 - Roaming
- Exuberant / Mouthy play
- Excitement urination
- Submissive urination
- Break or lack of house-training
- Urine marking
- Destructive scratching
- Feral kittens 4-10 weeks old

Aggressive or Anxious Behavioral conditions where the Trigger Levels are 1 or 2 and the Intensity Levels are 1 or 2.

Treatable-Manageable

The term “manageable” means and includes all dogs and cats who are not “healthy” and who are not likely to become “healthy,” regardless of the care provided; but who would likely maintain a satisfactory quality of life, if given medical, foster, behavioral, or other care, including long-term care, equivalent to the care typically provided to pets by reasonable and caring pet owners/guardians in the community; provided, however, that the term “manageable” does not include any dog or cat who is determined to pose a significant risk to human health or safety or to the health or safety of other animals. (The prognosis must be fair to good to meet this definition. The following are only examples and are not inclusive)

Medical

- FIV
- IBD
- Arthritis
- Diabetes
- Feline chronic renal disease
- Thyroid disease
- Dermatitis, allergic, minor
- Urinary Stones
- Cystitis, chronic
- Stomatitis (chronic)

Behavior

- Aggression or Predatory Behavior in which the motivating circumstances (triggers) can be reasonably avoided by a reasonable and caring pet owner
- Roaming (if neutering does not alleviate)
- Resource Guarding Level 4, 5, 6
- Aggressive or Anxious Behavioral conditions where the Trigger Levels are 1 or 2 and the Intensity Levels are 1 or 2
- Aggressive or Anxious behavior where the Intensity level is 1 and the Trigger level is 3
- Feral, with caregiver

Unhealthy & Untreatable

The term “Unhealthy & Untreatable” means and includes dogs and cats who, at or subsequent to the time they are taken into possession (and whose medical or behavioral prognosis would be poor, guarded or grave to meet this definition):

(1) have a behavioral or temperamental characteristic that poses a health or safety risk or otherwise makes the animal unsuitable for placement as a pet, and are not likely to become “healthy” or “treatable” even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community; or

(2) are suffering from a disease, injury, or congenital or hereditary condition that adversely affects the animal’s health or is likely to adversely affect the animal’s health in the future, and are not likely to become “healthy” or “treatable” even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community; or

(3) are under the age of eight weeks and are not likely to become “healthy” or “treatable,” even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community. (The following are only examples and are not inclusive)

Medical

- FeLV
- FIP
- Canine chronic renal disease
- Neoplasia with poor prognosis (under 90 days)
- Severe Kidney disease
- Parvovirus
- Feline Distemper
- Canine Distemper
- Neonatal kittens and puppies 0-4 weeks of age, w/o mom
- Congestive heart failure, end stage
- Medical conditions requiring treatment in excess of \$750
- Manx Syndrome

Behavior

- Dogs determined to be dangerous in accordance with state or local law
- Animals that are used for illegal purposes (such as fighting with no rehoming alternatives)
- Multiple (more than 3) and overwhelming TR or TM behavioral conditions
- Aggressive or Anxiety conditions that have Intensity Level 3
- Aggressive or Anxiety conditions that have Intensity level 2 and Trigger level 3
- Resource Guarding Level 7, 8
- Feral, no caregiver, over 10 weeks of age

Prognosis

Prediction of the probable course of a disease or condition in an individual and the chances of recovery.

1. Good – Favorable outcome is expected and / or maybe easily managed
2. Fair – Favorable outcome possible and / or manageable
3. Guarded – Possible outcome is unknown
4. Poor – Non-favorable outcome is expected
5. Grave – Death is imminent

NOTE: Please always keep in mind that the classification does not imply case outcome. Just because an animal is categorized as “unhealthy & untreatable” does not mean the animal can’t be saved. Nothing in the Asilomar Accords definitions prevents shelters from providing care beyond that typically provided by pet guardians in their communities. Animals categorized as “unhealthy & untreatable” due to serious behavior issues like dog to human aggression, for instance, may be placed in sanctuaries or other appropriate long-term care facilities, if available. Similarly, extensive medical intervention, foster care, and other treatment may be provided to rehabilitate seriously sick and injured animals so they too can be placed in loving homes. Many shelters can and do provide care that exceeds community standards and are thus at the forefront of humane change in their communities.



ASAP Pet Evaluation Matrix

Appendix A

Behavior – Aggression Levels/Resource Guarding

Healthy

Resource Guarding Level 1

The ideal and safest response when you approach the dog at his food bowl is that he stops eating, wags his tail, and comes over to greet you. Happy to share toys, food, etc.

Resource Guarding Level 2

A slightly less perfect but still very safe reaction is that the dog looks at you, wags his tail, and continues eating, but is still relaxed about your presence in the food zone.

Resource Guarding Level 3

Dog's body may tense as you approach, and he may also wag his tail, however the speed of the wag will increase as you get closer to him.

Treatable Manageable

Resource Guarding Level 4

Dog's discomfort escalates, so does his behavior. You may see a glare in his eye when he looks at you, perhaps lifting the lip in a snarl, maybe a low growl, and obvious increase in eating speed.

Resource Guarding Level 5

If food or item is portable the dog may carry the item under a chair, bed or into his crate. He may growl when you come closer. If he cannot pick item up, he may move the item farther away from you.

Resource Guarding Level 6

A serious food guarder is more than willing to put some teeth into his warnings. A snap is the next step on the continuum – no contact with your flesh, but a no uncertain-terms statement that the dog is not prepared to share his food with you.

Unhealthy/Untreatable

Resource Guarding Level 7

As the dog's protectiveness increases, so does the threat to your safety (or the safety of a child passing by). More serious than a snap is the actual bite. Rarely does a food guarding bite not break skin – the contact is usually very quick and hard, and may consist of several puncturing bites that move up the transgressor's arms or face.

Resource Guarding Level 8

Severe food guarding can be triggered even at a distance. At the strongest level, even a person on the far side of the room can be perceived as a threat to the highly valued food or item and the dog's behavior can escalate very quickly and alarmingly with a seemingly innocuous movement, even from far away.



ASAP Pet Evaluation Matrix

Appendix B

Aggressive and Anxiety Related Behavioral Conditions: Assessment and Categorization

To fulfill the Asilomar Accords we have been asked to categorize behavioral problems in pets into four different categories: Healthy (no behavior problems); Treatable-Rehabilitatable; Treatable-Manageable; Unhealthy & Untreatable. This is a difficult task since behavioral problems are often complex conditions whose ultimate outcome is variable and dependent on many factors. However, in an attempt to fulfill the mandate of the Asilomar Accords, a proposal for categorizing aggressive (with the exception of possessive aggression which is categorized in a separate document) and anxiety related conditions in dogs and cats is outlined below.

Reminder: Please always keep in mind that the classification does not imply case outcome. For example, a dog whose behavioral problem falls into the “unhealthy and untreatable” category does not dictate that the condition cannot be resolved. It just means that a reasonable and caring pet owner in our community would be unlikely to pursue treatment for that condition. An example may be a severe case of separation anxiety where the 60 lb. dog was chewing through doors, barking and house-soiling every time it was left home alone. While it may fall into the “unhealthy and untreatable” category, interventions such as behavioral modification, drug therapy and pheromone therapy may improve the dog’s welfare and reduce destruction, creating a successful outcome. These definitions are only for the purpose of coming up with a common language for use between animal care agencies in our community.

For an animal with an anxiety or aggression behavioral concern, two things should be identified:

1. What starts (triggers/initiates/prompts) the aggressive or anxious behavior
 - a. Examples include:
 - i. A child nearby (could be fear aggression/fear)
 - ii. A squirrel (predatory aggression)
 - iii. A loud noise (noise phobia)
 - iv. Being left along (separation anxiety)
 - v. An unfamiliar person walking onto the dog’s territory (territorial aggression)
2. A description of what the animal does when aggressive/anxious
 - a. This may include a description of past injuries that the dog has inflicted, past damage on inanimate objects that the dog or cat has caused, behavior that has been witnessed by the staff (e.g. when you walked in the room the dog growled at you).
 - b. The description of the behavior will be classified into mild, moderate and severe levels of aggressive or anxious behavior.

Aggressive Behavior

Behavioral Triggers:

Triggers (what sets off) the Aggressive Behavior:

If we can clearly identify what sets off the aggressive behavior and how easily it is avoided, this influences how the behavior is classified with well defined and avoidable triggers receiving a lower ranking than poorly defined and/or unavoidable triggers receiving a higher ranking.

Level 1: well defined (discrete) triggers and avoidable triggers – examples: dog is only aggressive when you trim its nails – it is a clear trigger and it can be avoided (take dog to groomer/veterinarian for nail trim).

Level 2: well defined (discrete) triggers but unavoidable in some households; dog is only aggressive to toddlers; in households without children, close contact with toddlers is avoidable; in households with young children, it is difficult to avoid contact with the toddlers.

Level 3: poorly defined/unidentifiable triggers and/or unavoidable triggers; dog is aggressive to all men (impossible to avoid all men); dog will growl when you walk by it.

Intensity of Aggression (Historical or Witnessed):

Level 1: Warnings such as stare/tension/growl/snarl/head threat (turning head quickly around in direction of intended target)/snap at air but you suspect or have knowledge that the dog is unlikely to actually bite.

Level 2: Bite with contact but it does not cause a skin abrasion or any blood or it causes just a superficial skin abrasion (scratch) with minimal bleeding; also includes animals with barriers in place to prevent contact (behind fencing/wearing a muzzle) that exhibit level one warnings with such intensity that you anticipate that a if a barrier was not present, the animal would be likely to inflict injury.

Level 3: Bite with significant wound/blood drawn; single or multiple bites; also includes animals with barriers in place to prevent contact (behind fencing/wearing a muzzle) that exhibit level one warnings and then actively attack (bite/swat) the barrier.

Anxiety Related Conditions

Triggers (what sets off) Anxiety:

Level 1: well defined (discrete) triggers and avoidable triggers; dog is scared of flags waving in the wind.

Level 2: well defined (discrete) triggers but unavoidable in some households; dog is scared of loud noises.

Level 3: poorly defined/unidentifiable triggers and/or unavoidable triggers; dog is nervous all the time; cat hides all the time under the bed; dog always upset when left alone and has to be left alone.

Intensity of Anxiety:

Level 1: mild anxiety with mild destruction/mild vocalization.

Level 2: moderate anxiety with moderate destruction/moderate vocalization.

Level 3: animal is sustaining self-injury, its welfare is compromised or inflicting serious damage/putting others at risk.

Categorization Based upon Level of Trigger and Intensity for Anxiety Related and Aggressive Behaviors:

	Trigger Level 1	Trigger Level 2	Trigger Level 3
Intensity Level 1	TM / TR	TM / TR	TM
Intensity Level 2	TM / TR	TM / TR	UU
Intensity Level 3	UU	UU	UU

Assignment of Asilomar Guidelines: Dog Exam

Healthy

Assign this category to dogs/puppies that can be made available for adoption without further attention from the Medical or Behavior departments.

This category is assigned in Dog Exam at the time of screening.

Treatable-Rehabilitatable

This category is assigned in Dog Exam to dogs who are determined to be affected by the following:

- Kennel Cough
- Fracture
- UTI
- Parasites
- Fracture <\$750
- Weaned < 8 weeks
- Allergies which require special diet or medications (mild)
- Flea Anemia
- Dental Disease-acute
- Bite wound
- Conjunctivitis
- pregnant

The following diagnoses must be confirmed by the medical team:

- Mange-localized
- Ringworm
- Heartworm
- Dermatitis mild non-allergic

Treatable-Manageable

This category is assigned by the Medical Team or Behavior Department and may include:

- Diabetes
- Urinary Stones
- Thyroid Issues
- Heart murmur
- GDV/Bloat
- Orthopedic Issues
- Arthritis, Dysplasia
- Chronic Allergies minor dermatitis
- Behavior Consultation
- More severe behavior issues: separation anxiety, dog aggression.

Unhealthy-Untreatable

This category is assigned by a Veterinarian, CVT, Shelter Medicine Coordinator or Animal Care Manager or Behavior staff only and may include:

- Cancer with poor prognosis (<90 days)
- Behavior issues that can't be safely managed
- Parvo
- Distemper
- Neonate < 8 wks w/o mother
- Heart Failure-congestive
- Renal Failure-chronic
- Congenital defect
- End stage disease/moribund or any condition that progresses to a poor, guarded or grave prognosis during the course of treatment.

Assignment of Asilomar Guidelines: Cat Exam



Healthy

Assign this category in Cat Exam to friendly cats/kittens that can be made available for adoption after alter without further attention from the Medical Team. (You may treat for mild fleas, treat for ear mites, etc. and still categorize a cat as “healthy.”)

Treatable-Rehabilitatable

This category is assigned in Cat Exam to cats who receive treatment for the following:

- URI
- Conjunctivitis
- Wound/Abscess
- Fleas (severe)
- Fracture <\$750
- Parasites
- Bite wound
- Weaned < 8 weeks
- Pregnancy
- Dermatitis
- Otitis
- Acute Dental Disease
- Ocular Ulcer
- UTI
- Under 8 weeks of age w/ mother

The following are also termed T-R but diagnosis must be confirmed by the medical team:

- Ringworm
- Lice
- Mange-localized
- Mild non-allergic dermatitis

Treatable-Manageable

This category is assigned by the Medical Team after exam/evaluation of:

- FIV
- IBD
- Cystitis/FLUTD
- Stones
- Stomatitis-chronic
- Diabetes
- Renal Disease-chronic
- Hyperthyroid
- Dysplasia, Arthritis
- Congenital Defect
- Manx Disease
- Minor chronic allergies/dermatitis

Unhealthy-Untreatable

This category is assigned by a Veterinarian, CVT, Shelter Medicine Coordinator or Animal Care Manager only. Feral cats are assigned this term by cattery supervisors (unless 4-10 weeks of age, or with caregiver).

- Neoplasia (cancer) with poor prognosis (< 90 days)
- End stage Renal Disease
- End stage Liver Failure
- Moribund/endstage disease or any condition that declines to a poor, guarded or grave prognosis during the course of treatment..
- FeLV
- Heart Disease
- FIP
- Panluekopenia
- Neonatal w/o mother < 8 weeks
- Hepatic lipidosis with feeding tube