

Dear members of the NHS Board of Directors,

I have attached a copy of the NV Attorney-General's Guide to Non-Profits. It sets out the expectations, duties and rights of members of the board of a non-profit. In particular, I would like to draw your attention to the following:

Pg 1: "the law imposes upon directors the fiduciary duties of care, loyalty and obedience to the law."

"the nonprofit corporation **does not own the property** which its (sic) receives from donors. Instead, it holds the property **'in trust'** for a specific public purpose. The directors' rights and duties of care, loyalty, and obedience to the law protect this public trust from abuse.

Misappropriating or wasting contributions violates the public trust which the organization's directors and officers have assumed. **The consequences of violating the public trust** may be severe for the organization **and its individual directors**. The nonprofit organization itself, however, may be held liable for negligent or wrongful acts of its employees or agents.

In an extreme case, the organization may be dissolved. Under Nevada Revised Statutes (NRS)41.480, **a director** may be held **personally liable for injuries, caused by the director's intentional misconduct, fraud, or knowing violation of the law.** If, on the other hand, the director exercises due care in managing the nonprofit organization, the director is immune from liability."

Question:

Have you, Directors of NHS - including, but not limited to **former CEO Greg Hall, Former President of the Board Kris Wells and current Vice President Rita Eissmann** exercised due care in managing NHS?



If not, lawsuits may be filed against you personally by wrongfully terminated employees, donors and the public.

Office of the Attorney General

A GUIDE TO NON-PROFITS



ADAM PAUL LAXALT
ATTORNEY GENERAL

INTRODUCTION

Directors of Nevada nonprofit corporations are responsible for management of the business and affairs of the organization. This does not mean that the directors are responsible for the day-to-day operation of the nonprofit corporation. Rather, directors are responsible for appointing officers to effectively carry out the daily tasks of running the organization. Directors must supervise and direct the officers, and govern the organization's effort to accomplish its charitable or public purpose. In this regard, the law imposes upon directors the fiduciary duties of care, loyalty and obedience to the law. To enable you to meet these obligations, the law affords you certain rights.

Your duties and rights as a director are related to creation of the nonprofit corporation to promote a charitable or public purpose as opposed to obtaining a private benefit. A nonprofit organization is primarily funded by grants, donations, and fund raising activities. The donor or grantor expects that the organization will use the contribution to achieve the particular public benefit. In a conventional sense, the nonprofit corporation does not own the property which it receives from donors. Instead, it holds the property in "trust" for a specific public purpose.

The directors' rights and duties of care, loyalty and obedience to the law protect this public trust from abuse. Misappropriating or wasting contributions violates the public trust which the organization's directors and officers have assumed. The consequences of violating the public trust may be severe for the organization and its individual directors. The nonprofit organization itself, however, may be held liable for negligent or wrongful acts of its employees or agents. In an extreme case, the organization may be dissolved. Under Nevada Revised Statutes (NRS) 41.480, a director may be held

personally liable for injuries caused by the director's intentional misconduct, fraud, or knowing violation of the law. If, on the other hand, the director exercises due care in managing the nonprofit organization, the director is immune from liability.

This guide will discuss your rights and duties, along with some of the applicable Nevada statutes. Chapter 82 of the NRS governs the formation and operation of Nevada nonprofit organizations. Directors should review a current version of this statute. Since the state legislature may amend these statutes, directors should refer to the text of the statutes to learn about any changes affecting their responsibilities since the publication of this edition. This guide is not intended to prescribe the exact manner in which you must act in all situations. For more specific information or advice, you may contact a private attorney or one of the resources available in the nonprofit community.

DUTY OF CARE

Directors of Nevada nonprofit corporations must discharge their duties in good faith and in a manner which the director reasonably believes to be in the best interests of the organization. NRS 82.221(1). **The director is held to a "reasonable person" standard, which means the director must exercise the care an ordinarily prudent person would exercise under similar circumstances. The exercise of due care includes:**

1. Active Participation

- ✓ Actively participate in the management of the nonprofit organization. This includes **attending meetings of the board, evaluating reports, reviewing performance of executive officers,** and setting the executive officer's compensation.
- ✓ Receive information beforehand about matters upon which you will vote in meetings. **Ask questions and use your own judgment.**
- ✓ Beware of the one person show. That is, if one or two directors dominate the board and the organization's activities, do not relax and assume everything is running smoothly. "Nonmanagement" is the quickest route toward trouble. Also, do not allow staff to exercise undue control over the board. **Be aware of, and informed about, every major action taken by the organization. The buck stops with you.**

2. Following the Money

- ✓ **Be involved and informed in all aspects of the finances** of the nonprofit organization.

- ✓ **Make sure a realistic annual budget is developed.** The organization should have an adequate internal accounting system. Require management to produce timely and accurate income and expense statements, balance sheets, and budget status reports.
- ✓ **Obtain confirmation from management that all required filings, (such as tax returns) are submitted** and employee withholding taxes and insurance premiums are paid in a timely manner.
- ✓ **Consider maintaining a standing audit and finance committee.**
- ✓ Adopt an **investment policy** that requires funds to be deposited in federally insured, interest bearing accounts. If the board desires to invest larger sums in securities, select only those securities with a history of stability, growth, and a good payment record. Do not subject public funds to high risk investments.
- ✓ Above all, **make certain the funds are being used for the organization's charitable or public purpose.** Administrative expenses and promotional expenses, including compensation of employees and independent contractors, must be commensurate with the organization's financial resources and capabilities. If an organization raises funds for a charitable purpose but consistently uses virtually all its income for administrative and promotional expenses with little or no distribution to the charitable purpose, the board has failed to exercise due care.

3. Hiring Professional Fund Raisers

- ✓ When hiring a professional fund raiser, select one who is trustworthy and fiscally responsible. Ask for references

and check with law enforcement agencies and philanthropic resource organizations.

- ✓ Make sure any contract with a professional fund raiser or consultant, especially compensation terms, is fair and reasonable in light of the organization's financial resources and capabilities. Consult with an attorney to review fund raising contracts.
- ✓ Beware of fraudulent "telefunders" and other fraudulent fund raisers seeking to solicit funds on behalf of the nonprofit organization. Fraudulent telefundors obtain large sums of money from individual donors by misleading them into believing they will receive a prize worth more than their donation. Typically, fraudulent telefundors target elderly victims and award prizes worth far less than the donation. The nonprofit organization receives a small percentage of the fraudulently obtained funds. Dealing with fraudulent fund raisers can harm the nonprofit organization's reputation, jeopardize its tax exemption status, and expose it and the directors to potential liability. Telefundors are required to be registered with the Consumer Affairs Division and misrepresentation in soliciting funds is a prohibited deceptive trade practice, subject to civil and/or criminal prosecution.

4. **Records, Records, Records**

- ✓ Be familiar with the contents of the organization's books and records, including the **articles, bylaws, accounting records, and minutes.**
- ✓ **Written minutes should be taken at every board meeting.** Minutes must accurately record the votes cast and identify the names of those in the minority on any question. Minutes should be signed, circulated to the board members for review, and presented for approval.

- ✓ Financial records should be regularly audited by an independent accountant to ensure accuracy.

5. **Forming Committees**

- ✓ Unless otherwise provided in the articles or bylaws, directors may establish committees which exercise the powers of the board in a manner consistent with resolutions or bylaws. At least one director must be a committee member. NRS 82.206.
- ✓ Committees cannot: amend, alter or repeal the articles or bylaws; elect, appoint or remove committee members, directors, or officers; authorize the transfer of all the organization's property or assets; dissolve the organization; adopt a plan for distribution of the assets. Such a committee may not amend, alter, or repeal a board resolution unless permitted to do so by the resolution. NRS 82.206(4)

6. **Conducting Investigations**

- ✓ Investigate warnings or reports of theft or mismanagement by officers or employees of the organization.
- ✓ Where appropriate, consult with an attorney or other professional for assistance.

7. **Knowing your Rights**

- ✓ You have the right to obtain the information necessary to enable you to carry out your responsibilities as a director.
- ✓ You have the right to reasonable access to management.
- ✓ You have the right to inspect the internal information of the organization. Under NRS 82.186, directors are

entitled to inspect the books of account and all financial records during normal business hours. This right may be enforced in court as long as the director has given at least five days written demand to access the information and will use the information for a purpose related to the role as director.

- ✓ Directors are entitled to rely on the reports, opinions, financial records, or other information prepared by directors, officers, employees, committees, attorneys, and accountants as long as the director does not have knowledge which would cause such reliance to be unwarranted. NRS 82.221(2)(c).

DUTY OF LOYALTY

Traditionally, directors have a duty to give their **undivided loyalty to the nonprofit corporation**. This duty requires board members **to use the organization's funds and property to advance the public benefit of the organization rather than private interests**. A potential conflict of interest between the duty of loyalty and a board member's private financial interests may arise if the board member engages in a business transaction with the nonprofit organization. Moreover, a board member's receipt of a financial benefit from the organization creates a negative public perception. **To exercise the duty of loyalty:**

1. **Avoid Detrimental Conflicts of Interest.** A red flag should fly when board members are asked to approve a contract or transaction with a director, a director's family member, or a business in which a director has a financial interest. **Before voting on the transaction, the interested board member should fully disclose his or her financial interest to the entire board.** The board should only approve the transaction if it is clearly in the best interests of the nonprofit organization. As a further precaution, the interested director should abstain from discussion of, and voting on, the matter.

2. **Establish a Written Policy.** The board should establish a written policy for dealing with conflicts of interest. The policy should address disclosure of financial interests and withdrawal from discussion and voting by the interested director. Due to the sensitivity of conflicts of interest, the board may want to require that transactions benefiting a director may be approved only by a greater than majority vote or prohibit such transaction all together. Also, requiring an **annual disclosure** by all board members of their business involvement with the nonprofit organization is recommended.

3. **Misuse of Corporate Information.** Directors cannot use information, documents, records or other data obtained from the nonprofit organization for a purpose unrelated to the organization's interest. For example, a director breaches the duty of loyalty by selling the organization's donor list for personal gain. **A misappropriation of corporate information may subject the director to criminal liability** under NRS 82.186(3).

DUTY OF OBEDIENCE

Board members have a duty to obey the governing documents of the nonprofit organization and comply with state and federal laws. **To exercise the duty of obedience:**

1. **Obey State and Federal Statutes.** Directors should be familiar with state and federal laws relating to nonprofit organizations, charitable solicitations, sales and use taxes, FICA and income tax withholdings, and workers' compensation obligations. Detailed information of Nevada's law governing charitable solicitations and lotteries follows this section. Directors should also be aware of the requirements of the Internal Revenue Service to **protect the organization's tax exemption status.**

2. **Meet Filing Requirements.** Comply with the deadlines for filing tax returns, paying income tax withholdings, making social security payments, registering with the Secretary of State's Office, and so on.
3. **Comply with Governing Documents.** Know and adhere to the provisions in the organization's articles of incorporation and bylaws. Make sure the board is regularly holding meetings, receiving proper notice of the meeting, and following the procedures for voting on matters.
4. **Seek Outside Help.** To ensure compliance with the law, board members should obtain the assistance of legal counsel, accountants or other qualified people.

CHARITABLE SOLICITATION

Charitable Solicitation Act in Nevada

Between 1993 and 1995 the Federal Government and many of the states' Attorneys General engaged in several initiatives aimed at fraudulent telemarketers. It was during this campaign against telemarketing fraud that it became apparent that some legitimate charitable nonprofit organizations had unwittingly contracted with fraudulent telemarketers to raise funds for them. The Attorney General then sponsored legislation to address the fraudulent practices these illegitimate telemarketers were employing. And in 1997, the Nevada Legislature enacted the Charitable Solicitation Act (NRS 598.1305) which prohibits certain conduct by a charitable organization.

1. **Application of the Law.** The Charitable Solicitation Act applies to any charitable organization which directly or indirectly solicits contributions. "Charitable organization" means any person or organization which:
 - ✓ Is tax exempt pursuant to the provisions of section 501(c)(3) of the Internal Revenue Code; or
 - ✓ Is, or holds himself out to be, established for a charitable purpose.

The term does not include organizations which solicits for bona fide religious purposes.

"Solicitation" means any request for a contribution to a charitable organization, made from Nevada or from outside Nevada to Nevada residents, by:

- ✓ Mail;
- ✓ Commercial carrier;
- ✓ Telephone, facsimile or other electronic device; or
- ✓ A face-to-face meeting.

2. **Prohibited acts.** It is illegal for a person, in planning, conducting or executing a solicitation for or on behalf of a charitable organization to:

- ✓ Make any statement or representation concerning a contribution which directly, or by implication, **deceives or misleads** a person acting reasonably under the circumstances; or
- ✓ Make any statement or representation which **omits any material fact**, if the omission has the tendency or effect of deceiving or misleading a person acting reasonably under the circumstances.

3. **Liability.** The scope of liability for nonprofit corporations, its directors and officers is contained in NRS 41.480 and 41.485.

- ✓ A nonprofit corporation liable for injuries or damages caused by the negligent or wrongful acts of the nonprofit organization through:
 1. Its agents;
 2. Its employees; or
 3. Its volunteers.
acting within the scope of their agency or employment.

- ✓ “Agent” means an:
 1. Officer;
 2. Director;
 3. Trustee;
 4. Employee; or
 5. Volunteer.
 - whether compensated or not .

- ✓ “Volunteer” means a person who performs services without compensation, other than reimbursement for actual and necessary expenses on behalf of or to benefit a charitable organization, including its:
 1. Officers;
 2. Directors;
 3. Trustees; or
 4. Other persons working for the organization without compensation.

- ✓ A non-volunteer officer, trustee, or director of a nonprofit organization is personally liable for act or omissions arising from failure in his official capacity to exercise due care regarding the management or operation of the entity where the act or omission involves:
 1. Intentional misconduct;
 2. Fraud; or
 3. A knowing violation of the law.

- ✓ A volunteer officer, trustee, or director is not liability for civil damages as a result of an act or omission:
 1. Of an agent of the charitable organization; or
 2. For services he performs for the charitable organization that are:
 - a. Not supervisory in nature;
 - b. Not part of any duties or responsibilities he may have as an officer, director or trustee of the charitable organization;unless his act is intentional, willful, wanton or malicious.

5. **Jurisdiction.** The Attorney General has the primary jurisdiction to investigate and prosecute violations of NRS 598.1305 as deceptive trade practice.

6. **Penalties.** Violation of the Charitable Solicitation Act carries both civil and criminal penalties. NRS 598.0999.
 - ✓ Civil Penalties may include:
 1. A civil penalty not to exceed \$2,500 for each violation.
 2. If an elderly or disabled person is the victim, an additional penalty of up to \$10,000 for each violation (NRS 598.0973).
 3. Reasonable attorneys fees and costs; and
 4. Other relief or reimbursement as the court deems proper.

 - ✓ Criminal Penalties include:
 1. For the first offense, a misdemeanor.
 2. For the second offense, a gross misdemeanor.
 3. For the third and all subsequent offenses, a category D felony

This law was enacted to protect donors and legitimate charitable nonprofit organizations from unscrupulous fund raising practices.

CHARITABLE LOTTERIES

Since the passage of the Nevada Constitution in 1864, lotteries have been generally prohibited in Nevada. Nevada Gaming Commission Regulation 4A and Nevada Revised Statutes Chapter 462 continues in this historic prohibition against lotteries, but now makes an **exception for charitable lotteries.**

A lottery is usually defined as any promotional scheme comprised of the common elements of prize, consideration and chance. NRS 462.105 defines a lottery as follows:

... 'Lottery' means any scheme for the disposal or distribution of property, by chance, among persons who have paid or promised to pay any valuable consideration for the chance of obtaining that property, or a portion of it, or for any share or interest in that property upon any agreement, understanding or expectation that it is to be distributed or disposed of by lot or chance, whether called a **lottery, raffle or gift enterprise,** or by whatever name it may be known.

CHARITABLE LOTTERY REGULATION

In 1989, the Nevada Legislature authorized the amendment of the Nevada Constitution to permit charitable lotteries, by way of a ballot measure. In 1990, the voters passed the amendment to the Constitution and in 1991, the Legislature authorized **limited** charitable lotteries.

The Charitable Lottery program is governed by the Enforcement Division of the Office of the **State Gaming Control Board.** The Enforcement Division can provide specific guidance as to the current law. However, there are some restrictions to the current law and we have outlined them for your reference:

- 1) A charitable lottery must be conducted by a bona fide charitable or nonprofit organization.
- 2) The registration or approval requirements with the Gaming Control Board are different depending on the size of the lotteries. The maximum total value during the same calendar year cannot exceed \$500,000. Generally speaking, the requirements become less rigorous as the value of the prizes in a calendar year become smaller.
- 3) Lottery tickets may only be sold in the primary county in which the charity is located and the counties that border the primary county.
- 4) The law also contains limitations on the amount of compensation that can be expended for prizes, supplies and payment for services to those operating the lottery.
- 5) The net proceeds of the lottery must be utilized for the nonprofit or charitable activities in this state.

Questions regarding the approval process or copies of the necessary forms can be obtained from:

Office of the State Gaming Control Board
Enforcement Division
555 E. Washington, Suite 2600
Las Vegas, Nevada 89101
(702) 486-2020

Dear Washoe County Regional Animal Services Advisory Board (WCRAS) and Reno Mayor's Office,

It is with great sadness and frustration that I write to you today. But, I feel a moral obligation to be the voice of the voiceless at NHS. Both animals and some dedicated underpaid staff afraid to speak up.

In this letter I will share my history of reporting concerns and my ultimate suspension as a volunteer by CEO Greg Hall.

I understand this is an extensive letter at some 18+ pages. So, in the interest of respecting your time, please see a summary with suggestions about next steps below:

Suggestions on how NHS needs to restore its trust in our community and our hearts.

(A) - Appoint a proven CEO with actual shelter and animal care experience. Ideally, this is a past CEO of NHS with a proven track record. The appointment of Ms. Bonney Brown, former CEO of NHS, a woman who guided NHS to be recognized as a leading shelter nationally under her care, is a perfect candidate. She is proven, immediately available, inspires trust, and additionally, a woman. Enough with the white men of nepotism and privilege already. All of the above mentioned credentials of Ms. Brown sends a clear and definitive message to our community; NHS is serious about change.

(B) - A complete overhaul of the NHS board is required. There is no one on the NHS BoD with animal care or shelter experience. Period. A total absence of any qualified, relevantly knowledgeable, or track recorded board members, would never be considered, nor tolerated, in any serious organization. Our community demands and deserves more. Additionally concerning, the remaining board members were all present while NHS decayed into a community tragedy. You all either knew about these complaints, in which case you are liars when you say you did not know, and need you to be removed. Or, you did not know about these complaints, in which case you are absentee and incompetent. In either or both cases, the members of the board have lost their trust in this community and need to step down with dignity and humility in face of

your public failure. You have failed us. If you truly care for these animals and staff and this community, resign. And let proven competent people guide us out of this dark hour you are complicit in. You would be respected for doing so.

(C) - Order a full forensic financial audit for the period of time that Greg Hall was CEO and Kris Wells President of the Board. New management should do this immediately, if for no other reason than to protect themselves. The Nevada Attorney General and IRS are now involved, and best to be proactive in your cooperation. In the very likely event - according to the financial documents I've been made party to - maleficence has taken place under Greg & Kris's rein, guilty parties need to be tried and convicted to the full extent of the law. Just because Greg & Kris left the building, does not mean the consequences of their actions end. Make an example of guilty parties and send a clear message to our community this will not be tolerated.

(D) - Raise pay of staff to a living wage. The dedicated staff work selflessly and deserve a living wage. Their pay has not kept pace with inflation and cost of living increases in Washoe County. NHS has a \$14M+ balance sheet. There's enough money. Create financial incentives and paths to increased training and credentials for caring dedicated staff. I.e. offer scholarships for online animal behaviors schools, and upon successful graduation, offer increased pay as a reward. This boost staff morale, gives them a feeling they are appreciated and supported, builds culture, and of course, improves the lives of animals at NHS as a result for more competent care.

(E) - Appoint a credible unbiased 3rd party shelter evaluator to evaluate and monitor the state of NHS, demand standards be returned, monitor progress and application of said standards, and create clear consequences when standards are not maintained. Make all reports to be made public on NHS website.

Thank you advisory board and community for your time and consideration.

Introduction

My name is Joel Nelson. I am a third generation Reno native with a deep family connection to our community. I am not alone in my dire concerns for the safety and welfare of both animals and humans at NHS. These concerns have been expressed repeatedly over months, in voice, official letters, in person meetings with presentations and offered solutions to NHS management. These urgent concerns have gone ignored, and in my opinion, have been actively suppressed by management, specifically CEO Greg Hall.

Background

I have been actively walking dogs at NHS for approximately a year and a half. I began volunteering at NHS shortly after the passing of Mr. Snoops, an 80lb pitbull adopted from NHS 16 years ago. Mr. Snoops and I shared a special 16 years together. I was not ready for the emotional toll of losing another dog, but I wanted to be of service and get “my dog fix” so I thought what better way than to volunteer.

1st Day Concerns

I distinctly remember my first day on NHS premises and first interaction with my volunteer “trainer” Margo Zaugg; I thought, “this simply can’t be right”. Is this how all shelters are run? There is an undeniable lack of organization, lack of knowledge, lack of training, toxic politics, and even misogyny.

All this leads to dangerous incidents and undue sufferings of animals.

I will itemize my concerns by group below. But in summary, all of the mismanagement noted below leads to the same result; **the animals and some hard working staff are suffering needlessly.**

Volunteer Concerns

While I fully disclose at the beginning of my time volunteering at NHS I had no formal training as a dog trainer or animal behaviorist (I have since begun formal training), I was born and raised around dogs my entire life, and it was clear my volunteer trainer Ms. Margo Zaugg clearly had no qualifications, nor even the most basic knowledge of animal handling or behavior. Her presence often leads otherwise calm dogs to become agitated, hyper aroused and even aggressive.

There is no initial or ongoing dog handling or enrichment training by any qualified staff for new and current volunteers in my time at NHS. Volunteer “Training” is completely

handled by grossly incompetent, untrained and uneducated “self appointed expert volunteers”.

Volunteers “are run” by self appointed volunteer leader Ms. Zaugg, who openly says “she is in charge!” when questioned by concerned volunteers what the NHS chain of command is for volunteers and volunteer concerns. She in fact yelled in my face “I am in charge” when I questioned the official chain of command at NHS. Do I answer to NHS management or Margo? **Multiple written complaints by multiple volunteers have been written to NHS management about Margo’s “bullying”, “divisiveness”, “toxic volunteer atmosphere”, and “ her inability to safely walk dogs”.**

Also concerning is Margo’s “self appointed dog behavior evaluations that staff take as gospel”. This is to say, she has no animal behavior training, qualifications or standardized methodology, and she takes it upon herself to evaluate dogs and whether or not other volunteers can “safely” walk dogs. She herself is incapable of safely walking many dogs. Staff, including dog staff managers, David Smith and Amber Grey, who themselves, do not appear to have any formal training take these behavioral recommendations as gospel. Unfortunately, Margo’s mere presence adversely affects dog behavior leading to wildly inconsistent and erroneous “diagnosis”. This has resulted in a dogs being deemed “dangerous” (dogs other volunteers have no trouble or incidents with) and sadly put in further isolation from human care and without any enrichment or stimulation.

Example Incident

Volunteer Ms. Hansen and trained Dog Behaviorist Joshua Green of BarkSide Dog Training began working with dog Punchy. Punchy is harmless, but prone to hyper arousal and height seeking due to a severe lack of enrichment and isolation that is the norm at NHS. Over a series of weeks Volunteer Ms. Hansen made great progress with Punchy using tools and training program prescribed by Joshua.

Margo returns to NHS after a 5 week medical leave, and on day one of her return enters Punchy’s kennel and reports he is “dangerous”, “he bit me”, “he tore my jacket”, “he should be a Purple Dot dog (color designation that limits only staff to deal with said dog). Senior dog staff David Smith and Amber Grey again take Margo’s expert diagnosis as gospel and make Punchy Purple Dot.

When Volunteer Ms. Hansen came to work with Punchy the next day, and learned that according to Margo this dog Ms. Hansen has been working with for weeks is now deemed “dangerous” and Ms. Hansen is not qualified to walk this dog (because now it has Purple Dot Status) she took the issue to Animal Care Manager Staci Sanchez. Staci, knowing both Ms. Hansen and the patterns surrounding Margo, quickly overrode the erroneous evaluation of Margo, returned Punchy to normal status and Ms. Hansen went on to work with Punchy to great success.

Yet one of many examples of untrained volunteers making untrained unqualified diagnoses that untrained unqualified staff take as gospel. There is NO Standard Operating Procedure or methodology to consistently behaviorally evaluate dogs at NHS.

Untrained staff and volunteers create unnecessary arousal, anxiety and even aggression in the dogs due to no training and incompetence.

Management does not respond to complaints about dangerous incidents.

Dangerous Volunteer Incidents

Due to gross incompetence of the majority of NHS volunteers, no training and no management oversight, dangerous incidents have occurred, including bites of staff and volunteers, and unnecessary dog euthanizations.

Example Dangerous Volunteer Incident

Volunteer Ms. Cindy is walking down the hall to take dog Punchy for a walk. Volunteer Ms. Karen rushes in front of the both of them and with a high pitch excited voice and waving hands erratically in front of Punchy. Punchy jumps on Ms. Karen. Ms. Karen holds Punchy's front paws and does not release them. Punchy becomes scared - hackles up, front teeth snarled and exposed. All classic body language signs of fear and impending aggression. Ms. Karen puts her face in front of Punchy. Ms. Cindy tells Ms. Karen, "let him go!". Ms. Karen says, "No!". Ms. Cindy, "Karen! Let me go now!" At this point Ms. Cindy is trying to calm Punchy, whose paws are still being held against his will by Ms. Karen. Ms. Karen, "Its ok, I'm a dog trainer". Ms. Cindy, "Karen! Fucking let him go!". Ms. Karen releases Punchy.

This incident is an example of another self appointed expert volunteer "dog trainer" Karen. It is a violation of the most remedial animal handling etiquette and practices; e.g. invading a dog walkers personal space without permission, not maintaining a 6'+ bubble around dog and walker, using high pitch excitable voice, rapid body movements, riling a dog up, holding a dogs paws against its will, putting your face in front of a scared aroused dog with exposed teeth, not respecting dog walkers request for space 3x times.

There is no volunteer training for dog handling. There is not even the most basic SOP's for safety. There is no volunteer skills review or accountability for dangerous behaviors.

Management does not respond to complaints about dangerous incidents and repeat volunteer offenders.

Example Dangerous Volunteer Incident

April 10, 2023 Volunteers Joel Nelson and Cindy Hansen and dog staff Mikayla Lopez are in parking lot meeting with a foster dog. Volunteer Leia is walking across parking lot with dog

Gretchen. Gretchen is a Blue Dot dog. Leia is NOT an authorized Blue Dot walker and should not be walking Blue Dot dogs. Cindy approaches Leia and politely explains to Leia she can not walk Blue Dot dogs. Leia says, "Ya, I don't care. I just walk in the kennels and see a dog I like and walk them. It's ok".

Next dog staff Mikayla approaches and explains the same. Leia becomes defensive. Mikayla professionally walks with Leia and Gretchen back to NHS building. Leia yells at Mikayla in the public waiting area of NHS. Alyssa Bedgood Volunteer Coordinator is notified of incident. Alyssa response, "I'll take care of it, but don't tell anyone".

Volunteers Joel and Cindy write a formal incident report as yet another example of a complete lack of oversight of volunteers by management. No training. Another dangerous incident. Another example of insubordination of volunteers to NHS staff.

Alyssa "taking care of it" was limited to a sentence tagged onto an unrelated email to volunteers, *"just a friendly reminder guys please only walk dogs you are allowed to"*.

There is no volunteer training for dog handling. There is not even the most basic SOP's for safety. There is no volunteer skills review or accountability for dangerous behaviors. This took place where members of the public are often with children.

Management does not respond to complaints about dangerous incidents. Management is not respected because it is completely absent and anemic.

Dangerous Example Incident - Bite

April 2023 Volunteer Nancy / Staff Alyssa Bedgood/ Dog Capone

I was not present for the following incident, but I am familiar with all parties involved and the repeated scenarios that create such dangerous incidents.

Early April 2023. Volunteer Nancy is walking dog Capone through the hall in NHS. Nancy and Capone are greeted by Alyssa Bedgood Volunteer Coordinator. Capone "bites" Alyssa. Capone is put in bite quarantine and euthanized days later.

I have been told by staff that Alyssa has been bit "3 or 4 times" Two members of senior management CEO Greg Hall and Animal Care Director Staci Sanchez told me they believe "Alyssa is trying to get bit to collect disability".

I did see Alyssa's "bite" on her forearm a week later and it was minimal scratch at best. I had made several written warnings to management about the lack of volunteer training leading to mishandling of dogs and dangerous situations.

I worked with the dog Capone many times. There was nothing wrong with that dog. To get that dog to bite anyone is only possible through gross incompetence of Nancy and Alyssa. They killed that dog as far as I am concerned.

There is no volunteer training for dog handling. There is not even the most basic SOP's for safety. There is no volunteer skills review or accountability for dangerous behaviors. This took place where members of the public are often with children.

Management does not respond to complaints about dangerous incidents.

Volunteer Concerns Summary

There is a gross and systemic incompetency by NHS volunteers in dog walking skills, animal safety, and the most basic dog behavior and body language observations, due to a complete absence of any training offered or mandated by NHS management.

This leads to unnecessary stress on the dogs, an absence of the most minimal enrichment, and tragically, to multiple avoidable bite incidents that have left staff and volunteers injured, dogs locked in kennels for "10 day bite quarantines" and unnecessary euthanizations.

Management ignores complaints

Staff Concerns

Senior Dog Staff - David Smith

David Smith proudly advertises he has a background in "military and police dog training". I have never seen anything to suggest David has any dog training. He can't even walk a dog correctly on a leash. It is my opinion, and an opinion shared with me by multiple NHS staff, David's credentials are a gross exaggeration at best, and a total fabrication at worst.

I encourage the WCRAS to independently verify Mr. Smith's alleged credentials and what ongoing training and education he possesses.

I and others have witnessed David use what in my opinion is aversive, fear and pain based behavior modification techniques. Staff reports David will "**violently submit a dog**". Staff is afraid to report these incidents to management because, "**David is untouchable**". "**David is protected by Greg**" "**People who report David get fired**".

I have witnessed an otherwise calm and happy dog react violently at the mere presence of David walking in a room, **which makes me question what dogs experience with David when there are no witnesses.**

Dog training and behavior experts, including Ms. KC Gardner owner and head trainer at ZoomRoom, and Joshua Green owner, trainer, and dog behaviorist of BarkSide Dog Training, also report **David has no knowledge** and is especially deficient in knowledge of appropriate reward based techniques for shelter dogs. In my year and a half volunteering at NHS, I have never seen David provide any enrichment to dogs, nor enrichment training or volunteer guidance. Period. He takes volunteer Ms. Zaugg's unqualified dog behavior evaluations and makes them policy.

Pattern of Management Retaliation

Staff openly voices frustrations and concerns about David's lack of credentials and deficiencies in basic animal and shelter care knowledge, leadership and work ethic, to myself and other volunteers. But staff "fear retaliation by David and executive management" and "**can't I lose my job**" and "**anyone who reports problems about David gets fired by Greg**". There is a narrative expressed by staff that David is "untouchable" and "protected". I have personal knowledge of David not being held to equivalent standards of conduct other NHS staff are held to, by NHS CEO Greg Hall. There is a double standard Especially with female staff. There is definitely some misogyny here.

David incompetent and unprofessional to adopters

A concerned adopter told myself and another volunteer that David brought a dog into a greeting room and told the adopter, "this dog is dangerous", "you don't want this dog", "nobody should want this dog". **And then proceeded to leave the room. (Note, I am told this adopter "Arthur" has also written a formal complaint about David that is on public record with the Advisory Board)** If the dog was dangerous, then why leave an untrained member of the public alone in the meeting room? If the dog is not dangerous, then why say it is?

It is my opinion, David wanted this dog to have a bite incident so he could justify euthanization. This is purely speculative on my part, and admittedly a weighty allegation, but the dog "Punchy" and his evaluation and training had become a bone of contention between David, volunteers, and management. Put simple and crude, I think David just wanted this dog to go away. Again, a controversial statement, and purely speculative, but an opinion nevertheless shared by myself and others based on a chain of events and context around those events. What is not speculative, is David's decision to leave a "dangerous dog" alone with an untrained member of our community.

Senior Dog Staff Manager - Amber Smith

From my first encounter with Amber I found her cold, negative, uncommunicative, burned out, cynical and frankly disinterested in helping staff, volunteers or dogs. At first I assumed she simply had a “bad day”. Later, I assumed she simply didn’t like me for some unknown reason. Later still, I was to learn it was not personal; she treats everyone this way.

While admittedly subjective, staff openly speak about Amber’s unwillingness to help, negativity, lack of any leadership, and lack of care for dogs in the form of offering even the most basic of enrichment and suggestions by the Association of Shelter Veterinarians (ASV). Her attitude toward humans and actions (or lack thereof) toward dogs suggests she apparently does not care, or simply refuses out of laziness to take suggestions nor actions to provide the most basic of shelter dog enrichment techniques I have seen deployed to great success at other shelters.

I have never been greeted in a friendly manner or offered any training or support by Amber Grey or David Smith in my nearly 2 years as an NHS volunteer. I am not alone. Volunteers are treated like a burden and inconvenience by dog staff.

Multiple staff members have resigned from NHS expliciting citing Amber Grey as part or the majority of their reason for doing so. These letters of complaints specific to Amber are public and in the possession of WCRAS.

Multiple staff members have questioned David Smiths actual credentials and expressed concerns about his treatment of dogs.

I encourage the WCRAS to independently verify David and Ambers credentials and what ongoing training and education they possess, as well as reports of animal abuse.

Dangerous Adoption Concerns

There appears to be no training of staff nor protocols - official or unofficial - followed with regard to appropriate adoption practices. This leads to chronic failed adoptions, disappointed and misled members of the public, dangerous situations for dogs and the public, and tragically unnecessary bite incidents and dog euthanizations.

I have personally witnessed large, young, dogs with untreated behavior issues adopted to inappropriate adopters, including elderly men and women, only to see the dogs returned shortly there after. Sometimes dogs are returned after a tragic incident. In addition, there are dogs with dog reactivity histories and explicit notes in their file stating “single dog home only” or “no small children” being **adopted to homes with multiple dogs and small children with staff knowledge**. Again, sometimes leading to tragic incidents.

Dogs have been adopted out to obviously homeless people with no means to support those dogs and those same dogs later returned after being picked up by animal control with ribs showing from malnourishment. Witnesses can be provided examples if required.

Overuse of Trazodone and Gabapentin

NHS has a practice of “doping up dogs” on what I believe to be an excessive amount of prescription drugs Trazodone and Gabapentin. An anti - depressant sedative and painkiller, respectively. It is my opinion David and Amber recommend this because they are lazy and do want to make the most minimal efforts to provide mental and physical enrichment for dogs; this takes time, care, and knowledge after all. David and Amber just want the dogs to sleep in their cages.

The dogs are often in a “zombie state” when they are introduced to potential adopters. This misleads adopters into thinking they are getting a “friendly calm quiet dog”. The dogs are adopted out and often sent to their new home with **no prescription refills until very recently**. There is a pattern of dogs rapidly detoxing over the next 2-3 days in their new home. Reported side effects to rapid Trazodone withdrawals are as follows:

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

On April 6, 2023 I counted the total number of dogs on site vs the total number of dogs receiving Trazodone and Gabapentin according to their kennel cards. On said Kennel Cards are Pink stickers with a list of medications that dog is on.

According to my count, nearly 40% of dogs at NHS in custody on this date were being administered Trazodone and Gabapentin.

I have no formal training nor do I know what is an appropriate or industry accepted standards, but this seems excessively high to me. Shelter experts I have consulted confirmed this is excessive and inappropriate.

*** Note, I have been told since news of the excessive use of these drugs has been made public, the “pink stickers” on the kennel cards have been removed so as to hide the true number of prescriptions the dogs are on from the public and casual observer.

I encourage the WCRAS to independently verify the number of dogs on prescription drugs, who approves this, what is industry standard, why adopters are often not sent home with Rx refills to aid the dogs in a slow controlled detox.

Joel Nelson suspended from NHS by CEO Greg Hall

The following is a chronology of events leading up to CEO Greg Hall suspending me from NHS, including me making multiple formal written reports of concerns about dangerous situations to NHS management while observing the appropriate chain of command. These concerns went unanswered by management, as per usual. When I made these concerns public on a group NHS volunteer email thread, I was suspended from NHS by CEO Greg Hall and accused of “bullying”, “insubordination”, “defamatory statements about NHS”.

March 16, 2023

Myself and other volunteers voiced multiple concerns, in person and in writing, to Ms. Hayley Hayden Volunteer Coordinator about the state of toxicity in the volunteer ranks. Including, but not limited to, Bullying and Insubordination by Margo Zaugg, both violations and grounds for termination accounting to NHS Volunteer Agreement.

Additionally reported to Ms. Hayden, was the lack of volunteer training leading to dangerous incidents and no clear chain of command nor official documentation of where responsibilities lay between staff and volunteers. (e.g. is staff in charge or is Ms. Zaugg as she displays in word and action).

Ms. Hayden said she would “take action”. She of course took no action to address these concerns. A pattern of complete lack of follow through that would remain consistent with Ms. Hayden until her ultimate termination by management April 18, 2023.

Finally, sufficiently concerned that the lack of volunteer and staff training had reached such dangerous and unacceptable levels, myself and fellow volunteer Ms. Cindy Hansen requested a formal meeting with Ms. Staci Sanchez, recently appointed that very week to the role of Animal Care Manager for NHS. Myself, Ms. Hansen and Ms. Sanchez met on March 16, 2023 10:00AM.

Ms. Sanchez, Ms. Hansen and myself enjoyed what I thought was a productive 2 hours meeting whereby I presented a presentation (time stamped and dated and available for **WCRAS review**) of concerns and offered solutions to our urgent concerns. Staci was more than amenable and in fact passionately shared and affirmed our written concerns. *“Things have to change”*, she said and we all agreed. She agreed with many of our complaints, especially about specific

volunteers Margo and Karen, and were deemed “zero tolerance” incidents and “they have to go” by Ms. Sanchez. Ms. Sanchez said action would be taken immediately. We were instructed by Ms. Sanchez to take our presentation and documents of incidents to Ms. Hayden Volunteer Coordinator, and Staci “*would back Hayley up, because Margo pushes her around*”.

March 21, 2023

Ms. Hayden Volunteer Coordinator, Ms. Hansen Volunteer, and myself met in Ms. Hayden’s office to discuss concerns about the state of NHS volunteers and safety and welfare of the dogs as a result. Amongst topics covered were a series of recent dangerous incidents involving volunteer mishandling of dogs; in one case leading to a bite of NHS staff and subsequent euthanization of dog “Capone”.

Hayley said herself, “*I am a pushover*” regarding her unwillingness or incapacity to rein in volunteers behaviors and that “*Margo gave me a dressing down in my office because I did not consult with her first about promoting Joel to become a “blue dot walker” (approval to walk more behaviorally challenged dogs).*

I expressed my frustration again at having (a) - no clear understanding who is in charge, Margo or Staff? and (b) - Bullying and Insubordination directed not only at other volunteers but also staff by Ms. Zaugg. Both violations of the Volunteer Agreement and listed as “termination offenses” Ms. Hayden assured myself and Ms. Hansen that staff, and indeed she herself Ms. Hayden, was in fact “*in charge of volunteers*”, had “*power to make changes*”, and “*would immediately*”.

Ms. Hayden even said she would “*request Staci and Nikki*”, Head of Animal care and Management Consultant hired by NHS respectively, to “*be in the room*” when she met with Ms. Zaugg so she wouldn’t “*get run over by Margo*”. **Here the volunteer coordinator is afraid of a volunteer and needs a team to address said volunteer.**

I sent the minutes of our meeting with Hayley to her via email to make sure there is no confusion on what was said or agreed in that meeting.

Nothing changed. Business as usual at NHS.

April 3, 2023

I send a follow up email asking Hayley what progress she’s made regarding our agreed upon action plan. She had done nothing.

April 5, 2023

I email Hayley expressing my frustration at her growing pattern of inaction and cite the minutes from our meeting(s). I explain her pattern of making promises and not keeping them, inaction and pattern of passing her job responsibilities up the chain of command is no longer acceptable to me. I inform her I will no longer waste time bringing complaints to her, and instead, I will forward my concerns to CEO Greg Hall and NHS Board of Directors.

Haley responds in an email, *"given the nature of this email, I am forwarding it to HR and Senior Management"*. Hayley's response to my complaints of her not following through, keeping promises, and passing her job responsibilities to management, was in fact, to do all of the above.

April 15, 2023

I send email to volunteers expressing my concerns and frustrations. I say we need to demand more of each other and management. I cite dangerous practices that are leading to bites and volunteer injuries.

April 15, 2023

Greg sends email to all volunteers the same day. Says my email and complaints are *"baseless and totally inappropriate"*. Calls them *"defamatory"*, *"bullying"*, *"insubordination"* Orders all volunteers to not speak of this incident again or risk immediate termination. Email below.

Hi Joel,

I have been forwarded your e-mail message to staff and volunteers earlier today.

This e-mail is grossly inappropriate and violates numerous terms and conditions of the Volunteer Policy and Waiver, attached here. The specific violations are covered in the following sections:

Professional Behavior, Supervision, Confidentiality, and Volunteer Standards of Conduct. The specific actions under the Volunteer Standards of Conduct include Insubordination, Bullying of any kind, Inappropriate communication or public outbursts, and Not following policies or processes.

As such, you are temporarily suspended pending our meeting on Monday at 2:00 p.m. You are not authorized to have further interactions with staff and volunteers other than me until that time.

If you have any questions or concerns, please direct them to me.

Thank you in advance and I am looking forward to our meeting on Monday.

Regards,

April 17, 2023

I meet Greg and Staci Sanchez in Greg's office. He is 17 mins late for meeting. He had every intention to fire me immediately, until I shared with him over 30 pages of email correspondence between myself, Hayley Hayden Volunteer Coordinator and Staci Sanchez Animal Care director. I share my presentation, previously shared with Ms. Sanchez, with concerns and potential solutions to the dangerous situations that were becoming common with NHS dogs, staff and volunteers. Greg took 3 pages of single spaced notes. I gave him a copy of my presentation. It is my distinct impression he had never seen these complaints and is completely in the dark about what happens daily at NHS. He tells me, *"he needs to reflect on all this and will let me know by April 19 at the latest if I am permanently terminated as a volunteer"*. In typical lack of Greg follow through, I never hear from Greg again.

April 18, 2023

The day after my meeting with Greg, Hayley Hayden Volunteer Coordinator "resigns" abruptly with no explanation. I hear from fellow volunteers that Greg told them, *"Hayley resigned because Joel Nelson threatened her life and she doesn't feel safe here anymore"*. This is of course **Slanderous and had this been true I would have been arrested immediately**. This yet another classic example of Greg pitting people against each other and creating lies, as is so often reported in the complaint letters to this Advisory Board.

April 19, 2023

Two days after my meeting with Greg, Greg issues a "new mandatory volunteer waiver" with specific language that addresses new safe dog handling standards. This new waiver must be signed or volunteers are not allowed to walk dogs. This new waiver is **pre-dated to April 1, 2023**. There is no line for volunteers to date their signature. Why? If my concerns were so "baseless and defamatory" according to Greg, why make them "mandatory policy and must be

signed if you wish to volunteer”. Further, I believe this waiver was pre-dated to make it appear that action had been taken far earlier than it had in reality. This one of Greg’s panicked preparations for the April 21, 2023 advisory board meeting in which Greg was going to be forced to address these concerns and others. Of course, as we know now, Greg failed to show up for this meeting.

April 20, 2023

NHS announce Joshua Green of BarkSide Dog Training has been contracted to train volunteers in safe dog handling. This is a direct recommendation in my presentation that had gone ignored by Staci Sanchez and Hayley Hayden. Again, if my concerns were “baseless and defamatory” why **enact another specific recommendation I’ve made?** Again, I believe this to be a last minute pathetic effort to make Greg look like he was taking action ahead of the April 21, 2023 Advisory Board meeting he failed to attend.

April 21, 2023

Greg does away with volunteers walking Blue Dot Dogs (dogs with behavior issues requiring more knowledgeable volunteers to walk them safely). Kris Wells, then NHS board president says in a prior unrelated letter *“they [dog staff] are so very short staffed and barely have time to clean kennels”*. So, if staff barely has time to clean kennels, how are they now able to clean kennels AND walk and enrich dozens of Blue Dot dogs on site? The answer is, of course this is impossible and staff now report these dogs are NOT being walked and now **spending “days alone in their kennels” without human interaction.**

Next, management initiates a program that *“while not mandatory, is highly recommended to all volunteers”* whereby Joshua Green will train volunteers in correct dog handling, enrichment, and dog body language behaviors. This, again, is a direct recommendation from my presentation ignored for months by management. Why now? Because Greg was panicked and media attention was on him. Unfortunately, many volunteers still think they “know best” and ignore Joshua’s help and recommendations.

Summary and Recommendations to WCRAS Advisory Board

At the time of this writing Greg Hall, Kris Wells and two additional board members have resigned. The public is now fully aware of the dysfunction at NHS and subsequent animal and human suffering. Raymond Gonzalez is President of the Board and Rita Eissman Vice President.

This is not enough. The community demands and deserves more.

Suggestions on how NHS needs to restore its trust in our community and our hearts.

(F) - Appoint a proven CEO with actual shelter and animal care experience. Ideally, this is a past CEO of NHS with a proven track record. The appointment of Ms. Bonney Brown, former CEO of NHS, a woman who guided NHS to be recognized as a leading shelter nationally under her care, is a perfect candidate. She is proven, immediately available, inspires trust, and additionally, a woman. Enough with the white men of nepotism and privilege already. All of the above mentioned credentials of Ms. Brown sends a clear and definitive message to our community; NHS is serious about change.

(G) - A complete overhaul of the NHS board is required. There is no one on the NHS BoD with animal care or shelter experience. Period. A total absence of any qualified, relevantly knowledgeable, or track recorded board members, would never be considered, nor tolerated, in any serious organization. Our community demands and deserves more. Additionally concerning, the remaining board members were all present while NHS decayed into a community tragedy. You all either knew about these complaints, in which case you are liars when you say you did not know, and need you to be removed. Or, you did not know about these complaints, in which case you are absentee and incompetent. In either or both cases, the members of the board have lost

their trust in this community and need to step down with dignity and humility in face of your public failure. You have failed us. If you truly care for these animals and staff and this community, resign. And let proven competent people guide us out of this dark hour you are complicit in. You would be respected for doing so.

(H) - Order a full forensic financial audit for the period of time that Greg Hall was CEO and Kris Wells President of the Board. New management should do this immediately, if for no other reason than to protect themselves. The Nevada Attorney General and IRS are now involved, and best to be proactive in your cooperation. In the very likely event - according to the financial documents I've been made party to - maleficence has taken place under Greg & Kris's rein, guilty parties need to be tried and convicted to the full extent of the law. Just because Greg & Kris left the building, does not mean the consequences of their actions end. Make an example of guilty parties and send a clear message to our community this will not be tolerated.

(I) - Raise pay of staff to a living wage. The dedicated staff work selflessly and deserve a living wage. Their pay has not kept pace with inflation and cost of living increases in Washoe County. NHS has a \$14M+ balance sheet. There's enough money. Create financial incentives and paths to increased training and credentials for caring dedicated staff. I.e. offer scholarships for online animal behaviors schools, and upon successful graduation, offer increased pay as a reward. This boost staff morale, gives them a feeling they are appreciated and supported, builds culture, and of course, improves the lives of animals at NHS as a result for more competent care.

(J) - Appoint a credible unbiased 3rd party shelter evaluator to evaluate and monitor the state of NHS, demand standards be returned, monitor progress and application of said standards, and create clear consequences when standards are not maintained. Make all reports to be made public on NHS website.

Thank you advisory board and community for your time and consideration.

Sincerely,

Joel Nelson

I am writing this email because of recent news features I saw discussing concerns about Nevada Humane Society.

I work at a local veterinary clinic and believe it is important to give a voice to those pets in our lives who are not able to speak up for themselves. Because I want to protect my clinic and my position in the clinic I would like to remain anonymous. I can tell you that I work closely with clients and their pets in a clinic setting and have many years of experience working with people and their animals in this type of setting. The timing of 2 clients coming into our clinic on the heels of seeing several news stories made the situations I want to share with you even more impactful. I trust that the info I provide about the pets and owners identified in this email will be handled delicately and respectfully as they have already gone through so much hardship and heartache.

Last week we saw a sweet 8 year old, neutered male Pitbull named Hank. Hank's owner Christine adopted him from Nevada Humane Society a week earlier. She lives alone now and wanted a companion to keep her company. She said in the shelter Hank was breathing hard and labored but no one there was concerned and she attributed it to him being older. She said when she got him home he began coughing when he would get excited and he wasn't eating much. She attributed this to him being in a new home but wanted to get him checked out by her own vet. When Hank came in for his exam he was a sweet and happy dog but was having difficulty breathing. We took radiographs of his lungs and although we normally do a 3 view series there was no need in this case. Hank had so many large lesions in his lungs that the cause was very obvious to all our staff.

Below is a portion of his physical exam with abnormalities highlighted:

Eyes: Eyelid mass OS superior lid touching cornea and black dermal mass OD superior medial canthi and lower right eyelid

Ears: No exudate observed, no redness present externally

Oral Cavity: Teeth are free from excessive tartar, no gingivitis present but gingival hyperplasia present diffusely

Dental Grade I

FAS 0 /5

Nasal Cavity: No obvious abnormalities observed

Cardiovascular: **Abnormal: tachycardia**, no murmur auscultated

Respiratory: Abnormal: increased inspiratory effort with increased lung sounds

Abdomen Abdomen palpates normally; no pain, tenderness or masses on palpation

Rectal: Did not perform rectal exam

Musculoskeletal: Normal ambulation

and from Treatment Plan:

Diagnostics Performed:

3 view chest rads: stopped after one view due to diffuse metastatic pulmonary lesions

Senior Screen - cancelled due to metastatic dz

Treatments Performed: None

Medications Prescribed: prednisone and cerenia palliation

Prognosis: 5

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**

Hank had Metastatic Pulmonary lesions - **lung metastasis** is a cancerous growth in the **lung** that got its start from cancer cells originating somewhere else in the body.

There was nothing else medically to be done for Hank because the cancer in his lungs was so far advanced, His owner was devastated as she already bonded with this sweet dog only to be told one week post adoptions that her dog was dying from very advanced cancer. Our Vet prescribed medication to help make him comfortable (relieve his pain and entice him to eat) so Christine could take Hank home for the weekend and spoil him before returning to euthanize him on the following Monday. Hank's breathing issues did not just develop in the week that Christine had the dog in her care and she said she noticed it at time of adoptions but no one there was concerned.

This poor dog was suffering with breathing issues for some time and likely not eating much prior to adoption as well. Not only do I find it concerning that it was not diagnosed at the shelter but worry if she had not adopted this dog that he could have potentially still gone untreated and unnoticed and died a painful death.

The other instance that recently came to my attention was a cat Named Loki; a 8 year old, black and white, neutered male cat. Loki's owner Nick brought him in to be seen by our vet and told us that he adopted a bonded pair of cats (Loki and Thanos) at Nevada Humane Society a few months ago. He told me that when he adopted the pair that Loki was wearing a plastic cone around his neck but Thanos was not. He said that although they were closely bonded and together in the shelter NHS told him Loki had fleas and Thanos did not and that was why Loki had a cone one. (Of note fleas are very easily spread to other animals in close proximity) He said they gave him no medical history, no medications to take home and no mention of treatment at the shelter, let alone no instructions on when the cone could come off. When he inquired about medications they told him he was not on any medications. Nick brought Loki to see us because post adoption he continued to scratch himself aggressively to the point of causing open wounds on his neck and ears despite no evidence of fleas on either cat. After testing it was determined that Loki had serious food allergies and needs to be on a hydrolyzed diet to prevent further injuries and placed on medication to relieve his painful itching so

wounds could heal and to help alleviate his pain. Once again it seems like this animal was suffering in the shelter and the solution was to put a cone on the cat instead of trying to figure out what was really going on health wise. The prescription diet can be quite costly and this owner adopted the cat without any forewarning of the potential additional costs of repeated veterinary visits for allergy treatment and prescription food.

I work at one clinic and these two cases presented themselves with in the last few weeks, I recall other stories from other clients about their adopted pets for Nevada Humane Society needing additional medical care post adoptions but did not give it much thought until the recent news about Nevada Humane Society. It makes me wonder how many other animals are being brought to other clinic with similar untreated/unidentified health issues and potentially being adopted by clients who are not prepared for sick animals or the costs associated with medical care but don't find out until they are already bonded with their new pet.

Sincerely,

A concerned veterinary professional and animal lover

To whom it may concern,

I am writing this letter because Nevada Humane Society is a very special organization to me. This animal loving community is one of the most generous I have ever been involved with. I no longer live in the area, but have been following the issues for the past 2 years. I wanted to give a brief statement of my previous tenure as the Cat Care Manager and the issues I had with the leadership at that time.

I started my career in animal welfare at NHS back in 2010. I worked there for 3 years in the cat dept and then cat medical leader. I moved on to other organizations across the country to become more knowledgeable in all aspects of animal welfare. I received a certificate in animal shelter management through University of Pacific in 2016. I attended many continuing education seminars and conferences over the years to keep up on the ever changing guidelines to quality care for animals in a shelter environment. I was a shelter manager at a shelter in South Carolina for 2 years. Although I worked with all animals, I have always been drawn to working with the cats. In November 2017, I applied for the Cat Care Manager position at NHS and was offered the position. It was a great opportunity at this time as Maddie's Pet Project was going to be kicking off a campaign to help save Nevada's Pets. Nevada Humane Society was a leader in the animal welfare field with innovative solutions to saving animals. We would be working closely with the campaign because we had the space and the resources to help other shelters across the state. We saved so many animals that would otherwise not have had a positive outcome.

When I started in January 2018, there were serious issues with the medical care of a large group of cats (200) that were not being housed in the best way and were being medically neglected due to a skin fungus they all had. I received pushback from the medical director when we were trying to come up with a plan to resolve this issue. We did finally come together to get all the cats cleared within about 6 weeks. Unfortunately, my assertiveness to ensure the best care for all the cats did not bode well with the clinic/vet staff. Everyday moving forward was a battle with them. When Greg Hall became CEO, we brought these concerns to him so many times and things never changed. He had multiple people with years of experience and knowledge to share at his disposal, but didn't take advantage of that. He proceeded to push those people out of the organization. There was never any accountability when it came to animals suffering, not getting the medical treatment they deserved or ultimately losing their lives. I could not continue this course watching animals suffer and die due to neglectful practices. I left NHS in October 2019.

It's very unfortunate that it has taken so long to investigate the operations and leadership at the organization. It is obvious by the recent resignations that things were/are broken. I am hopeful this is the beginning of much needed improvements and accountability to the public, staff and most importantly the animals in their care.

The board of directors needs an overhaul, as they seem to have been ignoring concerns about Greg Hall for some reason. They also need to ensure a nationwide search for an experienced and innovative leader for Nevada Humane Society.

From: Lena Ghiglieri <[lena.ghiglieri@gmail.com](mailto:lana.ghiglieri@gmail.com)>

Date: Wednesday, May 10, 2023 at 12:13 AM

To: Kimberly Wade <kwade@humanenetwork.org>, Vanessa Porter <v_19_porter@yahoo.com>

Subject: My Letter

I am so disheartened to write this letter however, I feel a deep concern for the good name of Nevada Humane Society.

I have been a donor, volunteer, foster parent and have worked for Nevada Humane Society for 14 years. In that time I have seen many changes in management, policy and even CEOs. All points of contact with fellow employees and management at NHS have been professional and cordial and I have maintained a friendly relationship with all management. I have worked closely with all prior management teams, the board of directors and many employees. My creative designs and ideas have been used for multiple fundraisers, and I have been beyond proud to work for NHS.

Until the recent, unceremonious firing of the Marketing Director, Nicole Theodoulou, approximately 4 months ago, I was able to freely communicate with management, collaborate, and receive my payment in a timely fashion. Trent Bingham, the Development Manager, took over Marketing upon Nicole's departure. I received two emails from Trent regarding my invoice, and my attempt to assist with a fundraiser. After that, I was ignored completely by

Trent and his team. I received no payment for several months and no further direction on work needed.

After waiting, I reached out to Greg Hall to inform him of his team's lack of response and my need for payment. I never received a response from Greg. I then reached out to the CFO, Phil Neff, and cc'd Mr. Bingham, to let Mr. Neff know that I was waiting for payment after several months. I have since, received payment.

The next day, I found an email stating that my account had been removed from marketing sources by NHS. I can only see this as a form of retaliation.

I have still not received any contact from Mr. Hall or Mr. Bingham. My standing with NHS is completely unknown.

I have seen many, many invaluable managers and donors be treated with complacency and a complete lack of courtesy and respect, either directly by Mr. Hall or by his team. And in my case, by Mr. Bingham.

Mr. Hall and Mr. Bingham's approaches of neglecting issues within and then ignoring or retaliating against whistleblowers, staff, and public alike cannot be sustainable.

Treatment of donors is well known, especially in a city like Reno, the biggest little city, where everyone knows everyone.

I only wish for the very best at Nevada Humane Society, whether I am able to assist or not. But I do know, that while Mr. Hall and Mr. Bingham are present, they will be losing valuable resources. Thank you for your time.

Lena Ghiglieri
775-741-3035

"You can't use up creativity, the more you use, the more you have" - Maya Angelou

From: Sally Berger
Sent: Wednesday, May 10, 2023 7:00 AM
To: schieveh@reno.gov; advisoryboard@washoecounty.gov
Cc: duern@reno.gov
Subject: Nevada Humane Society

To all concerned about the state of affairs at NHS,
There are two areas I am most familiar. There are many more reasons Greg is not the right person for CEO of NHS but most are not known to me first hand. One of those most disturbing is that he is unable to keep knowledgeable, forward-thinking individuals in key staff positions.

Volunteering

I have been a volunteer in animal care and rehoming animals in Washoe County for more than 30 years. I have a very deep understanding of what is involved and how to create a viable volunteer program. That is why I am extremely concerned about how volunteers are recruited and treated when they commit their service time at NHS.

1. After orientation you are on your own. You might hook up with a volunteer dog walker to be mentored if that is your interest, otherwise it's a mystery as to what you are there for.
2. No volunteer training or supervision.
3. They overstaff volunteers for special events or staff takes over leaving you with nothing to do after spending time and expense to show up.
4. They hold volunteer appreciation events. You are told how valuable you are but then you are treated like "a necessary evil."
5. Most volunteers never show up for a second time. No one questions why that is.
6. Staff shows no respect for the incredible value volunteers bring to the organization.

I feel a progressive volunteer program, which I have seen in action, could supplement and reduce staffing by as much as 30%.

I no longer volunteer at the shelter. I allowed my frustrations to show to Greg so he decided it was time for me to go.

Dog adoptions. Why are they down?

1. It is often said that "my dog chose me" when I visited the shelter. Not going to happen at NHS. The public cannot see the general population. You can only see 2 which are predetermined from pictures.
2. It often takes a very long time to get waited on because each potential adopter must be screened for the 2 dogs they wish to visit with. I've heard people say they will never go back to NHS because of this.
3. If you don't think the 2 dogs you have visited with are the right choices you are turned away rather than given alternatives.

4. What on earth is “Nap Time.” People are turned away should they show up between 2 and 3 each day. It must be time for the staff to take naps! The dogs are napping all day since they don’t see or get any mental stimulation from the public.
5. We are told limited staff makes it hard to show dogs to potential adopters. How about recruiting volunteers? Volunteers can do adoptions offsite. Why not at the shelter?
6. Meet and greet dog visits are rarely supervised, creating some dangerous situations.

Thanks for taking the time to investigate the many concerns of our community.
Sally Berger

May 10, 2023

Dear Animal Advisory Board,

I began at Nevada Humane Society (NHS) under Bonney Brown, as a volunteer and foster in 2007. I became an employee in early 2010. I worked with an incredible team over the years with a common goal to put animals first and collaborate with other organizations to continually save every life we could and make a positive community impact. I was also an adopter, foster, donor and I cultivated many relationships that played a key role in the success of NHS.

In 2017, after a CEO was let go, myself, along with Arthur Westbrook, took over as interim Co-CEO's, appointed by then Board President Tierra Bonaldi and Vice President Greg Hall.

In 2018, I resigned for a role where I could help even more animals through Humane Network and Maddie's Pet Project in Nevada—but continued as a contract employee for over six months. In late 2018, Greg, who was currently Board president, was moved into the role of CEO.

I remained a volunteer from the time of my resignation through 2019.

Initially, Greg "felt" to be a good fit, supporting the mission and team. That quickly deteriorated. I witnessed (and several staff and volunteers shared complaints with me) several changes:

- Shelter care declined. Kennels were consistently dirty, our longstanding "10 Minute Poop and Scoop" rule disappeared, and a smell permeated the building that was not there prior to his lead.
- Animal care declined. Cats were being placed back into colony rooms too soon after anesthesia during spay/neuter surgeries and were declining overnight, or worse. Neither dogs nor cats had enrichment. They sat in kennels, feigning sleep, or hiding, and deteriorating mentally, which we know affects their physical health. Dog walks were limited, and dogs were left unattended for long periods of time in play yards. Kittens were consistently sick with runny noses, weepy eyes, and other cold symptoms. The care of office cats deteriorated—diets changed, litter boxes weren't cleaned, enrichment went away—and they began exhibiting physical and emotional stress symptoms: unkempt coats, constant respiratory infections, fear, and anxiety. Previously, staff offices were used for cats who needed extra medical attention, special diets, behavioral modification, or were just harder to adopt and needed one-on-one time with humans.
- Customer service disappeared. As a volunteer, we were no longer kindly welcomed—we were a bother. I volunteered with a longstanding photographer, and we went from being able to handle the animals on our own and having access to anything we needed, to not, and being told our help wasn't needed. Front desk staff no longer greeted people entering the building. Wait times for help doubled.
- Overall communication became delayed and nearly ceased. I have numerous emails between local media, volunteers, and donors (individuals and small businesses alike) that show my continual push to get Greg to respond to inquiries, contracts, payment and

more. Getting him to follow through on a project, reach out to a donor, or business partner was impossible.

- Mismanagement and lack of leadership increased some of which specifically related to my contract role.
 - I was treated disrespectfully, talked down to, made to feel incompetent and invalidated continually by a specific upper management staff member. I voiced those concerns and my discomfort in being around said person, yet he continually allowed the behavior to continue.
 - I was working with and providing training for a new manager. That manager shared with me that they were unable to do their job due to Greg's micromanagement and lack of follow through. They did not feel empowered to do the role they were hired to do and struggled to hit deadlines because of his lack of communication. They ended up resigning.
 - Several managers who saw the decline in animal and shelter care tried to right the wrongs and "get things back to where they were." They shared with me many times that they were continually challenged and shut down by Greg. They expressed their despair and frustration in seeing the decline of the animals and the shelter but were unable to do anything about it. They ended up resigning.

Near the end of 2019, I made a tough decision to walk away. My contract time had long ceased. The complaints from staff, volunteers, adopters, and donors were mounting. People were comfortable talking to me because of my history with NHS, but I was no longer able to do anything about it. I felt discouraged by continuing to volunteer, no matter how much I wanted to help the animals. I reached out specifically to speak with Greg and several managers to see how I could help but was told by a trusted internal source that "Kimberly Wade is no longer welcome in the building and her help is not wanted."

That was the end of my duration with NHS in any capacity. I have not been back in the building since, but I do continue to hear of the challenges as more people voice their concerns. I am writing this letter in the hope that sharing my experiences and what I have seen will have an impact on creating change and setting NHS up for success once again with NEW leadership. It breaks my heart but the animals and the good people who stand up for them only deserve the best—and I will help in any way that I can.

Sincerely,

Kimberly S. Wade

Kimberly S. Wade

Humane Network

kwade@humanenetwork.org

Dear Mayor Schieve, Council woman Duerr, and NHS Board members,

First let me say Greg Hall is a nice person - just not cut out for the job of CEO of NHS.

This position should not be taken lightly, and requires someone with shelter and management experience - someone who knows animals and their needs; and someone who knows how to work with and train employees to do the jobs expected of them - someone with people and animal skills that is a professional package that may take some searching. This position is not a political, nor ego driven position.

Years ago the NHS had some major problems and Bonney Brown, Diane Blackenship, and Deneice Stevens came in and rehabilitated the shelters in Reno and Carson City.

We are lucky to have all three still in the area and willing to come, once again, to help us.

- ① We need to re-establish a cordial, working relationship with Animal Services and keep that going. Cheyanne seems to be doing a great job.
- ② When the board says they didn't know there was a problem - that is a huge problem because they have been receiving complaints from past employees and clients for quite some time! What part about many vets and upper management leaving, and new employees saying they have not been trained properly does the board not understand?? or observe.

I believe in term limits, and feel ^{the} board should have term limits (2) Be expected to tour the facility once a month - talking to vets and employees.

The board is suppose to over see the CEO - Do your job!!! Don't just pad your resume - put your egos aside, and do your job. If need be, fire the CEO before an enormous problem, like presently, happens!
Do your Job!!

The board should be filled by people who can put their egos, needs, and wants aside for the sake of the animals. People who have some management, good sense and fund raising skills. Asking alot, but in the past we have been blessed with some amazing people.

These animals depend on us to do the right thing.

Too many people worked too hard to get the NHS up and running in a very efficient way - WHAT Happened?? Oversight, not only of the CEO, but the board, is needed. And an internal audit would be helpful.

In a perfect world, I would like to see NHS, Animal Services and SPCA all working together for the good of the animals. Thank you for your time, Kimberly Becker

Date Received: 2023-05-15

To the Washoe County Animal Advisory Board,

I have met most of you worked with you on animal issues over the years. I look forward to, in the near future, meeting those of you I haven't met yet.

I just came across the meeting agenda, in my email, this morning, and have been following the news, regarding the Nevada Humane Society.

I would like to add to the record that I have visited the Humane Society on Longley Lane, over the last several months. When I arrived, there was a huge easel shaped sign, on the sidewalk, leading up to the doors that reads 'Naptime is from 2:00 p.m. to 3:00 p.m., which I thought was odd. Once in, I went to the front desk to let them know I was going to go visit the cats and dogs (not knowing the current restrictions). I was told the public was no longer allowed to 'just go' visit the animals. I was then handed a binder, with Xeroxed pictures of the available animals, and told I could sit in one of the 2 blue chairs available for the public. At this point, I was really irritated and asked why it was now set up this way? I was then told by one of the girls at front desk, in a snotty tone, that it 'stresses the animal out too much to visit with them'. I then said I thought that this was unacceptable and that people want to visit with the animals, which gives them the best chance of being adopted, not look through a bunch of copied pictures in a binder.

- 1.) Why can't the public visit the animals? If it is because of stress, where is the credible research for that?
- 2.) Why is there a 'nap time' sign? If the public isn't 'allowed' to visit the animals there is no need for nap time. The animals are already doing that! This seems like an excuse, another barrier, to keeping the public away from the animals. In the past, there was always a roped off area (section of building) for animals who weren't ready to meet the public for whatever reason.
- 3.) I have adopted from the Reno Humane Society and donate money from time to time. I have friends who donate money on a monthly basis, who are also not happy with the way it's currently operating.

People want to see/visit the animals again. It needs to be fully open to the public again!

I look forward to hearing from you soon and thank you for looking into all of these issues!

Rene' Johnson
Puppy Mill Free Reno and Sparks

Date Received: 2023-05-15

Good Afternoon,

Thank you for your time today!

I apologize I wasn't able to get my full comment into the record.

Please note this letter was drafted hours prior to learning that Greg Hall had resigned his position.

Again, I appreciate your efforts so much in getting this organization's transparency, truths and future into a secure and solid space.

Best Wishes, Britton

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Public Statement: May 10, 2023 to be read in a reduced word count on Monday, May 13th, 2023

Good Morning,

For the record my name is Britton Griffith. My full statement has been submitted to The City of Reno.

In 2021 I sought out a board seat with the Nevada Humane Society, (referred to today as NHS), I have had a lifelong dedication to animals and had fostered animals and adopted them from the society. I resigned on November of 2022.

I was unanimously approved to serve on the board of the Humane Society on Wed, Mar 24, 2021, 12:48 PM.

Over that time, I worked closely with the staff and foster team and vet services. I fostered a set of 5 (1 day old kittens) adopted a small dog and later a senior dog of 14 years of age.

I participated as a community lead for Heels and Hounds and worked on the duck race with the organization as their two biggest fundraisers.

I built relationships between the NHS with places and organizations such as The Riverwalk District, Midtown District and Downtown merchants. We co-ran adoption centers, fundraising events and media days on news outlets, Wine Walks, The Eddy and Wild River Grille and more locations. We had plans to bring vet services, food and more to Shelters, Karma Boxes and other pick-up locations.

Over this time, I also participated in the 5 year strategic plan in Lake Tahoe, getting to know the other board members, many who had served for over a decade.

I was present for the Candor Fires where the NHS had to step up to overcome serious threats to our wildlife, residents and their pets. Their efforts were breathtaking, I have never seen a staff give so much of themselves to their mission and the animals they loved. The staff also gave out food to members of the community.

I developed strong relationships with the staff, as we shared a love of both the animals, and our regional communities. To say the least, we were a terrific team working together to raise money, build bridges and strengthen the brand of the Nevada Humane Society.

I even recommended another Board Member who was accepted.

During Board Meetings red flags began to arise, they had hired two COO's: Lisa Feder lasted 10 months & Rory Adams lasted 4 months and then it seemed that no one could fill the position. They were losing vet staff and clinicians at an alarming rate and then turnover began to jump up each month. At the time CEO Greg Hall gave these reports and when asked he stated these occurrences were happening all over the United States and that in the NHS's case people were

leaving due to inflation and seeking more pay.

In one meeting he said something to the effect that "women take his verbiage to be yelling or too assertive, but that he is just a very passionate man and sometimes he raises his voice, but he isn't yelling." I have heard similar narrative in my life and I began to be suspicious.

In addition, I learned that they were becoming too overrun at the shelter and were forced to abort kittens of pregnant cats and that pregnant dogs would soon go under the same surgeries to take the populations down. This was never reported to the board.

I began to ask people that had become friends of mine to elaborate on what was going on behind the scenes and each of them was reluctant to say anything poorly about Greg Hall as there was a history of retaliation and no consequences given by the Board President and members. The messages returned again and again the same Greg Hall was continually creating a hostile environment and the turnover rate was not about inflation or monies, however, it was due to feeling uncomfortable in his presence.

I felt in my time at the NHS that Greg was protected by the Board of Directors for whatever reasons, I do not know. However, I know that in the Board Meetings, word of mouth, reports of turnover and committee reports, there is no possible way someone could say they don't know Greg is detrimental, causes a hostile work environment and is the single reason good staff were being fired without cause. Instead, people supported him in the meetings stating things like they "knew he was stressed" or "had his back" and otherwise. It seemed to me that there was a barrier between new participants on the board and friends of Greg's. I also know due to his actions donors are leaving, volunteers are leaving and since my departure board members have left.

These are people that dedicated their ENTIRE lives to helping animals, circumstances that were created without any response from the Board President or others to address their complaints after leaving must be of such a magnitude that even people with these values had no recourse but to leave.

I believe at this time, we are risking the lives of hundreds of animals by allowing Greg Hall to remain at the Nevada Humane Society. Should he leave, I would reapply to the board of directors and would be honored to serve and assist in building back the staff and reputation and culture of this organization. I also understand that many other people that have served in Greg's position would be willing to come back in an interim to work to hire new replacements.

I am here today because I resigned on November 15th, 2022 and in my own fear of retaliation, I didn't state my sincere concerns, grievances and sadness over the failing of one man bringing down an entire organization and now, I regret that decision and since his employees, the animals under his care and the volunteers have no voice, I cannot remain silent on things I have witnessed. I didn't believe my words would fall on any ears that would provide consequences as the time I was a part of the organization so many others have had written complaints, requested meetings and even left the NHS due to a lack of support or 'light at the end of the tunnel'.

I ask that Greg Hall be removed effective immediately as CEO or as any employee from the NHS with a vote of no confidence or other avenues.

Thank you for your time, Britton Griffith, City of Reno, Ward 1

Good Afternoon.

I have a bad sore throat, so I need to submit my comments via email.

I am a member of the public, although I do own a business and have heard much criticism about NHS.

Our shelter is about the welfare of our animals. The public was kept in the dark, so NHS transparency is long overdue, and absolutely necessary. It's a relief that an advisory board exists, or I question that anything would change in what I hope is on an Emergency basis. And all information needs to be available to the public.

I've been an NHS donor for many years, and it took the October 2022 Cat Panleukopenia outbreak to see how inept the NHS director Hall was when he said on TV "we learned a lot about vaccinations". I couldn't believe what I was hearing. Cats suffered and died, and no cats were taken in during the outbreak. And the head of NHS is 'learning' on the job. This should never have happened. I'm glad he resigned, but is he the fruit of a poison tree?

Drastic change is needed NOW, and take effect immediately. Not next week, or when someone is available.

Good idea - to call back positive former employees that want to help, and maybe weed out some bad apples.

NHS is currently a stain on our shelter's past reputation, is one resignation enough? The NHS board had to suspect trouble with so many resignations of NHS Senior staff and 6 Veterinarians...

NHS has had problems for a couple years, and the NHS Board was complicit in the current situation.

The Director (Hall) should have been released much sooner, that job is not a 'trainee' position.

I agree that the NHS board needs new members with animal welfare experience.

I am trying to be positive on the NHS board member changes, but I remain skeptical for now as it's yet to be seen if they accept the advice of others, or stagnate some more.

Most of the public thought NHS was the same as it always was, a safe and caring place for our community's animals.

NHS used to be the shining light of what other shelters could achieve - and now we're making the national news in a negative way. Bonney Brown was not only a trusted caretaker of our community's animals, she got things done.

When going in the shelter (in the past) you could see & feel a positive environment, dogs being walked, everyone, dogs and staff had a bounce in their step. Those days are gone. Bonney Brown is sorely missed, and needed more than ever.

I am happy that she is involved, why cant we bring her back ?

I have trust in WCRAS, they are doing the best they can. Director Shyanne Schull is a truly needed asset in this crisis.

She has great ideas and is in the trenches. The public wants our shelter back in the hands of professionals in animal care, and people that have a heart, and truly care about animals. we need help from people with experience and proven results, no more experiments or trainees.

New NHS Board President Ray Gonzalez promised 1,000% comittment, I hope he means it.

The public expects nothing less, with the situation we are now in.

The public has misconceptions because NHS has hidden things from us, and the animals have suffered at the hands of those entrusted with their care. All of them, Dogs, Cats, and small animals.

Foundation Grants in the millions will disappear if NHS doesnt perform, and put the ANIMALS FIRST.

That is their job. The shelter belongs to the people, not 12 people in a boardroom at NHS.

** These things are at the top of the my list & many people I have spoken to:

** unnecessary euthania - when did that start...?

** dogs drugged - most who probably dont actually need medication. And others sent to a new home with no tapered dose

** Dogs in kennels all day - with 10 minutes in a yard. I can't imagine the lonliness of these dogs.

** Basic care not provided. Sanitation not up to par. this is ridiculous

** Euthanasia decisions made by unqualified staff. This happened to me personally. I wanted to adopt a pit that I visited for for 5 days, he was a good dog. He was in a back cage, and I would sit there at the front of the kennel and talk to him - he attentively listened :) he hadn't bit anyone, but he didnt pass the "NHS" behavior test. (?) I pressed the issue, and left messages for callback, and never got one response from anyone at NHS.

When I went in to NHS to follow-up the next day, he was 'gone'.

Art W tried to help me, but a couple people made the choice on this dog life's, that didnt know much about him.

I've had Dobie's all my life, and my previous Pit/Lab mix 'Buddy' lived for 13 years (my parott would ride on his collar), I had no kids at home, and was willing to sign any waiver they wanted. I wasn't even given the courtesy of a phone call from anyone at

NHS. I was sad, as I spent a lot of time with "my" dog, and I saw who he really was. How many minutes did NHS spend with this dog? probably none.

** Community Cats - in the 90 day plan presented of returning them to their homes in the community... how long have these cats been at NHS? do they even still have a 'home' community anymore?

** NHS staffers not getting raises, while Senior level NHS staff raises were significant & not deserved.

The NHS shelter staff is the true heartbeat of NHS success. They connect with the animals, they 'see' what's going on & talk to potential adopters on the floor, and a positive attitude is a must. so is a love for animals. They deserve a raise, make it happen.

The toxic atmosphere at NHS took awhile to get this bad, and swift changes will be best. not wait around for NHS to 'do something'. And when a donor gives NHS money for the animals, it's supposed to be 'used' for the animals, and not anything else. I'll be waiting for the positive changes, and have a little faith.

Thank you for your time, and for caring about the animals.
you are greatly appreciated.

B.J. Perez
775-750-3495 cell