



HASS One Health Integration Toolkit: Getting Started

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Helpful tip:

You will notice that there are several links to other websites embedded in this document. To open an embedded link in another tab/window without having to close this document to view another, you can:

On Windows: Ctrl + click a link.

On a Mac: ⌘ + click a link.



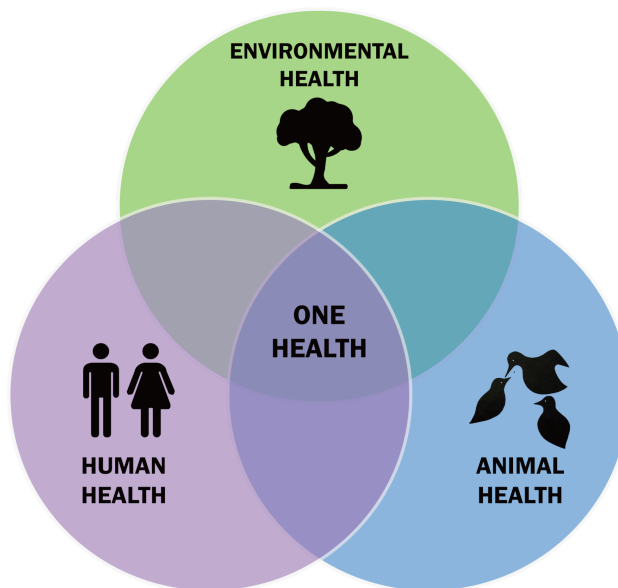
Introduction to One Health

What is One Health?

[One Health](#) is an approach that recognizes that the health of people is closely connected to the health of animals and our shared environment.

According to the [American Veterinary Medical Association](#), One Health refers to two related ideas: First, it is the concept that humans, animals, and the world we live in are inextricably linked. Second, it refers to the collaborative effort of multiple disciplines working locally, nationally, and globally to attain optimal health for people, animals, and the environment.

One Health is increasingly being acknowledged by national and international institutions as the most constructive approach to address complex issues at the animal-human-environmental interface.



What is One Health Integration?

One Health Integration focuses on highlighting the [Human-Animal Bond \(HAB\)](#) when considering how to best support the health and well-being of humans, animals, and their communities. To achieve the best outcome for people, animals, and the environment in a shared ecosystem we need to offer successful public health interventions with cooperation between professionals in all three sectors.

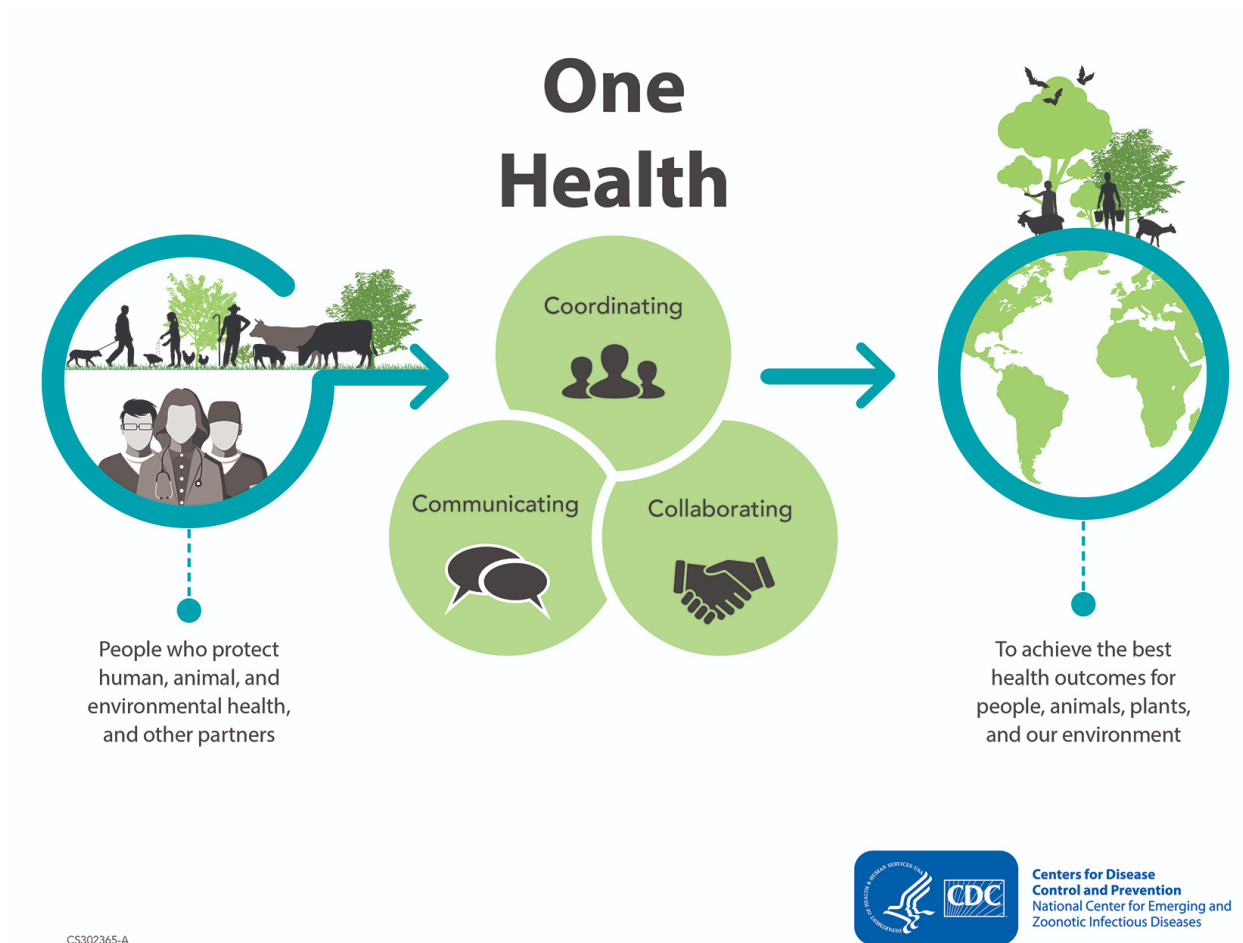
- **Examples of human health/welfare professionals:** Doctors, Nurses, Public Health Practitioners, Epidemiologists, Social Workers, Case Managers, Behavioral Health Workers



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- **Examples of animal health/welfare professionals:** Veterinarians, Veterinary Social Workers, Paraprofessionals, Agricultural Workers, Case Managers, Animal Shelter Staff, Animal Support Services Professionals
- **Examples of environmental health/welfare professionals:** Ecologists, Wildlife Experts, Environmental Scientists

Animal welfare supports individuals and communities and provides vital interventions that may otherwise not be considered in the overall health and wellbeing of the family unit. For example, in the event of a humanitarian crisis, often available assistance resources for a “family unit” do not include pets. This leaves families with the lose/lose decision of either accepting needed resources and potentially losing their pets, or not accepting resources at all. Animal welfare can fill the gaps to ensure people and pets stay together as a family.



What problem is One Health Integration trying to solve?

Historically, animal shelters and animal services agencies have operated largely in isolation, cut off from larger community conversations about human health and environmental well-being.



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- Animal welfare and human services have historically created barriers to accessing care for humans and their animals by not offering an integrated model.
- Low-income families face similar issues for themselves and their animals needing healthcare, resources, and support.
- The culture of human services, animal welfare, and environmental agencies needs to shift from the deeply ingrained approach of addressing the problems of their sector only.
- Animal welfare has been focusing on animals without a people-centric approach.
- The environmental factors that affect the welfare of people and animals in communities are not often considered in a proactive approach.

When we consider animal shelters through a One Health framework, the health of animals is connected to the health of people and our environment. In other words, to address the root causes that lead to animal welfare issues, we need to connect to and collaborate with organizations outside of the animal world.

We recognize that as animal welfare agencies working closely with and within municipal structures we have mandated regulations that may result in punitive consequences. Through our work with public agencies, we will continue to be a voice for measures that increase alternatives prior to the use of enforcement measures.

The purpose of the One Health Integration toolkit is primarily to support animal welfare organizations in these collaborative efforts to bridge the gap and deliver holistic, family, and community-centric care.

One Health Community Assessments

The best place to start when considering how your organization can move towards a more One Health centric mission and process is to evaluate what types of programming and resources already exist in your communities/local ecosystems that can support the people and pets within. “Once resources are mapped, shelters can identify current and potential future partnerships and stakeholders, build new connections, and cultivate relationships to fill programming and service gaps.” (*Getting Started with Ecosystem Mapping Toolkit, HASS*)

Local Search:

Basic: You can search [2-1-1 information](#) by service area to identify the most common calls received by need. This can be a great way to understand what services are in most demand locally and get you started! You could also request a copy like this [Health and Homelessness Gap Analysis](#) from a Case Manager you connect with, to identify where and how animal services may fit into the consideration set for health and human services.

Advanced: [CARES HQ](#) - We highly recommend this mapping resource for discovering visual data about a region. There are many specific data points you can integrate into a customized map to view what your area’s visual data reflects.

Ecosystem Mapping:

Ecosystem mapping is the creation of spreadsheets and/or visual maps detailing all community providers relevant to a specific project, in the specific service area. To begin



this process, full details can be found within the [HASS Getting Started with Ecosystem Mapping Toolkit](#) to ensure your organization is aware of all existing services and partnership opportunities around you. Not only will this make identifying gaps significantly easier, but it will allow your organization to more appropriately provide individual support/direction as needed.

Community Needs Assessment:

A community needs assessment provides a more advanced opportunity to bridge the gap between social services and animal welfare in your community. It can identify community needs and determine program capacity to address those needs within your organization as well as identify the strengths of your program and challenges you might face. The following examples highlight a few different ways you can get started. **We recommend completing mapping your local ecosystem before beginning a community needs assessment** to ensure you are well versed in what supportive programs already exist before considering what questions are most important to ask your community.

Getting Started

- [Pets for Life Community Assessment](#)
- Community Tool Box - [Assessing Community Needs and Resources](#)
- Five major steps in a community needs assessment - [NASCS](#)
- [Seven Steps for Conducting a Successful Needs Assessment](#)
- Rural Health Info - [Conduct a Needs Assessment](#)
- [Community Needs Assessment Resource Guide | National CAP](#)

Report Examples

- [Meals on Wheels + Pets Needs Assessment](#)
- [Community Spay/Neuter Needs Assessment - Humane Canada](#)
- [Needs Assessment Study for New Animal Shelter For Shelby County, OH January 26, 2015](#)
- [Sample Community Needs Assessment Plan](#) - Domestic Abuse Intervention Programs
- [Community Needs Assessment](#) - CDC

Benefits of One Health Integration

- Solely animal-centered services shift to include a human and environmental perspective using a holistic approach.
- First steps are taken towards the long-term resolutions of “[wicked problems](#)” such as social injustice, systemic racism, and generational socioeconomic disadvantage.
- Work of animal welfare advocates to educate and support public agencies and recognize how the [Human Animal Bond](#) impacts their work is continued.
- Promotes diversity, equity, and inclusion.
- Supports human health and wellness as well as environmental health and stability.



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- Keeps families together through a multi-dimensional, multi-sector collaboration.
- Increases access and efficiency across services and sectors that will improve the overall quality of life for individuals, animals, and their communities.
- Removes barriers and increase access to healthcare and other support services
- Increases overall well-being in the community.
- More engagement in discussion, self-evaluation, and continued learning so we can engage with our communities in meaningful, positive, and supportive ways.
- Shelter specific benefits:
 - Saves more animal lives
 - Improves care in the shelter
 - Organizations can learn more about animals in your care
 - Promotes pet ownership
 - Increases public safety

The Environmental Consideration for Animal Shelters, Animal Control, and Other Support Services

The environment that animals and people live in impacts the health of both, and vice versa. For example, parasites (both ectoparasites such as fleas, ticks, lice, etc., and endoparasites) can be zoonotic and can affect the health of the human family and animal. Due to climate change, the global temperature is warming and creating more areas where these parasites that carry disease can live and reproduce. As the parasites' range expands, more animals and humans will come into contact with them increasing the chance of contracting a disease. To effectively contain spread in this instance requires not only treatment and prevention at the source (flea prevention, etc), but a consideration of how to best contribute to a reduction in global warming, as an individual, organization, and community, both locally and globally.

The built environment (homes, buildings, streets, infrastructure, etc) can also impact the health of both people and their animals. The built environment influences the level of physical activity that both people and animals engage in. Areas that are not conducive to physical outdoor activities contribute to higher levels of inactivity and sedentary lifestyles, which in turn can lead to an increase in health issues and poor health outcomes such as obesity, cardiovascular disease, and diabetes (in both people AND their pets!). A lack of access to green space in the built environment has been linked to negative mental health outcomes for people, poorer air quality, and warmer temperatures within the community. Animals are likely to experience the same negative effects of a poorly built environment that lacks opportunities for physical activity and access to green space as their human family members.

Other environmental factors include access to healthy food, access to animal supply stores, reliable transportation, public safety, and more. Low-income communities are more likely to be negatively impacted by "[social determinants of health](#)." The social determinants of health include access to healthcare, access to education, social and community context, economic stability, and neighborhood and built environment. Low-income communities are more likely to be in areas with higher levels of air pollution, higher exposure to toxic waste, and be composed of older buildings



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with poor air filtration and toxic materials such as lead paint. These are all environmental factors that also influence health and welfare outcomes for people and animals in the community.

When considering what makes a One Health approach work, The [World Health Organization \(WHO\)](#) states, “Many professionals with a range of expertise who are active in different sectors, such as public health, animal health, plant health, and the environment, should join forces to support One Health approaches. To effectively detect, respond to, and prevent outbreaks of zoonoses and food safety problems, epidemiological data and laboratory information should be shared across sectors. Government officials, researchers and workers across sectors at the local, national, regional and global levels should implement joint responses to health threats.”

To further expand on this topic, the presentation “[Healthy Pets, Healthy People, Healthy Communities by Dr. Laura Bunke](#)” covers the following One Health highlights as we continue to consider the environmental factors when talking about the health of people and animals:

- What is One Health
- One Health with Companion Animals
- Zoonotic disease with Companion Animals
- Prevention: Vaccines and Parasite Control
- Value of the Human Animal Bond

Next Steps

To achieve the best outcome for all, there are two very important steps organizations should take as we move forward with a more One Health Integration approach. First, we need to pivot to offer successful public health interventions with cooperation from all three sectors (people, animals, environment). To ensure staff and volunteers are well prepared to make that shift and implement these programs, we have outlined basic program information and training to get started below in “**Staff and Volunteers**”. Second, the importance of building long-lasting partnerships with other organizations in your community, nationally, and even internationally cannot be overstated. Collaborating with organizations that provide a different type of support to people, animals, or the environment than your organization will help build a lasting, sustainable way for you to enhance the health of your local ecosystem, keep more families together, and provide support services to those you were never able to before. This topic is expanded on below in “**Referral Care Model**” and “**Supported Referral Model**”.



Staff and Volunteers

Training

A One Health approach to supporting animal health encourages us to broaden our awareness of human service skills and knowledge while considering the intersection of human welfare, animal welfare, and the environment. Providing cross-training/appropriate training and development for public-facing roles allows employers and program managers to pinpoint the knowledge and skills expected of their employees and volunteers. It also helps provide education on new skills or updates on existing skills to enhance impact and outcomes. This section was created as a guideline to provide the necessary training to implement a One Health approach. We recognize that every organization is unique in its staffing, volunteers, and budget, and this may not encompass all the training that is needed. You can decide what training is feasible and necessary to suit your organization. Pick any one or more from this list or add a new training module to your existing organizational model as it evolves.

Case Management Approach

In the context of One Health, it is important to consider the whole family unit when providing interventions. While we may not be trained to provide human service interventions, we can be proactive in helping navigate the many resources needed for the animal(s) which will ultimately benefit the family. You can find more information on Case Management in the [HASS Keeping Families Together - Case Management Toolkit](#).

Diversity, Equity, and Inclusion (DEI)

Historical models of animal-centric care, judgment, and discrimination are being replaced with models that focus on both people and pets. For organizations that may not be representative of the people we are serving, staff and volunteers may require additional training that equips them to communicate and function well within this model.

Every interaction and conversation is an opportunity to offer resources, support, and assistance, regardless of the care that has been provided. It is important to prepare volunteers and staff for the physical or mental conditions that they may see animals and people in and to prepare them to be adequately equipped to manage difficult conversations. Here are a few pieces of training that could prove helpful:

- [DEI in Veterinary Medicine](#)
- [Becoming a Cultural Architect](#)
- [DEI resources Canada](#)
- [Racial Equity Tools](#)
- [Equity in the Center](#)
- [CARES Map Room](#)

Unconscious/Implicit Bias



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Unconscious bias and implicit bias refer to the attitudes and beliefs that occur outside our conscious awareness and that can be held in direct contradiction to our explicit and espoused values. [Unconscious bias training](#) can help bring to consciousness these patterns of thinking, providing opportunities for change and intentional action.

- [Implicit bias resources](#) - General training
- [Unconscious bias training for managers](#) - Recruitment specific

Empathy

To act with empathy does not mean you are condoning a guest's behavior. Rather, it creates an open and respectful dialogue and validates their emotions. Avoid advice, pity, or assuming you know their story. [It's Not About The Nail](#) and [Brené Brown on Empathy](#) are short, simple videos that demonstrate this process. Developing training for your organization's staff around empathy can improve your customer service and peer-to-peer interactions within your organization.

Perspective-Taking

Training that includes perspective-taking such as this exercise in [poverty simulation](#) can increase empathy, and both can support positive interactions and effective, collaborative problem-solving. For more advanced training, you may also research poverty simulation training offered by human service providers in your community. Or, if budget allows, you could consider purchasing a poverty simulation kit like this one from [Community Action Poverty Simulation \(CAPS\)](#) where the goal is to shift the paradigm about poverty away from being seen as a personal failure and toward the understanding of poverty as structural, a failure of society.

Systemic/Structural Inequity within Communities

Educating yourself about the community (population, resources, culture, history, etc.) within which your organization functions through community/ecosystem mapping can increase knowledge of what resources exist/are needed as well as historical and current systemic and geographical barriers to accessing services (i.e. [redlining](#), [environmental racism](#), etc.).

- [Ecosystem Mapping Toolkit](#)
- [Community Mapping Toolkit](#)

LGBTQA+

Non-discrimination policies, benefits, and other practices are essential for all organizations to ensure employees are given equal opportunities for success and support.

- [Employers - HRC Foundation](#)
- [Toolkits & Guides | Out & Equal](#)
- [SHRM - Creating Inclusive Workplaces for LGBTQ Employees](#)
- [LGBT Workplace Resources American.edu](#)

Creating A Culture By Design

This webinar on [Becoming a Cultural Architect](#) (*San Diego Humane Society*) discusses fostering Psychological Safety in the workplace and the behaviors that we as leaders can exhibit that will allow us to intentionally create culture by design. Additional resources include:



- [Becoming A Cultural Architect](#)

The Environment and Environmental Racism

When systemic racism and environmental health issues merge, it's known as environmental racism—a form of racism whereby communities of color are more likely to be burdened with environmental hazards, such as toxic waste and industrial pollution. That in turn puts the people and animals in these areas at greater risk of illnesses linked to unhealthy water, housing, and air, making the shelter itself a critical space for community-based support. We recommend having a basic understanding of environmental racism across your organization. You can learn more at the links below:

- [Environmental Racism in St. Louis](#)
- [Environmental Justice - Columbus](#)
- [Racial Disparities and Climate Change - Princeton](#)
- [Environmental Justice Learning Center - EPA](#)
- [A New EPA Report Shows That Environmental Racism Is Real - The Atlantic](#)
- [Mapping Environmental Racism: Q&A with Jaime Madrigano and Benjamin Preston | RAND](#)
- [Robert Bullard: How Environmental Racism Shapes the US - PBS](#)
- Specific to East St. Louis:
 - [Excerpts from Jonathan Kozol's "Savage Inequalities"](#)
 - [Regional Environmental Racism Report \(focuses mainly on MO-side of river\)](#)
 - [Centreville Sewage Crisis \(part of East St. Louis\)](#)
 - [ESTL parks, industrial pollution, and race massacre](#)

Trauma-Informed Care and Trauma training

A trauma-informed approach to care acknowledges that health care organizations and care teams need to have a complete picture of a patient's life situation—past and present—to provide effective health care services with a healing orientation. Adopting trauma-informed practices can potentially improve patient engagement, treatment adherence, and health outcomes, as well as provider and staff wellness. It can also help reduce avoidable care and excess costs for both the health care and social service sectors. Providing trauma-informed care and offering trauma training within your organization is a particularly effective tool for promoting positive relationships both internally and externally.

- [Trauma-Informed Care Industry Collaboration Guide - HASS](#)
- [Trauma-Informed Care - National Council](#)
- [Trauma-Informed Care Training - Child Care Resource Center \(CCRC\)](#)
- [Trauma-informed care: What it is, and why it's important - Harvard Health](#)
- [What is Trauma-Informed Care? - CHCS](#)
- [Trauma, Stress, and Dog Behavior - Dr. Sheila Segurson](#)

“The Link”: Family Violence and Mandated Reporting

Training that explores “[the link](#)” between human-directed violence and animal-directed violence can support animal services organizations to better identify and understand the signs/symptoms



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and impacts of family violence. Training related to “the link” can be accompanied by practical training and understanding of animal services’ role as mandated reporters of suspected child/adult abuse and neglect. Please refer to the [One Pager on Child /Adult Protective Services](#) for more information.

Mandated Reporting

A **mandated reporter**, mentioned in the [One Pager on Child / Adult Protective Services](#), is an individual or organization that is legally bound to report suspected child/adult abuse/neglect. Each state delineates who is a mandated reporter differently and seven states specifically delineate animal control and/or humane officers as mandated reporters. For more information on mandated reporting, you can visit [ChildWelfare.Gov - Mandated Reporting](#).

Occupational Health and Safety (OSHA)

Occupational Safety and Health Administration ([OSHA](#)) and National Institute for Occupational Safety and Health ([NIOSH](#)) ensure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education, and assistance. Following OSHA standards not only leads to a safer workplace for the people associated with your organization but also results in greater productivity and efficiency for your organization, allowing you to save more lives. All facilities and clinics must meet the federal minimum OSHA requirements, as well as state and local requirements.

- [AVMA Safety Manual](#)
- [OSHA web based training tools](#)
- [NIOSH Resources](#)
- [Canada Occupational Health and Safety Regulations \(SOR/86-304\)](#)
- [Patterson Veterinary Training](#)

Safety, First Aid, and CPR

All organizations should have clear, trainable safety and first aid protocols in place, especially when dealing with chemicals, medical supplies, animals, potential fluids, and high-stress situations.

First Aid and CPR

If possible, look for a local organization that can do in-person training on safety, first aid, and CPR when/if needed. Online resources are also available as you get started:

- [Psychological First Aid](#): Free course offered on psychological first aid.
- [The Red Cross](#): Online courses and certifications - First Aid, CPR, and AED training.
- [CPR Training with Red Cross](#) - Locate in-person certification locations
- [St John Ambulance, Canada](#): First Aid Training

Shelter Specific Safety Protocols

Safety protocols should be created for all situations at your organization that add risk to employees, customers, or anyone in between. Here are a few examples of safety protocols your organization should have on file based on your specific setup:



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- [Safe Workplace Playbook for Animal Shelters - ASPCA Pro](#)
- [Guidelines for Standards of Care in Animal Shelters - Shelter Vet](#)
- Animal bites
- Loose animals
- Medical emergencies
- Lost/missing person

COVID-19 and Other Infectious Disease(s) - People

Appropriate measures must be followed to keep staff and clients safe and to comply with local regulations and restrictions:

- [CDC Guidance for Healthcare Clinics \(including Veterinary Clinics\)](#)
- [COVID-19 recovery toolkit for shelters - Ontario Shelter Medicine](#)
- [Links to mitigating the risk of infection](#) and [resources](#) - Worms and Germs

Infectious Disease(s) - Animals

There are a number of diseases and conditions that can be transmitted between humans and other animals. Examples: Viral diseases: Rabies, Influenza, bacterial diseases: *Salmonella*, *E. coli*, *Campylobacter*, *Leptospirosis*, *Bartonella*, Lyme, Psittacosis, parasitic disease: *Cryptosporidium*, *Giardia*, roundworms, hookworms, tapeworms, *Toxoplasma*, and fungal: Ringworm, Cryptococcosis. It is important to be aware of the possibility of transmission and have protocols created in case this occurs. This is by no means a comprehensive list, but will get you started:

- [CDC Zoonotic Diseases](#)
- [CDC Health Pets, Healthy People Information for Veterinarians](#)
- [Iowa State University Center for Food Security and Public Health Zoonotic Diseases](#)
- [Maddie's Shelter Medicine Program](#)
- [Vet Client Education Handouts \(Spanish\) - Latinx Veterinary Medical Association](#)

Narcan training

“Naloxone” (referred to by the brand name Narcan often) “is a life-saving medication that can reverse an overdose from opioids, including heroin, fentanyl, and prescription opioid medications. Often given as a nasal spray, naloxone is safe and easy to use.” (CDC) You can learn how to use Narcan locally in person or through virtual programs rather quickly. Some states require official training for you to use Narcan and some do not. Please take note of your state’s specific regulations before identifying which staff and volunteers should be trained for this. It can be helpful to identify which staff and volunteers are CPR/AED certified in case help is needed outright. Identify lead contacts at your organization for safety procedures. The examples provided are not comprehensive but may be used as a place to start.

- [Naloxone Training - National Drug Court Institute - NDCI.org](#)
- [First Aid for Opioid Overdoses Online Course | Red Cross](#)
- [Training Page | Get Naloxone Now](#)



Clinic-Specific Training

This section is specific to hosting a One Health Clinic, whether it be a pop-up, using a mobile unit, or a larger event in partnership with human service agencies. To ensure your staff are prepared to implement these programs, here is an industry collaboration guide with more details to get you started: [Clinic Specific Training](#).

Industry Collaboration Guides

These [Industry Collaboration Guides](#) have been created as a tool to help get you started with conversations with other organizations and to make the connection to the OneHealth toolkit. They are not intended to be a script. However, they include nuances, unique norms, laws, etc. with key sectors to keep in mind and adapt to your specific outreach conversation. The guides are intended as a more in-depth look at particular aspects of this One Health Toolkit and they were provided by people who are experts in these areas. They are an integral part of the successful implementation of this toolkit and we strongly encourage that they are reviewed and utilized as you integrate One Health into your organization.

Many of the industry collaboration guides are matched with either the “**Referral Care Model**” or “**Supported Referral Model**” section of this toolkit. These models expand upon ways to build sustainable, equitable partnerships in your community to support the people, pets, and environment. You can learn more about each in the following sections.

Referral Care Model

The One Health integration model is intended to be fluid and not a linear process. You can choose or move between the Referral Care Model and the Supported Referral Model as it applies to your organization, the resources, and budget you have available.

What is the Referral Care Model?

The Referral Care Model is the establishment of key partnerships so that you can have a “referring relationship” to meet the needs of your community. This model is a broad guide on building strategic connections to facilitate a One Health network that brings together human services, animal services, and the environment, and meets the holistic needs of the family unit and the community, leading to better and longer-lasting outcomes. The Referral Care Model operates under a recognition that it is critical to look beyond the animals directly and acknowledges the complex challenges people face. Staff knowledge of resources and referrals may be considered the most attainable first step for animal welfare organizations exploring a One Health framework and would be a strong jumping-off point for further integration.

A [referral](#), in the most basic sense, is the act of transfer of care from one clinician to another by request. In the scope of animal services, human healthcare, and the environment, building a two-way referral relationship involves creating connections with other service organizations and agencies. These connections can be formal partnerships or informal business relationships. An

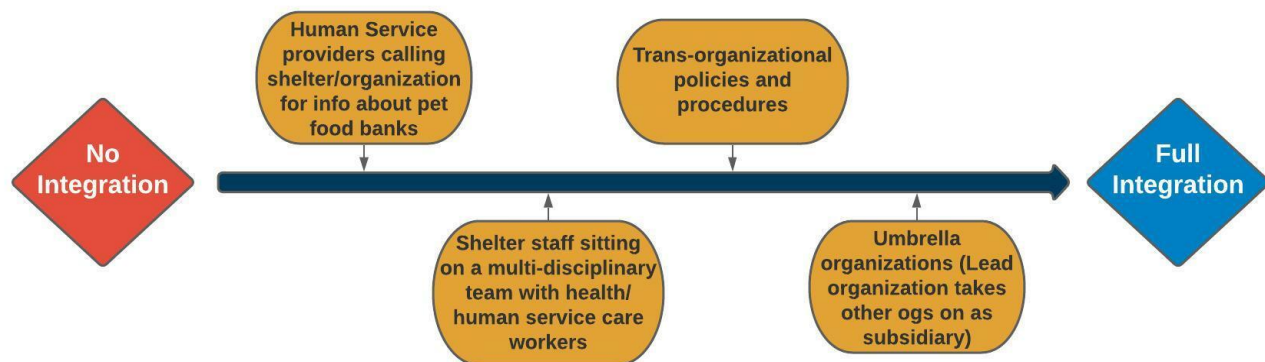


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understanding of the norms, legal environment, and unique operating environment of other agencies can be very useful in building functional relationships.

This section provides insight into how to develop these relationships with examples and industry collaboration guides for various sectors. It is not, however, meant to address the full scope of One Health nor does it provide answers to the intersection of every aspect of animal services, human health, or the environment.

This is an example of what infusing One Health in your organization could look like. As you can see, the first level of integration is a collaboration between human service providers and an animal shelter to provide services to a member of the community.



Providing resources and referrals is at the lower end of the integration scale, and this service is relatively simple to implement and therefore more feasible for animal welfare organizations with limited resources. This a great place to start with integrating a One Health model into your organization, and it can provide support to your community immediately, filling service gaps that may have previously existed, and building a healthier ecosystem of service options.

Why do we need a Referral Care Model?

We envision animal services as complementary to the community safety net with direct relevance in human services. Through collaboration and networking with other organizations in your community, you can combine the collective of safety-net nonprofits across a number of service sectors. This will directly improve recommendations and referrals of available resources and services for the people and animals in your community, allowing yourself and other organizations to more effectively provide support. Creative collaborations can also generate interest and support from funders as the shift to holistically consider the human/animal connection increases.

Who can use the Referral Care Model?

This could be useful for all safety-net organizations and service agencies (government, nonprofit, volunteer, etc.) including animal services, human services, and environmental health organizations. While this document is directed at animal services, any service organization that wants to



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facilitate a holistic care network can use these tools to implement this type of collaboration and customize it to their community's specific needs and assets.

Here is a list of potential connections you can make in your community. This is not a complete list, but it should provide you with a few places to start! There is always a host of partnership opportunities waiting to happen. Each community, city, and state is unique.

Animal Services

- Boarding Kennels To Provide Emergency And Crisis Boarding
- Dog Trainers
- Mobile Pet Groomers
- Mobile Spay/Neuter Clinics
- Pet Food Pantries
- Pet Food And Supply Stores
- Veterinary Clinics

Human Services

- [Adult Protection Services](#), [Child Protection Services](#), Police Services
- Agencies Assisting Homelessness (Homeless Shelters, Day Centers, Soup Kitchens)
- Assisted Living Homes
- [Behavioral Health](#)
- Bereavement/Trauma Agencies
- Colleges And Universities (Some can provide Interns, Researchers, And Volunteers)
- Community And Recreation Centers
- Community Emergency Response Services (Police, Fire, EMS)
- Disaster Relief
- Domestic Violence Shelters
- Financial Assistance Organizations
- Hospitals
- Housing
- Human Food Pantries/WIC/SNAP
- [Human Healthcare](#)
- Human Healthcare Conferences ([The Top Healthcare Events & Conferences Of 2021](#))
- Human Resource Fairs
- Human Vaccine Clinics
- Immigrant Services
- [Indigenous Communities](#)
- Legal Support Services (Legal Aid)
- Libraries
- Local Media
- Military Deployment Support
- Mobile Showers
- Organizations for Mental Health Crises
- Private Companies That May Offer Discounted Or Pro Bono (Legal Services, Kennel Boarding, Dog Trainers, Carpentry)
- Professional And Trade Schools (Vet Tech Programs)
- Safe Parking Lots



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- Schools
- [Senior Services](#)
- Transportation Providers (City Bus System, Grants Through Lyft And Uber)
- [Veterinary Organizations](#)
- Veteran Services
- [Women's Shelters](#)

Environmental Agencies

- Nature Preserves
- Pet-Friendly Housing Agencies
- Wildlife Rehabilitation Associations

How can we use the Referral Care Model?

The whole is greater than the sum of its parts. If organizations try to work alone, they risk using significant resources and not achieving the desired impact. It's important to think outside of the animal industry and form relationships in other sectors as well, using a [One Health framework](#).

Start with Self Assessment

Before building referral relationships with organizations, it's important to have the basics of your organization, capacity, and needs identified. Consider including the following questions while completing a short self-assessment.

- What is your organization's mission statement?
 - By reviewing your mission statement you can immediately identify what partnerships your organization could use to support your mission and focus on those first.
- What type of services do you already provide?
 - Are these services sustainable for your organizational capacity? If not, what does your organization need to make them sustainable?
 - What are the benefits of these services to the community?
 - Keep in mind that some referral partnerships will also want to use your organization as a referral recommendation to their clients, so it is important to be clear about your available services to potential partners.
- What types of organizations are you looking to build relationships with?
 - Keep in mind what gaps exist in your organization that could benefit the most from referral services or networking, as well as community need.

How to Begin Building Relationships

Depending on your organization's bandwidth and knowledge of local resources, referrals can be obtained in many ways:

- Through online research
- Word of mouth / Peer to peer
- Direct outreach to service providers
- Attending community information sessions/forums



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- Small, local organizations
- Community organization meetings or pre-existing collaboratives that represent several organizations

Start small! Begin with the easiest connections first, and build your network out from there as capacity increases. You may find as you start building these relationships, they have many recommendations for other services you should consider, allowing you to grow your network organically. Quality through direct relationships is more important than the quantity of relationships overall.

Event Tables/Booths: If you find any events or collaboratives that are already in place, you could reach out to request participation and set up an information table or booth. This strategy to piggyback on other human service events already in place is a great way to observe and create partnership connections without a large investment of time or resources.

Funding opportunities may also drive partner selection. For example, if you find that your city or county offers funding in the area of Domestic Violence (DV) and your organization has or would like to offer support to pets of people in DV situations, you could aim to partner here for resource potential.

Cold calling: It may be daunting at first to figure out who and how to contact an organization for the first time. This is considered a “cold call” when you don’t have a prior contact or relationship with someone at the potential partner agency and it is completely normal. The relationship has to start somewhere and many long-term, strong partnerships begin this way. Cold calling is typically a solicitation by phone, but it can also involve in-person visits. You can adapt a [cold calling script](#) to suit your comfort level as well as the needs of your organization and use it as a starting point to get the conversation started.

Helpful tips:

- Don’t forget to keep notes during meetings and/or record virtual meetings
- **Keep organized with planning documents, consent forms, etc.**
 - It may be a good idea to keep an internal, living spreadsheet of each partnership you form, their main point of contact, an overview of what they offer, and links to all referral and consent documentation as needed. Here are a couple of different types of lists that can get you started:
 - [Potential Community Partnership Contact List - HASS](#)
 - [Simplified Partner Tracking Spreadsheet Template](#)
 - If your organization has the capacity, creating a partnership-specific section of your website may be beneficial. This can be a useful landing space for those looking for resources and/or assistance that your organization does not provide but one of your partners might, as well as encourage other community partners to contact you directly wanting to be included.
- Even though this project should have a distinct leader, don’t forget that everyone has unique experiences to share, so make this project a safe space to share ideas and collaborate.



- One size does not fit all so allowing for a little flexibility in contracts and policies will go a long way!

Follow Up: Once you have your list of potential partners, you can begin planning. If possible, identifying a set of volunteers or staff who can reach out to help plan introduction calls or meetings can save a lot of time. Often, commitments to partners for clinics may need at least one in-person meeting to kick things off, making sure everyone is on the same page. Once you have established contact with a potential partner, give it a little time before you follow up. Based on previous meetings, ensure you keep an up-to-date list of who the point of contact is for each potential connection.

Leveraging and Stewarding Partnerships:

Partnerships are all about relationship building over time and some evolve in months or years. The key is to keep pursuing and developing at least one key contact at your target partner agency and always have a backup contact should your key contact leave that agency. Often the relationship is between the two people and is not truly organizational, so more work may be required to build that organizational relationship. Partnerships are usually about who you know, so the more opportunities for networking your organization has, the better chance you have of getting in front of the right people. As trust builds, you can add additional partners, citing existing partnerships, highlighting partners on the clinic collateral, social media, and any other PR efforts.

Engagement tips:

Below are some tips on how to engage different sectors of your community.

- **Get to know your elected officials.** Animal welfare tends to cross political lines as people across all are invested in their pets. As a local leader in animal welfare, your view is important and elected officials should welcome your thoughts. Maintain a list of political leaders, including local, state, and federal officeholders. Keep them on your mailing lists and update them regularly on the work you do. Remember, you're a constituent and your local political leaders should be working for you. Make sure your interests are well-represented!
 - For more information on engaging with your elected officials, review the [HASS Government Communications: Getting Started Toolkit](#)
- **Be active in the local community or networking groups.** Join your Chamber of Commerce or connect with civic groups/associations, such as a local Rotary organization, non-English speaking community groups, and more. No matter how big or small, all communities have humanitarian or business advocacy groups that you can tap into.
 - What you put in is what you'll get out of networking. Being active and attending events consistently will pay off down the road. If possible, share this opportunity with others in your organization. Depending on their role, being more visible in the community may be a welcome step-up in responsibilities.
- **Tap into your existing networks.** Your board members and volunteers should already have a vested interest in the work you're doing. Make sure you're communicating with them about your program's goals and the type of organizations with which you hope to partner. Think of friends or previous co-workers who might work in the human service field that you can reach out to.



- **Offer presentations** to community partners on what your organization can offer. Try to target your presentations to frontline employees (such as case managers, police officers, social workers, etc.). Bring pet resource guides and business cards. Make sure to explain the importance of the human-animal bond and why the bond is important to the people they serve. ([Example Presentations](#))

Next Steps:

As you build relationships, **keep a very clear tracking sheet or database** (mentioned above in helpful tips) of important details for each partnership, documentation, and as-needed SOPs outlining exactly how the partnership operates, for organizational leadership and marketing team use. (This will become especially important in the **Supported Referral Model** process) It may also be beneficial to create a public-facing list (website, social media, live document, etc) that is shared by your organization's customer staff, to share with community members that need general recommendations/resources you have received from existing partners. As you add partners to your list, it is important that your organization's staff, especially your customer service individuals, are aware of what is available so they can best support members of the community.

To learn more about providing more direct, specialized assistance utilizing existing partnership referrals, see the **Supported Referral Model** below.

Supported Referral Model

The One Health integration model is intended to be fluid and not a linear process. You can choose or move between the Referral Care Model and the Supported Referral Model as it applies to your organization, the resources, and budget you have available.

What is the Supported Referral Model?

While the Referral Care Model includes using a list of resources and sharing vital information, **The Supported Referral Model** introduces ideas on how to provide assistance utilizing partnership referrals within the scope of animal welfare to fill the gaps beyond our expertise. Providing a referral alone may not always be enough, and additional support can make a significant impact. **The Supported Referral Model** process helps provide direct assistance in accessing the referrals provided.

Effective referral systems from the animal welfare sector to human services and vice versa are essential to save lives and ensure quality and a continuum of care. The effectiveness of referral systems in the One Health Integration model depends on factors that involve three main stakeholders. Each stakeholder is dependent on the other and could form either a barrier or a facilitator of referral and support in the One Health Integration model.

- Clients and/or community members
- Animal welfare workers (Public-facing staff; Case Managers/Resource navigators/etc.)
- Facility-based health care workers and other social services



Why do we need a Supported Referral Model?

Very often, providing a referral might not result in accessing the service needed. Engaging in delicate or difficult conversations might help us identify the barriers and get the answers to provide the specific support needed to access care. We have the ability to view the specific challenges through the One Health lens, we can better focus on where the assistance is needed. Often, there is a significant amount of direct assistance, support, and even advocacy needed before the referral service is accessed.

Who can use a Supported Referral Model?

The Supported Referral Model can be useful for all safety-net organizations and service agencies (government, nonprofit, volunteer, etc) including animal services, human services, environmental health organizations, and more. While this document is directed at animal services, any service organization that wants to facilitate a holistic care network can use these tools to implement this type of collaboration and customize it to their community's specific needs and assets.

How can we use the Supported Referral Model?

As your budget and resources allow, the following options can provide a sustainable foundation for implementing a Supported Referral Model.

It is vital for organizations offering safety net and intervention services to have appropriately trained public-facing staff utilizing excellent customer service skills. Your organization may consider an audit of the [ad hoc](#) department that is currently operating in this space and fielding questions from the public. Based on the results of your audit, your organization can create and/or update existing SOPs to reflect the necessary updates that need to be implemented. Some examples of conducting an audit for your public-facing staff are:

- [The only customer service audit checklist you'll ever need: 30+ skills & tools any business should optimize. - Ruby Blog](#)
- [How to Audit Your Customer Service](#)
- [The Only Customer Service Checklist You'll Need in 2021](#)

Get creative and realign your staff as needed. You could consider combining teams that have similar or duplicating services. Cross-training could result in more effective teams, systems, and processes. For example, Guest Relations staff who answer the phone and Owner Surrender/Admissions staff can be cross-trained to provide intervention services and referrals to access care. Officers in the field could provide resources, referrals, microchips, and even schedule appointments if needed.

You can create a very basic call center with or without collaboration with other departments like Guest Relations, Animal Control, or Community Support Services. Your organization may also utilize call services such as *Google Voice* to create a dedicated support line separate from your primary phone number, as needed. If you have a corporate call center (i.e. you are a municipal agency), consider having these types of calls forwarded directly to your team.

- **Note:** It is crucial to get back to people in a timely manner as they might be in a crisis. A phone call is better than an email, especially in urgent situations. Having a person available to answer the phone is ideal when helping people and their families in a crisis.



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Starting from scratch with a volunteer team that is trained to help with “social worker” type responsibilities is a great way to support requests for assistance. For example, an option you might consider would be a “Resource Navigator” that can easily organize and distribute available resources on a case-by-case basis.

- Ensure all volunteer positions have clearly stated job descriptions including expectations and any available protocols they need to complete their job effectively.
- If you have an existing volunteer team, other volunteer opportunities could include assisting guests by making phone calls or assisting in filling out forms or offering resource/animal/medical transportation.
- Helpful Tips:
 - Create a basic intake form that asks questions about the owner’s situations and needs. This form can be filled out online or in person.
 - Create documents of resources based on the answers someone provides (removing ALL personal details. For example, providing support for emergency boarding instead of surrender, medical care instead of surrender, individual grants for medical, etc. These documents can be used as easy starting points for individuals in similar challenges in the future instead of staff starting from scratch!
 - Consider having any staff and volunteers working with clients train in active listening/[motivational interviewing](#).

If your organization can afford it, [hiring a Social Worker](#) to act as a Case Manager within your organization can significantly improve your ability to provide referrals and direct support to individuals contacting your organization. This person may also be able to act as a trainer to any social work volunteers your organization brings onboard.

If your organization is not able to afford it, another option may be to create opportunities for [Social Work Interns](#). These interns would act under the supervision of a licensed social worker that is not an employee of your organization. It is preferable to find an intern who is being paid by someone for their internship or a student that has practicum hours to complete under a licensed professional. Universities can be a good place to actively recruit these interns. Your organization should discuss with the university ahead of time about specific requirements and to get an understanding of the expectations and complexity of starting a program as this can vary by school and individual supervisor. Be prepared to discuss what the student would be doing as well as what the benefit would be to the clients and student. Many supervisors may be surprised and not understand the connection between social work and animal services.

Collaborate with community service providers. The Referral Care Model gives you a starting place for building relationships in your community, and as your organization implements a Supported Referral Model, continued collaboration will expand the reach of your public-facing support services network. Consider the following options, and come up with some of your own!

- Invite community service providers to meet semi-regularly to discuss options and needs
- Participate at human health services resource fairs
- Create a loose working group or small coalition, human services alliance, task forces, counsels, or other peer groups to discuss topics such as:
 - Domestic violence



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- Hoarding
- Housing and homelessness
- Hunger
- Community and human services
- Identifying overlaps or gaps in services and streamlining capabilities
 - **Examples:** Provide pet food at a human food bank, pet wellness checks at a human health clinic, resources to pet families living in natural environments including on river banks, etc.

Collaborate with environmental and wildlife organizations. Collaborating with these agencies can not only add to your referral list but can provide additional opportunities for your organization to be key changemakers in the increased health of your overall communities. Consider participating in environmental impact resource fairs. Collaborate with organizations providing TNR, wildlife help, livestock (example: fire abatement), keeping nature preserves preserved, solar/wind energy, water, and electric use awareness, volunteer projects to clean upstream areas from pets/homelessness, water department management of pollution through pet waste runoff, green spaces in lower-income neighborhoods, partnerships with beautifying agencies or council members, planning departments/urban planning, community health and safety, and more!

Determine potential barriers to service access for clients through gentle questioning. This process would be best done in a quiet, private space and clients should **never** feel as though they are being interrogated. If your organization has a Social Worker/Social Work Intern/Case Manager, they would be the point person for this process. If you do not have any of those positions available, your organization may offer a questionnaire with a variety of questions, and the client may include or omit any information they prefer. Attempting to reduce barriers such as transportation, language/cultural, difficulty negotiating systems (giving more details on how organizations function, who to call, and what they should be asking), access/knowledge of technology, recognizing and understanding limitations of time availability (part-time job, juggling jobs), financial barriers, child care, fear of stigma (family's health, own health, pet's health), fear of law enforcement (police and animal protection), documentation/immigration status, pride, isolation, fear of reciprocity/being beholden, and more can help your organization keep more people and pets together, as well as provide them with appropriate, specialized referrals.

Program Evaluation

The primary purpose of program evaluation in the context of One Health Integration is to determine the effectiveness of a given intervention and assess and improve the quality of the intervention.

Benefits of Program Evaluation

Program evaluation is essential to proving the efficacy of One Health. The perceived benefits of a One Health Integration approach are largely hinged on increasing public health efficiency and cost-effectiveness through a better understanding of the following:

- The interconnectedness and disease risk—through shared control and detection efforts



- The results benefit the health of humans, animals, and the ecosystem.

Program [evaluation](#) is an especially valuable tool for program managers who are seeking to strengthen the quality of their programs and improve outcomes for the people and animals they serve. It answers basic questions about a program's effectiveness and evaluation data can be used to identify gaps in service, barriers to access, where to pinpoint future development and training for employees, and improve program delivery. Program evaluation also may create opportunities for future funding and grant writing based on positive results.

How to begin the process of Program Evaluation

A program evaluation should occur once a well-designed One Health program is already in place at your organization. Information gathering and data collection take place during many phases of program development. Some data related to requests for human services can be collected at the start of the project, while other data such as mental benefits resulting from receiving care for their animal can be ongoing with the One Health model. As you begin a program evaluation, ensure all available data is readily available, accessible, and in one centralized location.

Conceptualizing the process:

Program evaluations can come in many shapes and sizes and is completely dependent on your organization's resources and capabilities. Below we are providing a few different options for evaluating your existing program and using that evaluation to propel your program forward.

A **LOGIC model** is a graphic depiction (road map) that presents the shared relationships among the resources, activities, outputs, outcomes, and impact for your program. It depicts the relationship between your program's activities and their intended effects. This is a useful tool in broad conceptualization for program evaluation. You will want to ensure outcomes are related to all/most aspects of the One Health model: Humans, animals, and the environment. This model helps communicate the program to people outside the program in a concise and compelling way. The model helps program staff gain a common understanding of how the program works and their responsibilities to make it work. Here are a few examples of what a LOGIC model could look like:

- [Wallace Blog - Logic Model Overview](#)
- [University of Wisconsin-Madison Printable Logic Model](#)
- [Arizona University - Logic models with program evaluation](#)
- [Community Health Center LOGIC Model](#)

For smaller/newer organizations that a LOGIC model may be too complex for or may otherwise not be a great fit for an initial program evaluation, begin with a clearly dated document to be able to track in the future. Choosing predetermined data metrics and evaluation topics and regularly revisiting them will allow your organization to determine if they are still valuable to your overall program, and evolve from there until you can do a full program evaluation. Consider the following:

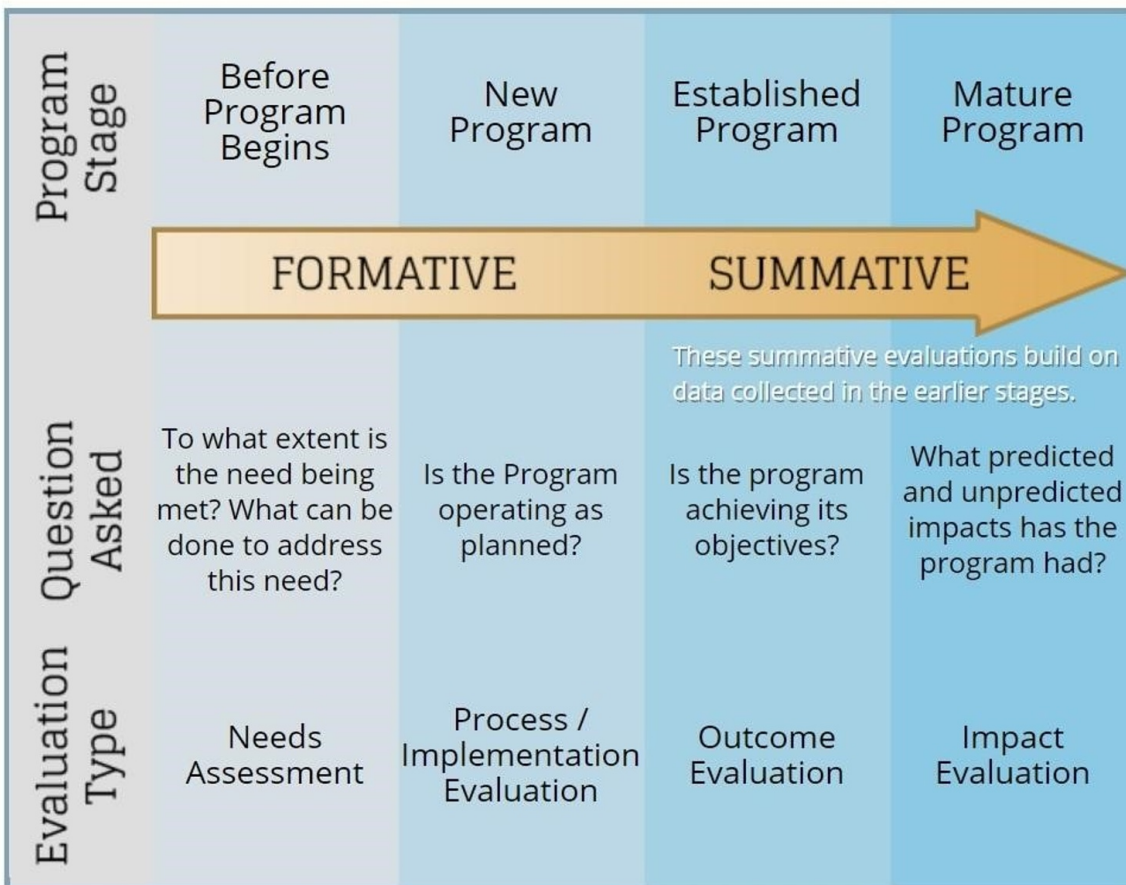
- What do we want to accomplish?
- How do we show success in our collaboration/partnerships? What do we value in a partnership and when do we want to evaluate that?
- What do we want to measure? What basic metrics do we want to start with?



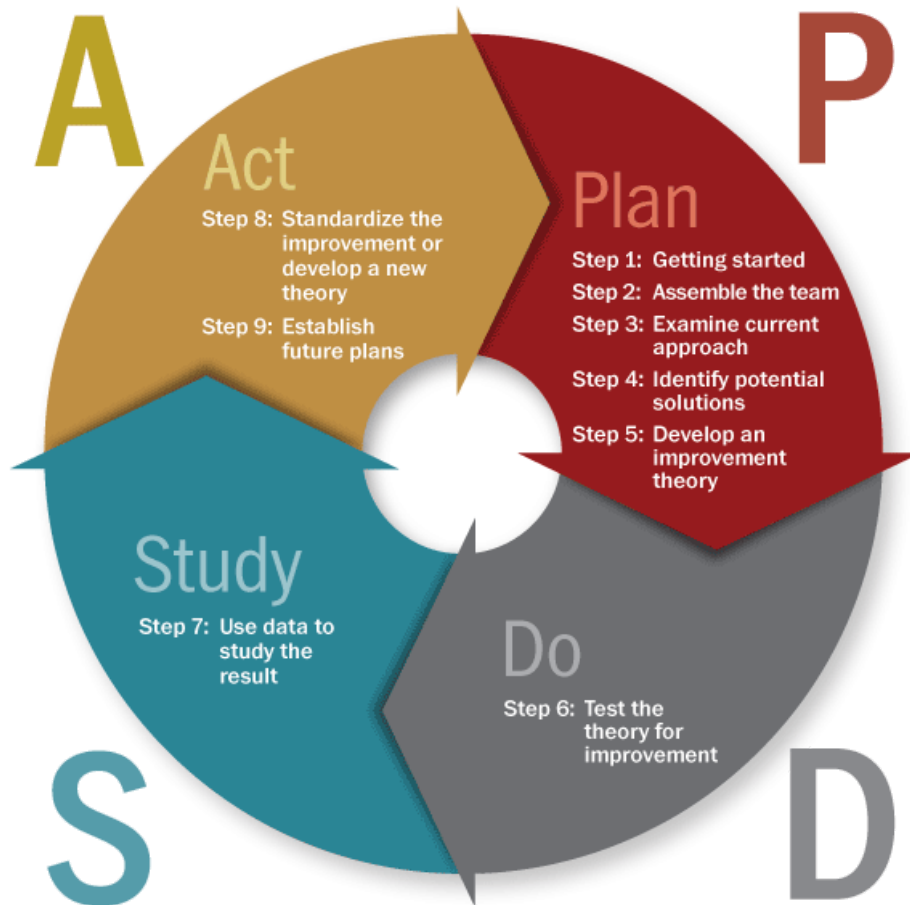
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- Who is in charge of posing the questions and who is making the final decisions on metrics being measured?
- Who is our audience?

“Evaluations fall into one of two broad categories: **formative and summative**. Formative evaluations are conducted during program development and implementation and are useful if you want direction on how to best achieve your goals or improve your program. Summative evaluations should be completed once your programs are well established and will tell you to what extent the program is achieving its goals.” [MEERA Evaluation Resources](#)



A [Plan-Do-Study-Act \(PDSA\)](#) process identifies areas for improvement, tests that improvement theory with data documentation of the progress, evaluates that data, and decides what action to take based on the result. This process can be completed over and over again to expand and enhance your existing programming.



Tips and Tricks for One Health Program Evaluation:

- Begin by collecting program data immediately! It's never too early to have a starting point.
- Build One Health programming into your organization's long-term strategic plan.
- Consider which One Health metrics might overlap with data already being collected by other programs within your organization.
- Program evaluations don't have to be perfect! Start with what you can and build as time goes on. You can view initial trends without specific data points! While that may not be sufficient for funding, it will allow you to adjust and expand programming accordingly.
- Consider partnering with human services organizations to share data if your touchpoints are the same.
- [Here is a list of sample metrics](#)



Success Stories

News Articles/Blogs:

- ASPCA Pro: [They Did It: Hired a Social Worker for Their Animal Shelter](#) - Gateway Pet Guardians
- ABC10 News: Resources and support provided to community - [Federal workers share stresses of 'desperate' time amid government shutdown](#)
- Chew On This - Maddie's Fund: [How one animal welfare organization is helping hospitalized pet owners](#)

Video Success Stories:

- SDHS partners with Project Homeless Connect: [Video Link](#)
- SDHS helps homeless veterans during Stand Down San Diego 2018: [Video Link](#)
- PAWS SD Community Resource Fair. Engaged the local council member in her district to help change policies at the San Diego South Bay Community Pet Event: [Video Link](#)
- PAWS SD Community Event bringing free and low-cost resources for pets and humans (partnership with human services) - [Video Link](#)

Press Releases:

- PAWS San Diego / SDHS partnership with Project Homeless Connect - [PAWS San Diego Will Help Pet Owners at Project Homeless Connect](#)
- PAWS San Diego / SDHS partnership - Bringing essential services to the underserved community: Barrio Logan - [Community Event Brings Essential Pet Supplies and Services into Barrio Logan](#)
- PAWS San Diego / SDHS partnership - [Bringing essential services to Escondido](#)
- [New York Times Reports - Pet Food Pantries Are Springing Up Across The Nation](#)



Additional Resources

Literature Reviews/Research:

- Risks/Benefits of the Human-Animal Bond - The following research articles all establish research behind the risks/benefits of the Human-Animal bond.
 - [The Concerns, Difficulties, and Stressors of Caring for Pets during COVID-19: Results from a Large Survey of U.S. Pet Owners](#)
 - [How pets factor into healthcare decisions for COVID-19: A One Health perspective](#)
 - [Companion animal renters and pet-friendly housing in the US](#)
 - [Dog Ownership and Physical Activity: A Review of the Evidence](#)
 - [Human-Animal Interaction and Older Adults: An Overview](#)
 - [The Impact of Pets On Human Health and Psychological Well-Being: Fact, Fiction, or Hypothesis?](#)
 - [\(Non-Human\) Animal Companionship: A Crucial Support for People During the COVID-19 Pandemic](#)
 - [Loneliness, Depression, and Physical Activity in Older Adults: The Therapeutic Role of Human-Animal Interactions](#)
 - [Child Development and the Human-Companion Animal Bond](#)
 - [Pros and cons of pet ownership in sustaining independence in community-dwelling older adults: a scoping review](#)
 - [Salivary Studies of the Social Neuroscience of Human-Animal Interaction](#)
 - [Companion Animals and Child/Adolescent Development: A Systematic Review of the Evidence](#)
 - [The effects of assistance dogs on psychosocial health and wellbeing: A systematic literature review](#)
 - [The State of Research on Human-Animal Relations: Implications for Human Health](#)
- [Prosperity Now \(PN\)](#) - The PN white papers are a great place to get started with engaging conversation surrounding racism as an institutional/systemic issue.
- [Service Integration](#) - Spreadsheet of 30+ research resources regarding Service Integration

Environment:

- [Environment: the neglected component of the One Health triad - The Lancet Planetary Health](#)

Humans:

- [Pack Leader Bias and Recruiting Training - Session 3 2020 1216.pdf](#)
- [Pack Leader Bias and Recruiting Training](#)
- [PFL - Systemic Poverty in Animal Welfare](#)
- [PFL - Sustainability Guide](#)
- [San Diego - Becoming a Cultural Architect](#)
- [Honor Native Land Guide](#)
- [Culture Card American Indian and Alaska Native](#)
- [Health and Homelessness Gap Analysis](#) Questionnaire
- [Zoonoses and marginalized infectious diseases of poverty: Where do we stand?](#)
- [Maddie's Fund Zoonoses](#)



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- Affordable Housing - [Pet Deposit Laws](#) Spreadsheet by US State
- [CommunityHealthResourceFair](#) - Flyer

Animals:

- [Ed Yong: Zombie roaches and other parasite tales | TED Talk](#)
- [World Rabies Day Canada](#)
- [Animal Disease Resources - CFSPH](#)

Successful Partnerships (Examples):

- [Community Support Services | San Diego Humane Society](#)
- [Greenville County Animal Care Services | Get Help Page](#)
- [Oakland Animal Services Resources](#)
- [BARCS Pet Owners' Resource Guide](#)
- [Pet Help & Resources - LifeLine Animal Project | Get Pet Support](#)
- [HASS Community Partnership Examples List](#)
- [Partnership readiness assessment](#)
- [Maddie's Fund - Community Outreach](#)

Sample Agreements/Letters:

- [HASS Veterinarian Partnership Invitation Letter](#)
- [Sample of an Agreement between PAWS and Rescue Bank](#)
- [Temporary Boarding Agreement Sample - LA County](#)
- [SDHS Discount Pet Exam Locations and Vet Care Resource Partners](#)

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