

Grant ID: 1777

Title of Proposal: Community Cats Spay/Neuter  
Agency Type: Non-Profit  
Total Funding Requested: \$25,000.00  
Check Payable To: Sheltering Hands, Inc.

### Application Information

#### Demographics

Name of Applicant Agency:	Sheltering Hands, Inc.	<b>Website Address:</b>	www.shelteringhands.org
Person Submitting Proposal:	Kathleen Fleck DVM	<b>Position:</b>	Medical Director/Treasurer
<b>Person Submitting Proposal Email Address:</b>	kittyvet79@icloud.com		
Agency Head:	Debbie Wabbersen	Agency Head Email:	shelteringhands@embarqmail.com
Organization Business Address:	PO Box 843	<b>City:</b>	Williston
State:	FL	<b>Zip:</b>	32696
Phone (xxx-xxx-xxxx):	352-840-0663	<b>Fax:</b>	
Cell:	352-817-1752		

#### Agency Details

Date of 501(c)(3) Incorporation:

Dates of Last Fiscal Year: **Begin:** 04/01/16 **End:** 03/31/17

Organization Income in Last Fiscal Year: \$0.00

Organization Expenses in Last Fiscal Year: \$0.00

Number of Paid Employees: Full Time: 1 Part Time: 4

Number of Active Volunteers: 35

Total Volunteer Hours per Week: 0.00

How did you learn of the 2009 Florida Animal Friend grant competition? Previous recipient

Year(s) of previous Florida

Animal Friend grants (if applicable):

Previous Florida Animal Friend Applications:

Years Funded: 2009,2012,2014,2016 Year(s) denied/incomplete: 2011

	Grant #	Proposal Year	Proposal Title	Status
	111	2009	Levy County TNR and Low Income Spay/Neuter Program	Funded
Auto-Generated (Previous Applications):	214	2011	Community Cat Cooperative	Denied
	326	2012	Community Cats Program	Funded
	1424	2014	Community Cats TNR Program	Funded
	1663	2016	Community Cats Program TNR	Funded
	1777	2018	Community Cats Spay/Neuter	Funded

**Describe your Organization:**

**Services Provided**

- Open Admission Intake Shelter
- Limited Intake Shelter
- Foster Network
- Animal Control
- Spay/Neuter Services
- Other

**Organization Structure:**

- City, county, or tribal agency
- Private nonprofit agency
- TNR Group
- Rescue Group
- Other

**List your current board of directors:**

**Applicant Qualifications**

**For your organization, in the last complete fiscal year:**

**0 cats and 0 dogs were admitted.**

**0 cats and 0 dogs were adopted.**

**0 cats and 0 dogs were euthanized.**

**0 cats and 0 dogs were sterilized.**

**Briefly describe your animal programs:**

- |   |   |   |  |
|---|---|---|--|
| <input checked="" type="checkbox"/> Stray/Lost pet intake     | <input checked="" type="checkbox"/> Foster Program      | <input type="checkbox"/> Wellness services to understand pet owners | <input checked="" type="checkbox"/> Volunteer Program              |
| <input checked="" type="checkbox"/> Owner surrendered animals | <input type="checkbox"/> Food Bank                      | <input type="checkbox"/> Cruelty investigation                      | <input checked="" type="checkbox"/> High volume spay/neuter clinic |
| <input type="checkbox"/> Lost and Found Program               | <input checked="" type="checkbox"/> Behavior counseling | <input type="checkbox"/> Enforcement of ordinances                  | <input type="checkbox"/> Full service wellness clinic              |
| <input checked="" type="checkbox"/> Adoption Program          | <input type="checkbox"/> Disaster services              |   |  |

**If your program performs adoptions, are all animals sterilized before adoption?**

Yes

**If not all, what percentage of animals are not currently sterilized before adoption?**

**If not all, how are animals selected for sterilization before adoption?**

**If not all, describe your sterilization policies and procedures for assuring sterilization after adoption:**

**Give additional background information on your organization's programs as they relate to this application and the qualifications of the personnel who will be in charge of this program. Show that you have the ability to carry out this program.**

Sheltering Hands has a dedicated surgical facility and is currently has both a TNR program and a low cost program for non colony cats in Marion and Levy counties.

**If you currently have a program for sterilization of cats and/or dogs, describe your current level of funding and productivity and why additional resources are needed?**

#### Target Population

Geographical target area (name of city, county, zip codes, geographical Information service (GIS), etc.):	32696, 34479, 34491, 34470, 34420
Total human population in target area:	133,827
Percent of residents living below poverty in target area:	19
Estimated number of pet cats in target area (human population divided by 3.3):	40554
Estimated number of pet dogs in target area (human population divided by 4.0):	33457
Estimated number of feral cats in target area (human population divided by 6.0):	22305
Number of cats admitted to animal control shelters in the target area last year (if known)	4845
Number of dogs admitted to animal control shelters in the target area last year (if known)	3618
Number of cats euthanized in animal control shelters in the target area last year (if known)	3454
Number of dogs euthanized in animal control shelters in the target area last year (if known)	1072

Please explain if you believe your target area animal population is significantly different than above.  
We believe the number of “free roaming “ cats to be higher than population based estimates for feral cats. In our experience there seems to be a high percentage of stray but not necessarily feral cats in the colonies within the target area. Many of these cats may have at one time been pet cats or are currently considered “owned” but lack responsible owners. The socioeconomic nature of the area has led to frequent abandonment of kittens and non-sterilized adult cats that have greatly increased the overall stray populations. The “owners” of many unwanted city cats choose not to relinquish them to the county shelter and are relocating them to this more rural targeted area. We believe the number of “community cats” to be much higher. Using the estimated numbers this would bring the estimated target cat population closer to 25,000.

Please explain what you believe are the most substantial sources of dog and cat overpopulation in the target area:

Most of the overpopulation occurs due to irresponsible/uneducated pet ownership and the abandonment issues associated with socioeconomic factors in the area. This is especially true of the cat populations who are often

treated as disposable pets versus treasured family members. With many families there are limited financial resources that prevent many of these cats from being spayed/neutered or even seeking veterinary services at available clinics. Many owners allow their cats to roam without having been spayed or neutered thus producing large numbers of unwanted kittens. We find that many of the cat colonies we deal with started with either a stray having kittens or cats abandoned when previous owners moved away or died. The same situation occurs for the dogs but a little less so due to more restricted county ordinances with “dangerous dogs” and also increased regulations.

**What kinds of spay/neuter services are currently available in the target area and in what ways are these resources currently insufficient to meet community needs?**

Currently Marion County does have a “Neuter Commuter” unit for spay and neuter of dogs and cats in Marion county. Although helpful the program does not do stray/feral cat populations, is limited to 2 animals per owner yearly and appointments can take months to be scheduled. Current costs are lower than area veterinary clinics but still not affordable for most families living below poverty level or colony caregivers with limited funds. Several local veterinary clinics will do stray cats but not generally at reduced rates making it financially difficult for most people to individually keep their populations under control. There are currently no low cost options within 25 miles of the Williston area. Currently the Sheltering Hands surgical center is the only location for cat spays and neuters for under \$75 within Marion and Levy Counties.

**Florida Animal Friend is highly supportive of proposals that are focused on animal populations that are identified as substantial sources of dog or cat overpopulation rather than being diluted over too broad of a geographic area or diverse animal populations. Describe the specific target animal population of the spay/neuter project proposed for this grant:**

Pets in low-income families  Pit Bull / large breed dogs  TNR managed colonies of feral cats  Community cats (free-roaming and/or owned)  Other

TNR Managed Colony Feral Cat Program/Community Cats (Free-Roaming and/or Owned) Program

**Define the precise boundaries of the colony or targeted area, including estimate of square miles.**

There are 2 areas being targeted for this project. Area 1 is the zip code of 32696, which is the town of Williston and the surrounding rural area in Levy County. The area is approximately 6.8 sq. miles. Area 2 is a multi zip code area of the SE quadrant of Marion County. The zip codes include 34420, 34470, 34472, 34479, 34480, 34488 & 34491. The area is approximately 400 sq. miles and includes the towns of Belleview, Ocklawaha, Silver Springs, Summerfield & parts of Ocala.

**What is the criteria used for determining the target area(s) and/or eligibility for this program?**

All cats being done through the Sheltering Hands Community Cats Program are part of a managed colony approach. Caregivers feeding 2 or more homeless cats submit a registration application and attend a 2-hour workshop in order to be eligible for services. Registrations are renewed annually to continue service eligibility. The area was chosen due to an above average percentage of homeless cats within the small towns and surrounding rural areas compared to other urban areas within the county.

**Describe whether the targeted area is rural, suburban, or urban. Is it commercial, residential, agricultural, or a designated special land use?**

The areas targeted are primarily rural with several small suburban centers. The land use is mixed residential communities, small farms and commercial. The commercial use is primarily local service businesses, restaurants and retail.

**Estimated number of cats in the target colony area :** 10000

**Estimated number that are currently sterilized:** 1500

**Projected reduction after utilizing the grant: 700**

**For TNR program, describe the ability to maintain lifelong care for remaining cats, commitment level of volunteers/organizations, etc.**

Sheltering Hands has made the surgical program a mission priority. The Board is very supportive of the program and we find that the number of volunteers becoming involved has greatly increased because of the program priority. Colony caregivers are already committed to the cats in their care and are providing shelter and food in addition to managing their welfare. In our registrations we encourage the use of alternate caregivers to provide back up in case the primary caregiver is unavailable.

**Do current city/county ordinances address TNR or free-roaming cats?**

Yes

**Please explain what is allowed:**

There is no ban on feeding of cats in the managed colony program or of strays as long as the property rights of other residents are respected. Although the city and county ordinances do not address an official TNR program there is currently no feeding ban and special exceptions for licensing are given to “non owned”/feral cats. Sheltering Hands has a good relationship with Marion County Animal Services and they are very satisfied with the progress of the program and our professionalism.

**(NOTE: FAF will not fund any program this is inconsistent with local ordinances.)**

**For TNR program, list any groups or government agencies who support this TNR effort:**

The Sheltering Hands Community Cats program is supported by the Marion County commissioners, Marion County Animal Services, Humane Society of Marion County, University of Florida Shelter Medicine Program, Best Friends and is a part of the Alley Cat Allies Feral Friends Network.

**Describe any effort to lessen the negative impact on local wildlife.**

Because colonies are registered with Sheltering Hands we are able to make sure colonies are not being managed in sensitive wildlife areas and are relocated to safer areas when cats are discovered to be populating such areas.

**Describe efforts that will be made to mitigate current or potential nuisance issues.**

A network of trained volunteers is in place to work with caregivers, county officials and neighbors when nuisance issues arise. We utilize referrals from Marion County Animal Services director and staff to identify and address the complaint issues in a timely manner to effect good outcome for both the cats and the complainer. Use of management changes, fencing, motion activated deterrents, car covers etc. are all utilized. Tools to help resolve issues are discussed in our required workshop.

**Will the cats be ear-tipped? Yes**

**Will the cats be microchipped? Yes**

**Provide any additional information that will help the grant selection committee understand how this program will operate to achieve its goals.**

Sheltering Hands has worked diligently to promote our spay/neuter programs and will continue to work to expand our ability to provide low cost surgeries. The commitment of the volunteers, board and donors is evident in all aspects of the program. The additional funding with this grant will help us provide more assistance to low-income caregivers and those working to decrease cat populations in large colonies in the targeted areas. Our dedicated surgical facility helps us keep costs low.

Objectives

**What do you hope to accomplish with these funds (objectives should be specific and quantifiable)?**

In the previous year we have done approximately 1700 surgeries. With the new facilities we have the ability to further increase that number with supporting funding. With this grant program we hope to increase the number to at least 2025 surgeries total for 2018. The goal of our program is to maintain at least a 5% reduction annually with a long term goal to achieve zero population growth within the next 20 years. The grant will help us to guarantee the 5% reduction and hopefully allow closer to 10% improvement within this year.

**How does this program increase the number of sterilization surgeries above the existing baseline?**

Because the Sheltering Hands Community Cats program is the only organized program addressing the sterilization of homeless cats in the county, it is the existing baseline. Until more groups in the area are providing low cost service, the Sheltering Hands program is expandable only by having more available funds to be able to provide more surgeries. The funding from this grant program makes this possible.

Methods

**What criteria will you use to determine eligibility for your program?**

All cats being done through the Sheltering Hands Community Cats Program are part of a managed colony approach. Caregivers feeding 2 or more homeless cats submit a registration application and attend a 2-hour workshop in order to be eligible for services. Registrations are renewed annually to continue service eligibility. No registration or workshop are required to schedule cats into the low cost spay/neuter program for owned or non TNR strays.

**How will you advertise the program? Explain how the advertising will reach the target audience.**

Advertising is primarily through referrals and information available on our website and Facebook and Twitter pages. Referrals are from veterinary clinics, feed stores, other animal rescues, county health and animal services departments as well as from caregivers who are involved with the program. The target audience is already accessing these sources and so word of mouth is also a powerful way to advertise the program for little to no cost. We take advantage of any opportunity to utilize newspaper and other print advertising.

**How will you address barriers to full use of the program such as transportation, illiteracy, and cultural hurdles?**

Transportation and information transfer protocols are already in place to help make sure that all persons needing the TNR services will be provided access. Vehicles belonging to Sheltering Hands and bilingual volunteers are available to overcome any obstacles.

**Does this project involve the transportation of animals by someone other than the client? If so, describe the vehicles, methods for confinement, personnel training, liability releases used to assure the safety of the animals and handlers.**

The colony caregivers transport most of the cats. When necessary an enclosed 2009 Dodge minivan and a 2001 Toyota Sequoya can each transport up to 25 traps. All cats are required to be in a humane trap when being brought to the surgical center. Sheltering Hands has a trap loan program to provide traps for those caregivers who do not have their own. All caregivers sign a liability waiver with their registration application and a surgical liability waiver at the time of surgery. Volunteers doing transports are experienced in handling humane traps and feral cats. The 2-hour workshop that includes training and information on safe handling of the cats is required for caregivers and all volunteers involved with the TNR program.

Veterinary Services

**What arrangements have you made with veterinarians to perform the surgeries?**

Sheltering Hands operates a spay/neuter clinic on a 2-3 times weekly basis currently. The surgeries are

performed by both paid and volunteer veterinarians.

Are they:  In-house  Private Vet(s)  Combination

## Veterinary Practices

### Fee Range

What is the fee range to be paid for spay and neuter and what is the distribution to be paid by the client vs. the grant program? Keep in mind that Florida Animal Friend grant funds may only be used for costs directly associated with sterilization surgery (including anesthesia and pain control) and not for other items such as vaccines, testing, licensing, and capital purchases.

	Amount Paid by Client	Amount Paid by Project	Total Amount
<b>Range for Male Cats</b>	<input type="text" value="\$10.00"/>	<input type="text" value="\$30.00"/>	<input type="text" value="\$40.00"/>
<b>Range for Female Cats</b>	<input type="text" value="\$10.00"/>	<input type="text" value="\$40.00"/>	<input type="text" value="\$50.00"/>
<b>Range for Male Dogs</b>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
<b>Range for Female Dogs</b>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

Please check each item below to indicate additional services offered at the time of surgery, whether the client is required to pay for them, and if so what the fee is. For example, if an examination is required for surgery but is not charged to the client it would be marked: Required  Yes, Fee to client  No

	Required, Optional, or Not Offered	Fee to Client?
<b>Examination</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Rabies Vaccination if Due</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Other Vaccination if Due</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input type="radio"/> No <input checked="" type="radio"/> Yes <input type="text" value="\$5.00"/>
<b>Pain Medication</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Parasite Medication</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input type="radio"/> No <input checked="" type="radio"/> Yes <input type="text" value="\$5.00"/>
<b>HW Testing</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Feline Leuk/FIV</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>County License</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Ear tipping</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Microchip</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input type="radio"/> No <input type="radio"/> Yes
<b>Other</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes

Available

**None of the anticipated grant funds can be used for any of the above services, except for pain medication.**

**If necessary, please explain the procedures and fees described above:**

The services above are provided at no additional charge to the managed TNR colony cats. Owned & Stray cats being done through the low cost spay/neuter program get a rabies vaccination and pain management at no additional cost but the following optional services are offered FVRCP for \$10, microchipping for \$25, combo testing for \$25 and parasite medications for \$10 as additional fees.

**Is this a voucher program?** No

**If so, how will you assure compliance with the program?**

**For your voucher program, how have you determined the capacity of the veterinarians listed above to handle the projected capacity?**

**Will you have the ability to report the number of vouchers issued and the percentage that result in S/N surgeries?**

#### Community Collaboration

To assure the success of your program, are there any local groups (such as rescue groups, animal control agencies, TNR groups, local businesses, local media, social service agencies, etc.) other than your organization and your cooperating veterinarians who are committed to assist?

Yes  No

Please list them and detail their level of involvement with the proposed effort.

<b>Name</b>	<b>Level of Involvement</b>
Humane Society of Marion County	Referral of cats in both stray and TNR populations in Marion County. We are also working together to provide resources such as food and financial surgical assistance to the feral cat colonies in the county.
Marion County Animal Services	Referral of cats & colonies in problem areas of the county
SPCA of Marion County	Providing some financial assistance and colony management assistance for both TNR and Low Cost Spay/Neuter programs.
VOCAL	Referral of cats in both stray and TNR populations in Marion County. We are also planning a collaboration of several special spay/neuter events over the upcoming year to help increase the impact of the TNR program. The shared goal of achieving no kill status for the county is spurring the collaboration.

#### Other Information

**Provide any additional information that will help the grant selection committee understand how the program will operate to achieve its goals.**

It is a primary mission of Sheltering Hands to provide both education and surgical services to promote and work toward a county wide no-kill goal. Collaboration with other groups in the area is being established to increase the success of these efforts.

Budget

**Total number of sterilization surgeries projected:**

**Cats:** 700 **Dogs:** 0

**Total budget requested (Budget should not exceed \$25,000):** \$25,000.00

**Average cost/surgery projected:** \$36.00

**Describe any expenses that are not included in the grant and how they will be paid for (for example, vaccines, microchipping, ear notching, etc.):**

The annual budget of the surgical center already provides for extra expenses involved with vaccines, microchipping etc. for cats in the surgical programs. Additional fund raising efforts and donations help to supplement the budget.

**Describe any other funding sources for this program, i.e. other grants, targeted fundraising efforts, budget allocation, etc.**

We receive several small grants from foundations annually, a yard sale and other fundraisers are conducted specifically for the surgical programs throughout the year. In addition fees for optional services in the low cost spay/neuter program help to offset costs for the TNR program.

**What percent of the total cost of the program would this projected grant cover?**

15

Timeline

**All projects must be completed within 12 months of receipt of funding.**

**Projected start date:** 08/01/18/ **Projected end date:** 07/31/19

**Unexpended funds**

Any unexpended funds must be refunded to Florida Animal Friend within 30 days of the end of the project.

**Requests for extensions**

Requests for time extensions are discouraged and not often granted. If it is imperative to request an extension, such request must be made in writing at least 30 days prior to the end of the project. It is FAF's policy to seldom grant more than a 30-60 day extension.

Failure to submit reports and requests within the required time period will impact your agency's future grant applications.

Future Funding to Sustain Public Spay/Neuter

**\*Explain how the organization plans to fund this program in the future. Having sustainable plans including other grants, local donations and other services generating revenue enhances the chances of receiving this grant.**

The addition of volunteers with interest in fund raising is increasing as the reputation of the organizations' community programs spreads. By increased exposure within the communities we service, Sheltering Hands is

building on its donor base. The continued growth of the low cost spay/neuter program and expansion of the gift shop at the facility are adding revenue to benefit the TNR and surgical programs.

#### Promotion of Florida Animal Friend Spay/Neuter License Plate

**\*Applicants selected for funding are expected to publicize their grant in support of their spay/neuter program and promote the sale of the Animal Friend license plate via press releases, newsletters, website links, social media, etc. Please describe your plan to promote the Florida Animal Friend Spay/Neuter License Plate. Grantees are required to submit documentation of promotional endeavors with their final report.**

Sheltering Hands currently promotes the license plates on our website, in our quarterly newsletters, in our monthly volunteer newsletters, in our quarterly caregiver workshops and in our adoption packets.