

**Correspondence and  
complaints that were  
sent to Washoe County  
Regional Animal  
Services Advisory  
Board**

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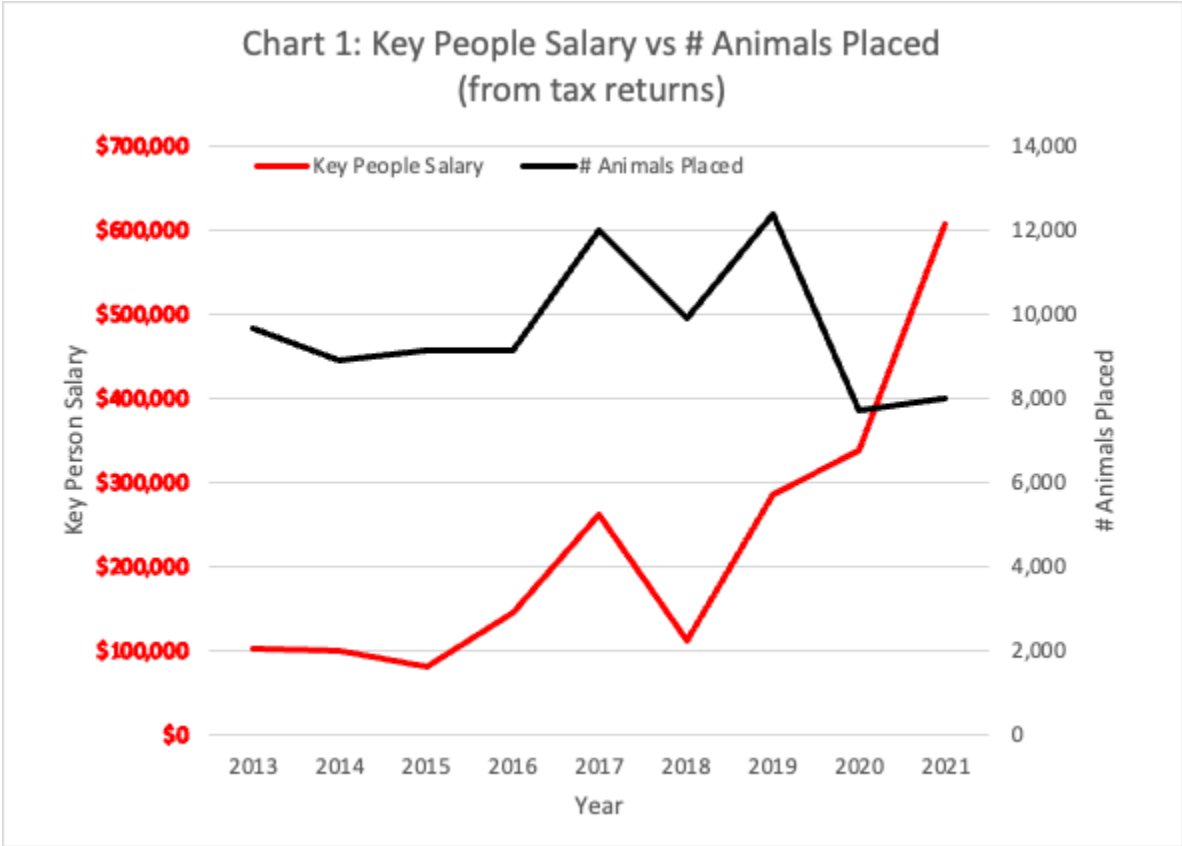
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**According to NHS financial statements, since Greg Hall became CEO of NHS, executives have given themselves a raise of 540%.**



The Top 6 managers at NHS earning \$607,430.00

Executives giving themselves raises, while current and former staff report many working staff members are on "the verge of eviction" and "food scarce" as a result of low pay.

Additionally, animal adoption rates (a measure of shelter success) have plummeted over 34% since Greg's management.

Management giving themselves raises as they fail at their jobs and staff suffers.

CEO Greg Hall - a former attorney [suspended by the State Bar of Nevada](#) - with no management experience nor animal care experience prior to becoming CEO of earned \$143,519.00 in 2021 as well as expense reimbursements.

	Total salaries, com	Total Employee	Total top 6 compensatio	Prev CEO	Greg	Other top 2/3/	Accountant	Voting numbers
2012	\$1,996,047.00	152	\$103,520.00	\$103,520.00		\$0.00	Kafoury,Amstr	14
2013	\$1,945,198.00	135	\$101,582.00	\$101,582.00			Kafoury,Amstr	14
2014	\$2,220,109.00	171	\$100,000.00	\$100,000.00			Pangborn & C	16
2015	\$2,654,661.00	147	\$82,264.00	\$82,264.00			kohn and co	19
2016	\$2,638,487.00	180	\$144,419.00	\$89,034.00		\$55,385.00	kohn and co	19
2017	\$3,230,045.00	188	\$261,112.00	\$115,474.00		\$145,638.00	eide bailly	
2018	\$3,713,214.00	190	\$112,539.00	\$0.00	\$23,077.00	\$89,462.00	cupit milligan	
2019	\$4,001,565.00	190	\$285,418.00		\$132,177.00	\$153,241.00	cupit milligan	
2020	\$3,907,726.00	178	\$337,921.00	-	\$144,356.00	\$193,565.00	cupit milligan	19
2021	\$4,198,476.00	159	\$607,430.00		\$143,519.00	\$463,911.00	cupit milligan	

## **Nevada Humane Society's High Turnover of Executive and Management Level Staffers**

Since the fall of 2018 when Gregory Hall took the helm of NHS the following people have left the employment of NHS for a variety of reasons. While turnover among animal care staff is to be expected in the shelter environment, there has been an unusually high amount of turnover among executive and management staff over the past four and a half years. This is often a sign that experienced, skilled staff cannot work with the chief executive, in this case Mr. Hall.

This is not an exhaustive list, but it shows that there is reason for concern about the organization's ability to attract and retain executive and management talent under Mr. Hall's leadership.

- Important positions have gone unfilled for long periods of time, including the role of COO.
- When experienced staffers depart their roles have often been renamed (from director to manager for example) and filled with less experienced individuals.
- At least one staff member was terminated for discussing concerns with the board of directors and an unusually high number of volunteers have been "suspended" or terminated for voicing concerns or questioning. This creates a climate where people are reluctant to report concerns.

### **Summary of turnover at NHS during Mr. Hall's tenure includes:**

- 3 experienced Chief Operating Officers
- At least 9 other director level staff members (5 of whom reportedly left in a single year)
- 6 Veterinarians
- At least 11 manager level staff members
- At least 19 coordinator/lead staff members

*Note: this is not a comprehensive list*

### **CEO**

Diaz D. – Previously served as CEO of Step2, a Reno-based nonprofit for 14 years, growing that organization substantially. He had a six-month tenure at NHS while Greg Hall was NHS president.

Mr. Hall immediately stepped into the role of interim CEO himself. He was permanently hired into that role by the same board members he has been presiding over as president without a national search or interview process.

### **COO**

- Arthur W. experienced in shelter management prior to coming to NHS, employed from 2011 to 2019 working his way up within the organization
- Lisa F. had over 10 years of experience in similar role at another shelter, lasted 10 months
- Rory A. has expertise and experience in the field, lasted 4 months
- Remains unfilled

### **Animal Care Director:**

- Emily L.

- Recently filled internally by Mr. Hall's personal assistant without a nationwide search or open interview process to assess the qualifications of the individual for this important role

#### **CFO**

- Paige M.

#### **Development Director**

- Maureen M. (resigned 1 month into Mr. Hall's tenure)
- Kristen S. F. (former board member who resigned from the board to take this position)

#### **Human Resources Director/Manager**

- Megan B., HR Director, highly experience, capable and initially very supportive of Mr. Hall
- Brenna R., HR Manager

#### **Marketing/Communication Director**

- Nicole T.
- Amanda W.
- Betsy A.

#### **Community Service Director**

- Chelsea S.

#### **Veterinarians**

- Jessica S., DVM (over 10 years at NHS)
- Kristen K., DVM
- Diana L., DVM (over 10 years at NHS)
- David K., DVM
- Elisa B., DVM
- Ryan H., DVM

#### **Cat Care Manager**

- Patricia P., extensive prior experience both at NHS and another similar organization. She departed in 2021 after expressing serious concerns about animal care which Mr. Hall failed to address

#### **Adoption Manager**

- Elizabeth A. 2020-2021
- Carrie B. 2017 -2020

#### **Clinic Managers**

- Rebecca G.
- Amber K.

**Events Coordinator/Manager**

- Michelle P.
- Megan M. P.

**Carson City Shelter Manager**

- Lisa R. (15 years of experience in animal services)

**Carson City Animal Control Officers**

- Courtney A.

**Facilities Manager**

- Ryan K.

**Volunteer Coordinator**

- Haley H.
- Briley B.
- Richie C.
- Tara D.

**Foster Care Coordinator**

- Lexie R.
- Briley B.
- Leora H. (Carson City)

**Community Cats/TNR Coordinator and/or Help Desk Coordinator**

- Pryce S.
- Karen S.
- Daisy U.
- Angela C.
- Kylee B.

**Intake Coordinator**

- Morgan M.
- Pilar G.

**Vet Techs/Assistants/med staff (there are others who are unidentified)**

- Liz R.
- Phylcia M.
- Amber P.

**Animal Care Leads**

- Morgan L. – Animal Care Lead

- Grace T., Canine Behavior Evaluator



## Summary of concerns regarding NHS as shared in letters/documents provided to officials

### Concerns about CEO, Gregory Hall

#### ➤ Continuing animal care concerns

- Issues highlighted in the 2022 independent assessment of NHS (required by contract with Washoe County):
  - NHS is not in compliance with the Guidelines for Standards of Care for Animal Shelters by the Association of Shelter Veterinarians and many other documented current best practices.
  - Lacks standards for; sanitation, animal care, stress reduction and enrichment for all animals, humane animal handling, professionalism, courtesy, staff training, customer service, adoption follow-up, OSHA best practices and many other areas essential to shelter operations.
  - The report cites numerous other concerns including under the section about leadership the need for more effective management, accountability, staff training, courtesy, and professionalism.
- Recent letters from volunteers and staff have highlighted concerns about animal care
  - High percentage of dogs, over 40% of the population recently, on Gabapentin or Trazadone.
    - Animals being sent to adoptive homes without medication that has been prescribed for them. (Reportedly recently addressed but was an issue for months.)
    - Lack of non-drug stress reduction and enrichment for dogs
  - Concern about how dogs are classified as available for adoption or not, and the qualifications, skill, and training of staff who make these decisions
  - Unvaccinated animals: In a radical departure from shelter best practices 170 cats in the facility had not received basic vaccines last fall. This resulted in a disease outbreak that killed cats, caused suffering of others, and closed down cat admissions resulting in cats in the community not receiving needed sheltering services.
    - Mr. Hall was quoted in the news as saying that they “learned a hard lesson.” A simple google search would reveal vaccination protocols for animals entering and living in shelters.
- See also the section below under the NHS Board which includes details from letters sent to the board highlighting additional concerns about Mr. Hall’s ability to run the organization.

#### ➤ Inability to attract and retain executive and management talent

- High turnover of the executive and management level staff
  - Of the 11-person management team listed in the February 2022 assessment document only 4 remain today with NHS
  - Five director level staffers left NHS within a single year
  - Three experienced COOs have departed
- Key positions remain unfilled, and promotions are made without a transparent, open process
  - When experienced staff departs, roles are filled internally with less experienced staffers
- Attempts to silence critics
  - Volunteers are routinely “suspended” or terminated for voicing differences of opinion or questioning practices.
  - At least one staff member was terminated after sharing concerns with the board of directors
- Lack of transparency
  - Failure to publish clear and comprehensive animal data for the public
  - Filing a corrected IRS form 990 that removed payments made to Greg Hall while he was on the board

- Failure to properly utilize grant funding in accordance with guidelines (detailed in one letter from a former executive)
- Analysis shows that executive compensation has grown tremendously under Mr. Hall's tenure, while the number of animals helped/saved has declined and while key executive positions have remained unfilled.
- **Ability to meet the needs of the community and contractual obligations with Washoe County**
  - Failures to pull animals from WCRAS on a timely basis as NHS is the adoption outlet for these animals resulting in increased length of stay for animals overall and adding a burden to smaller rescue groups in the community
  - Long call response times and wait times for people needing to surrender a pet
  - Closing midday for an hour is not convenient for the public. Whenever the shelter is closed to the public it is unable to facilitate adoptions and assist animals in need.
  - The CEOs inability to cultivate positive working relationships with professional colleagues in the community.

### **Concerns about the NHS Board of Directors**

- **Mr. Hall, then board president, was hired as CEO without a transparent process.**
  - Mr. Hall was put in as Interim CEO and given the job without conducting a national search and formal process to determine if he was the best available candidate.
- **Unwillingness to address serious ongoing issues with Mr. Hall**
  - NHS board presidents were made aware of widespread concerns about Mr. Hall in November 2019 and again in January 2020.
  - A series of 2021 news reports highlighted a variety of concerns about Mr. Hall's leadership including lack of animal care, staff morale and changes made to IRS Form 990 that removed payments of over \$30,000 made to Mr. Greg Hall when he was a board member.
  - Since then, the board has received multiple letters and verbal reports from executive and management staff about Mr. Hall's inability to fulfill his role as CEO. These letters have highlighted specific information about Mr. Hall's performance including:
    - Unreliability and lack of follow-through, failure to meet deadlines including grant reports and communication with major donors, poor time management and tardiness at meetings
    - Inability to delegate effectively, micromanaging, inability to make timely decisions resulting in bottlenecks and other problems
    - Indiscrete, inappropriate sharing of HR matters and others private information
    - Retaliating against people perceived as disagreeing with him, making inappropriate and disparaging statements about staff and colleagues, pitting people against each other, blaming others deflecting criticism, lashing out at staff when he is stressed including in front of other staff, not accepting responsibility
    - Inability to create a healthy culture of respect and accountability
    - Failure to address multiple reports of egregious lack of animal care
    - Treating female employees with less respect, favoring male staff members
    - Inability to work with other animal welfare professionals in the community

Nevada Humane Society Board of Directors & Stakeholders;

I am writing to make you aware of some very serious concerns I have about Greg Hall's leadership of Nevada Humane Society (NHS). I have detailed my concerns in the attached letter and hope very much that you understand how much I love the organization and the important work NHS does for our community, and how difficult it is for me to share some of this very personal information.

I am sharing this information with you with the genuine hope that my experiences while employed at NHS will bring awareness to some of the very concerning issues at the shelter including the mistreatment of staff, volunteers and animals. Please let me know if you have any questions related to my experiences and the information I have shared.

Dear Commissioner,

We are your constituency.

We feel it our moral obligation to make sure you are truly aware of what is going on at NHS.

**Animals and staff are suffering needlessly.**

We are a group of current and former NHS staff, executives and volunteers, who are all deeply concerned about the decline of animal and staff care due to CEO Greg Hall's rein of incompetency and toxicity.

We will be forwarding you troubling letters of complaints by current and former staff about Greg Hall's leadership, as well as, updated investigative journalist reports.

**We humbly ask you do all in your power to ensure a new, credible and knowledgeable CEO replace Greg. It's that simple.**

Commissioner, please do note, according to NHS staff, Greg is trying to frame this wave of complaints as "an attack on US". Greg is reported to be saying internally, "They (i.e. knowledgeable current and former staff) are spreading lies about US". "Don't worry, I will defend US".

The complaints are directed at Greg and a few incompetent managers - David Smith and Amber Grey, ONLY. Not NHS. Greg is spending donor funds intended for animal care on HIS legal fees to Fennemore Law to defend HIMSELF. This is a violation of NHS Bylaws by the way, which we will share soon with you.

**Summary:**

Commissioner, as you will see, all these letters contain near identical themes; **Greg is the problem. All this NHS controversy goes away when Greg is gone.**

Greg was staunchly defended by former NHS Board President Kris Wells for years. Kris, along with two other board members, resigned with immediate effect and no explanation last week. Note, many of these board members - including Kris Wells - violated their own bylaws and exceeded term limits.

New interim board president Rita Eissmann is reported to be defending Greg (without explanation) - and is in opposition to the rest of the NHS board who all agree enough is enough.

**Greg must go.**

We hope to see you at the City Hall meeting May 15, 2023 09:30AM where Greg and Rita are to answer to you Commissioner, the Washoe County Regional Animal Services Board, Mayor Ms. Schieve, and of course our community as a whole.

Thank you for your attention to these urgent concerns.

Please find attached 1st letter by former staff who resigned do to unanswered concerns by NHS management. More to come daily to keep you informed.

Sincerely,  
Your Concerned Community



To whom it may concern:

I am writing out of concern for the state of the Nevada Humane Society (NHS). I worked at NHS for 7 years from 2014 until 2021. I wore many hats during that time; working in cat care part time, then full time, then moving onto our med team. Finally, I landed in our foster team where I was stationed for the remainder of my time working at the shelter. I worked through many ups and downs, including through the tremulous times of the Covid Pandemic. The time I spent at NHS was incredible, and I highly believed in the message and goals of NHS. It taught me of my passion for animal welfare, taught me so much about myself, and allowed me to expand into a field that I have now followed across the country. I currently work at the Animal Rescue League of Berks County in Reading, Pennsylvania. I appreciate my time at NHS and was saddened to leave.

There were many reasons for my leaving. The job was hard. That is true of most aspects of shelter work I believe. But the job was not too hard to accomplish, and I took great pride in my work and the knowledge I had. However, the chronic turnover at the shelter made it nearly impossible to improve or progress. Any changes that happened within my department happened between me and my coworker, with planning taking place on our shoulders and generally without support from upper management, veterinary staff, and Greg Hall himself. Many times when there would be a meeting or news of a change coming to the shelter, it would be a detrimental change that ended up changing how quickly animals were able to move to adoption, the treatments of the animals, and even how staff managed to care for the animals. When I raised concerns about these changes, multiple times and instances over the years, I was always told it is "just for now" or "if it doesn't work we will fix it". These changes were always permanent and they never readdressed them when I raised concerns again.

I was a whistleblower. There's no way to sugar coat this information. I went back and forth about whether to reach out to the news when I was first offered a chance to speak on my experiences as many people who were speaking up referred me by name. I knew what it meant for my career at NHS and was uneasy about taking that step. I wanted to stay at the Nevada Humane Society for the rest of my life. And I would have. My mind was inevitably changed, and I knew I couldn't step aside and let others speak when I had the experiences to back up the issues that were being raised with the Nevada Humane Society.

Many of my experiences that were the most troubling were due to the veterinary care within the building and the lack of concern with cats and kittens needing care. Cats needing vet care often waited longer than dogs in general, even for simple treatments, or were ignored completely. There were times when cats were left to die overnight because the vets did not want to take the time to euthanize before they went home for the day. I saw many examples of inhumane care such as this. When my concerns were raised, I was told that it would be handled or investigated, but I never received any further information or updates regarding my concerns. I do have copies of emails of correspondence directly to Greg Hall about my concerns – some of which were concerning the care I gave while taking home sick or injured kittens in my care. I was accused of "benign neglect" by the veterinary team for a kitten that passed in my care, a kitten who had both eyes removed, despite my voiced concern that she was too small and weak for the procedure. She was only one pound, skinny, and suffering from a horrible respiratory infection. It was not appropriate to perform the procedure based on her condition. When I was obviously upset by this accusation and confronted the vet staff as well as Greg about that statement, they claimed I "did not properly medicate" the kitten, in spite of my frequent begging for further work ups and medications when her infection continued to rage out of control. And, the most important note, an animal they had asked me specifically to take home for continued care. I stayed

awake with her for two weeks, fed her every meal, and nursed her as best I could with what little support I had. When she did pass, I was heartbroken and then to hear that the vet team, rather than owning up to their own mistakes, claimed I had failed her, was the final straw and I reached out to the news at that point.

Greg Hall had been made aware of my numerous concerns of the veterinary staff many times over the years. Not only directly from me, but from former COOs, management, and other staff. Over my time in NHS I did not see improvement, but rather saw our care of animals faltering and failing over time. I saw multitudes of cases where our vet team failed an animal, and it was swept under the rug – records were even deleted from the system. It became impossible to continue to do my job when it felt as if we were fighting an uphill battle. Offering care to animals and my daily tasks became monumental battles as we struggled just to get supplies, care, and even simple assistance from Greg Hall.

Greg often would reach out to me when I worked in the building and would ask me how I was doing. But when I raised concerns about my treatment within the building, the treatment of the animals, and even the treatment of our volunteers, he would always say he would do something about it or investigate it, but nothing would happen. Even for some of the major concerns that hit hard that ultimately led me to leaving the organization as well as becoming a whistleblower.

I worked under multiple COOs as well as CEOs before Greg came into the picture. None of them left me so disheartened and disappointed as he did. And each time we would lose someone in upper management, I felt it like a blow to my chest because I knew there would be less of a voice for those of us in the trenches, for the animals and for the cats specifically. This also meant the vet team would be allowed to call the shots and make decisions that benefited them, but ultimately hurt the shelter. For a while I had hoped that Greg would do as promised but he has continued to disappoint.

When I appeared on the news, despite being anonymous, I immediately received retaliation from the shelter. I knew this was one possible outcome when I went to the news and honestly, I was so disheartened at that point I had been actively looking for shelter work elsewhere. I was placed on probation, despite having glowing remarks for all the other years I had worked there, and having no previous write ups alerting that was the track I was on. I went back to the news to state I was receiving backlash, and then actually received a job offer from the position I am currently in the same night my second interview aired. I handed in my resignation and almost immediately received a response back saying it would be accepted immediately, and I would receive my two weeks of pay and PTO, which according to my handbook I should not have received since I was on probation at the time. He also claimed at that time that I was not being written up. Greg scheduled an exit interview with me for the next day.

The exit interview went well. Or at least so I thought. I spoke with him for multiple hours and explained all my

concerns and that I would have never gone to the news if any of my concerns with the treatment of animals within the building were being heard. Anyone who was listening to me and escalating it further up the chain of command (which included him) never got anywhere. I worked closely with Arthur Westbrook for years at NHS, both as a coworker and as my direct manager and he handled a lot of my concerns throughout my time there. And I watched the job burn him out slowly but surely. I saw it happen to so many people. Until finally it happened to me too.

I have found renewed vigor to my lifesaving work that I had originally discovered at NHS. I am still sometimes shocked by the amount of concern expressed by the vet team and upper management at my

new shelter because I have brought so much workplace trauma with me from NHS. It was and is a toxic work environment, and it is only allowed to be worse and worse because Greg allowed himself to be pushed around by the veterinary staff and ignored the concerns of managers and staff alike. He ignores his job and only does what suits him, which doesn't appear to be a lot. He also pushed out good people who wanted to see NHS succeed and of course now the entire shelter is crumbling.

This is the last chance I feel. If something isn't done about Greg Hall soon, I believe the Nevada Humane Society will fall apart. A staple of the Nevada sheltering system will collapse and thousands of animals will suffer because of it.

Please let me know if you have any other questions or concerns. I appreciate your time.

Alexa Rotter



Nevada Humane Society Board of Directors & Stakeholders;

I am writing to make you aware of some very serious concerns I have about Greg Hall's leadership of Nevada Humane Society (NHS). I have detailed my concerns in the attached letter and hope very much that you understand how much I love the organization and the important work NHS does for our community, and how difficult it is for me to share some of this very personal information.

I am sharing this information with you with the genuine hope that my experiences while employed at NHS will bring awareness to some of the very concerning issues at the shelter including the mistreatment of staff, volunteers and animals. Please let me know if you have any questions related to my experiences and the information I have shared.

Thanks for including me in this matter. I can only speak to what I have witnessed. Through the years and mostly the most recent year or 2 I have personally witnessed so many talented, passionate, strong women leaders in the organization either be pushed out or fired. I have witnessed the nasty side of what I would say as a war on women because any woman in the organization that had any differing opinion or offered any resistance or push back on Greg...they would quickly be fired or would be made so miserable and their position or voice so diminished that they felt they were being forced to resign. Is there misogyny or even some hidden racism? There was a person of color in the org that had a leadership role that was also dismissed in a possibly inappropriate way and Greg took over around that time.

I would say that as an organization NHS has historically been terrible to its employees and specifically the women in leadership roles. I know for a fact the people...the hard working people that put in the long hard hours caring for the animals are considered expendable and are worked and worked hard for very little pay and no recognition until they simply burn out and wither away. If NHS isn't careful I do believe that there will be a mass exodus of employees and/or big lawsuits which would be unfortunate because it takes away from the ones that need us...the animals.

I hope that there can be some sort of resolution to this serious matter before it spirals even more out of control.

Also NHS....please! PLEASE take better care of the people who sacrifice and toil in those walls. It is such a thankless job and they deserve so much more.

I was not going to come forward and say anything. The pressure I have felt within the last week. I have been at the shelter a yr. And the attitude I have felt from staff but I didnt know what. It has been known that greg isn't all the way there- when a problem arises he sits in his office unless we need him. Well unless your dog staff. When rory was the COO and would wanna make changes and would try doing pushing boundaries with amber and her staff, it would piss greg, amber, david and stacy off. When Rory had enough he put in his two weeks. Greg brought pizza to celebrate. Dog staff- specifically didnt respect him. Amber would argue with him about RTO's.e, David will restrained dogs if he needs too. We have three dogs who have sat in winter kennels and have been unable to be altered, evaulated and cannot go out to fosters/ be adoptable. And rarely come out od there kennel due to nature they came in- This is how dog staff runs. If they were given proper training fear free, maddies fund, instead they say "i know how to handle an animal im good" If a dog needs to "restrained it will" a shelter should not run like this" I understand a behavior dog may need to restrained but most dogs that come in are not like this. When greg found out he did not look at cameras he took dog staffs word and asserted blame. When panleuke hit we left cats alone sick overnight because clinic leaves at 5. This happened last week. They dont like working with ringworm cats. The different departments struggle to work with each other. How is the behavior board whichever consists of Tatum, david, greg and amber, able to make life altering decisions they do not have the qualifications to do so.. sometimes its a level 1 bite. One occurrence and sometimes its a dog like Pine where it happened once where we didnr properly counsel the foster. If you ask anyone in the shelter they cannot tell you how the behavior board decides.. because it is purely on luck... i understand there is a meeting on the 15. I do feel all of the information will help. As i am sure you are getting more flooding in from the public and community outreach.

-Due to the rise in tension and not knowing the true reason of hayley and eddie's departure anonymous. Im extremely worried and stressed out but love these animals and this shelter and wanna see change.

Good Afternoon,

I am a staff member at the Nevada Humane Society. I have attached a letter expressing my concerns about our management and the state of our shelter. I would like to express that staff is being kept out of the loop of this situation and I only found out because of my relationship with volunteers. I ask that the board do everything in their power to make staff aware, as I believe their opinions would be valuable to the community and for the betterment of our shelter. I cannot do so for fear of termination. If you have any questions or concerns please feel free to contact me through email. Thank you for your consideration and I hope this finds you well.

The State of NHS

I am an employee in the intake department at NHS. Originally, I had written this paper to be shared with management because I had no intention of starting a public incident. Considering recent events, I am sharing this with you instead. I hope that this paper helps to shed some light on the inner workings of NHS. I would like to express to the board that the staff currently at NHS are completely unaware of what is happening. I have tried to tell as many people as I can about the situation but would like to ask for your help in making them aware and heard. Most everyone I've talked to is scared to have their voices heard due to management's track record of firing those who disagree with them. Most staff are in sensitive financial situations and would have to put everything on the line to speak up. Some of our staff are struggling to pay their rent and on the verge of eviction. Those with children are struggling to feed them. These staff members selflessly work for the animals at the expense of making more money somewhere else. They do not deserve to work in a place where upper management has struck fear into their hearts to the point that they can't voice their opinions. You'll notice that the majority of the letters coming in are written anonymously. If NHS knew that staff would come to their back, they would have asked us to. NHS is fully aware that there is a lack of faith and trust in their leadership, and I believe they are hiding this situation intentionally. NHS has been concerningly silent during this whole thing and the only action I'm aware of was banning individuals from the shelter. Why was our first reaction to kick people out? We cannot afford to destroy our volunteer program at the drop of a hat because someone made us angry. Clearly, we lack the maturity to address community concerns in a healthy and productive way.

I have a background working at the SPCA in the admissions department. There, I conducted behavior evaluations, made restrictions for animals, and helped with the transition from shelter to home. During my time there, I was trained in every single department (excluding clinic) and was very intrigued in how the shelter ran from top to bottom. I have been an adoption counselor, an intake coordinator, an evaluator, and cat and dog caretaker. It is not an exaggeration to say that I can fulfill any role in a shelter. While at the SPCA, I visited around 10-15 shelters and have seen a large variety of ways to run a shelter. I am certified in Animal Shelter Behavioral Management through the University of Pacific. I have around 20 Continuing Education Credits specifically pertaining to shelter behavior and management – from feline communication to disease control. I have trapped animals in overcrowded situations. I have also studied Psychology at the University level where I was on the dean list and am a member of Psi Chi Honors Society. Whether it is within my philosophies or not; I am intrigued to read the different opinions on how to train dogs. I believe that if two people disagree about something, there is often a truth within both their arguments. Above all, I believe that a shelter should be the light of our community. A testament of humanity's compassion, love, and respect for not only animals; but the people who care for them.

When I first applied to work at the Humane Society, I came in with my resume and said, "I can work any job you need fulfilled; how can I help?". I was hired in my interview a few days later and was the first person ever hired on the spot by that manager. That manager was from Austin Pet's Alive and no longer

works at NHS. Austin Pet's Alive is considered the most impactful shelter in the entire country and is making great strides on making the entire state of Texas "no kill". This is an extremely impressive feat. I was both flattered by his praise and excited to work for this organization and to learn more from someone with an impressive background. I was told they needed help with enrichment and training and would be an asset to the shelter. I was quickly disappointed. I was asked to watch the current dog

evaluator conduct an evaluation. I had quickly noticed that they were conducting them incorrectly. I politely attempted to correct these errors because I was trained by the person who had developed this evaluation. Since then, I have not been allowed to help at all and only conduct training or enrichment when I have free time.

The only enrichment I am aware of being conducted in shelter is giving “pup-sicles” which is a block of frozen kibble for the dog to chew. This is honestly a decent form of enrichment, but we give these all winter long. The kennels are always left open no matter what the weather is like or whether the dog has the fur to stay warm. In 15-degree weather, the shelter was putting blocks of ice in dog kennels. We could have buried treats in their blankets, made puzzle feeders out of PVC pipe, used kongs or other hard toys stuffed with peanut butter, smeared peanut butter on a licking mat or frisbee. Instead, we put blocks of ice in an already freezing cold kennel. Enrichment can't be enrichment if it's unpleasant for the animal. This is implied by calling it “enrichment”. It is clear they do not even understand the very concept of enrichment itself. For the entirety of their employment at NHS, they must not have ever heard or looked for the definition of enrichment. We could have played music, done scent enrichment with either sprays or bedding from our small animals, have people read to them, etc. The possibilities are endless when it comes to enrichment. Management could have looked online for new ideas, asked staff, or simply considered the fact that we were putting blocks of ice in freezing kennels. The dogs are not given soft toys, and as of today, volunteers have been restricted from walking even more dogs. It is my distinct impression that most of our management is lacking in the ability to justify a decision and answer obscure behavior questions. It is for this reason that the community is angry with us. The community has been made aware that our leadership does not have many qualifications at all. The fact that their training and experience are limited to what they have told each other has become obvious. As far as I know, the only training of animal care management is an all-expenses paid trip to New Orleans for a conference. Without education, they have chosen to take the word of other employees and the information in this shelter has swirled around and is full of inaccuracies. Everyone on staff received a copy of the ASV sometime near November of last year. I get the distinct impression that no one read it. It's clear in the first 3 pages of the ASV why it is such a valuable piece of literature. In those first three pages, the purpose, the audience, the scope, and format are laid out for the reader to understand the ASV's benefits and its limitations. The ASV is written by 19 people with Doctorates who must be in full agreement with anything they put in the ASV. They are Ivy league professors, shelter managers, and professors at accredited universities. They all live in different parts of the country. There are 100s of studies in the ASV that were conducted by someone with a relevant degree higher than a bachelors (meaning at least a couple hundred other people conducted these studies). The data is collected from almost every shelter in this country (anyone who receives funding from any of the major grants like Maddie's Fund). It is not an exaggeration to say this data probably could be traced back to millions of dogs and hundreds of shelters. All staff were sent a link to the Big Dog Masterclass presented by American Pets Alive which was published in December of 2022. American Pets Alive produces the most shelter-based research. They run the number one shelter in the country. They are currently conducting exciting research on the first potential cure for Panleukopenia. Despite these facts, no one took the course. All the management is fully aware of the existence of Maddie's University. It is a platform with 1,000s of hours of courses, means to contact other experts, and just about anything a shelter might need education wise.

Their lack of education is evident based on their actions alone. The solutions they have for training, education, and enrichment all revolve around outsourcing behavioral help. This is a clear indication that they know they are not qualified. Why is the shelter paying hundreds of thousands of dollars a year to employee people who must hire someone else to do their job? They do not want someone who is educated in the building because it will quickly undermine them. It makes it seem like they are influenced to maintain their positions of power; and only take action to improve when they are threatened. I'm under the impression we have lost almost every trainer we have let into the building. Other organizations in the city are refusing to work with us. These people are refusing to work with us because they love animals, and they can't trust that we do. A shelter needs the support of our community. We need people to adopt, donate, train, volunteer, etc. We inevitably destroy any relationship we form because we lack the compassion and professionalism necessary. The report made by the Dave and Cheryl foundation added a section about emotional intelligence training because they noticed a lack of it.

I have written a training protocol that was sent to management which has never been implemented. Only for the Dave and Cheryl Dauffield report to say the same things I wrote in that protocol. I have warned several members of management that the techniques we use to handle animals are classified as inhumane and that if we continue to use them, it's only a matter of time before someone notices. For example, a technique for vaccination restraint commonly taught by management contorts an animal's spine and puts unnecessary pressure on a dog's trachea. The contortion and pressure make this handling technique inhumane. It is not only unfortunate that they have not taken the time to provide sufficient training for staff; but a very serious safety issue for staff. For example, dogs get out of their kennels all the time. This is just a normal occurrence in any shelter and inevitable. This is exactly why absolutely everyone needs to be taught how to approach animals properly and safely. The only commitment to do anything was given immediately after the letters were sent to the board. Anyone can grab an animal and hold on for dear life. It takes skill and an understanding of animals and how they communicate to handle them in a way that doesn't involve being harsh. I have offered to teach classes on fear-free handling as I believe it requires hands-on training and you can't become an expert taking a 6 to 8-hour online course where each individual piece of information is presented to you once. I have offered to teach interpreting animal body language to anyone willing to listen because I also believe that requires hands-on experience and reading a poster board isn't sufficient. Poster boards and these classes are the only trainings on these subjects currently offered to staff. I have not been able to do so. I take pride in the fact that anyone could pull up the fear free handling course at any time and quiz me on its contents and I would get every single question right. I believe when animals' lives are counting on our understanding of behavior, we need to shoot for 100% accuracy. The community is justified in expecting that from us. We call ourselves a "no kill" shelter and need to behave as one. The community and animals require humane and effective techniques for being successful at home. There are major problems with the fact that all the "improvements" coming to the shelter involve outsourcing behavioral advice. First, management doesn't understand enough to be critical of the trainers and handlers they invite into our shelter. Second, there will not be someone capable of assisting staff, volunteers, and community with their immediate needs. Third, why would we spend money outsourcing for help when several qualified people are already in shelter?

The community expects that those sitting on our Behavior Board (where euthanasia decisions are made) have the necessary qualifications to do so. The dogs we fail are the dogs that have more complicated behaviors. The dogs we fail are the ones where an adopter really needs both accurate and informed information on how to handle them and we simply cannot give that to them. Because no one is educated or really understands the transition from home to shelter. This also presents a very serious safety issue for the community. For example, people who adopt resource guarding dogs are not trained to trade for the possession a dog is guarding. Because of this, adopters are constantly trying to wrestle a toy or food out of dog's mouths and are getting bitten in the process. This has resulted in a lot of returns and even someone who had been bit in the face so bad that they will be permanently maimed. And for the rest of his life, every time someone asks him why he's missing a large chunk out of his face; he will say "NHS". If you access our database and read the reasons why most of our resource guarding dogs get returned; it is almost always an incident where the adopter attempted to take something from the dog. It is basic animal handling knowledge not to reach in a dog's mouth. And when we already know this dog will get aggressive if you try to take something from them, why aren't we telling the community that? The euthanasia that I know spurred a lot of this was the euthanasia of a dog named Pine. Pine was known to be aggressive to other dogs. He was sent out to foster without a muzzle or gentle lead and the foster was not counseled on avoiding high traffic dog areas. The foster took him for a walk in a harness where they did not have control of his head in Mid-Town area of Reno. An off-leash dog cornered Pine and Pine bit him and latched on. The foster was also not trained on how to get Pine to let go, and the police had to be called to scare Pine off the dog by buzzing a taser next to his ear. From my perspective, this was not Pine's fault. This was Pine being set up for failure and failing and a fault of the humans handling him. He was euthanized. The shelter continues to adopt out dog aggressive dogs without providing the necessary training to adopters. Instead, their solution was to stop sending dogs out to foster and we haven't done a traditional foster since. We have done some foster to adoptions, but that is a completely separate thing. This is consistently their reaction to incidents involving aggression. Instead of asking themselves what they did wrong, the policies they enact blame the community and dogs. This results in restrictions from getting help for our animals. This tells the community that we don't know how to handle dogs and therefore don't. I exist under the belief that if a dog bites you, it feels it has no other options in keeping itself safe. At the root of aggression is always fear. When a dog is acting aggressively, you don't assume something is inherently wrong with the dog. Instead, you should ask what scared it. This is a widely accepted belief system in dog handling and training and considered an industry standard per the ASV. It is one of the underlying philosophies of Fear Free Handling and Positive-Based training. The untrained foster coordinator now will carry the guilt of this incident for the rest of their lives while management places the blame on dogs and the community.

The community is rightfully outraged about our use of trazadone and gabapentin in tandem. From a behavioral standpoint, both those drugs should never be given unless you are doing training, even if you're only giving one. Behavioral medications (especially SSRI's like trazadone) have always been considered a behavioral crutch and were never intended to be given without other interventions. Trazadone is arguably okay to be given regularly when training is conducted with severe cases of fear; if your intention is to get them off of it as soon as possible. Gabapentin is the same way. If you are simply giving them these drugs, not doing training, not doing enrichment; it is unethical. Especially because a majority of those dogs literally never leave their kennel. This is decided by dog management. However, locking a dog in a kennel and giving it sedatives with no training protocols in place whatsoever is not.

The line in which this became inhumane treatment was where we were not training them. But as far as I know, dogs were only given Trazadone for the first 2 days in the only study I have read that pertains specifically to shelter animals.

I understand that those who made these mistakes did not do so intentionally. But the fact remains that they are unqualified to put animal's lives on the line of their unfounded assumptions. And there is simply not enough time for them to make up for it. No more animals should suffer while they take the time to become educated. No one could have ethically stepped into their roles with the education they have. They have had plenty of opportunity to better themselves and have refused all help to do so. It is of mine, the report from Dave and Cheryl Dauffield foundation, and our community that education needs to take priority at NHS. We would benefit greatly from making sure our leadership is qualified to lead this shelter. There are plenty of others in the community that are better equipped to help us.

I would like to add to the board that it is my distinct impression that Greg Hall, Amber Heard, and David Smith are the 3 biggest problems in our shelter. They have expressed a lack of professionalism and a lack of compassion for the animals. It is my opinion that it is a truly heinous thing to make decisions about an animal's life when you have no qualifications to do so. They have forcefully kept dogs in kennels and refused to train staff or allow them to handle dogs. If information on how to do better is easily accessible, what would be different? Their recent actions express one thing above all else; they will not change unless under threats. It is my opinion that they lack the emotional intelligence, compassion, and humility to lead a shelter and interact with the public with our name on their shirt. I think the only reasonable thing for the board to do is part ways with them. I believe that if they remain on staff, these exact situations of community outrage are only bound to happen again. We need someone leading us who has both the expertise and compassion to mend our relationships with the community. We are a non-profit; and need to impress.

I hope I have expressed a clear lack of basic knowledge in management. I hope that I have expressed that this is not only an issue of ethics, but of public safety. I hope I have expressed that there have clearly been plenty of opportunities to improve that have not been taken. I hope that the board sees my existence in this shelter as an indication of management's priorities. I hope the board pays attention to the fact that the people criticizing us have no reason to do so and management has every reason to lie and hide the opinions of their staff from the board. I have more education than the entirety of those running the animal care team combined, and not once have I been asked to help in any way, shape, or form. All research and meetings I've had with management have been done out of my own accord. And the truth is that I have a lot to learn, and the difference is I have a desire to do so. I have only worked here for about 3 months, and this is just a fraction of the problems I have noticed. These are simply the only ones I know I'd be able to prove. If these people remain in power at NHS, dogs and the people of our community will continue to be at risk.

I'd like to make it clear that I do not wish to see the staff, management, board of directors, or animals at NHS suffer. I simply believe that my experience with NHS needs to be heard. I felt morally obligated to write this letter for the sake of our animals and our community and would not have done so if I didn't believe it was truly necessary. Working with homeless animals truly means everything to me, and I would be devastated if I lost the ability to do so. As an orphan myself, I sympathize with the situations they are in. The world I grew up in was ugly, and I'd do anything to make a place where a kid like me could see that there is brightness and hope in humanity. I could have done more to express these points before. I was simply avoiding conflict because I felt extremely outnumbered and feared for my career. I know some of the points I made came off harshly, but if you take a moment to step into my shoes, is there really a nice way to say that? Because I believe a shelter and its staff should always trust in kindness, and lead with positive regard for each other and the community. Anger, fear, and sadness are treated in dogs with compassion and love. I simply want this shelter to be the idea of what everyone hoped animal welfare would be. A celebration of the bond between humans and animals. A place where



employees feel like their work matters. Where the animals, staff, and volunteers are happy to be here. The over-arching belief that dogs are dangerous and people are not to be trusted is everywhere in this shelter. In our policies, in our staff, and in our walls. And it truly takes its toll on everyone here and everyone who interacts with us. We're not working towards saving lives; we're working on keeping animals out of the community.

It is again i have the write of my concern; my coworker and friend Eddie Hoovre was let go after what i belive greg and upper management found out he wrote a letter to the board. I am staying for these animals. But i am scared for my job, as i know many of these employees are. I am scared. Dog staff is very pissed off. Writing this again could get me fired. But i repeat what ive said in the first email. We need to help the animals. The shelter may act like we are changing the treatment, and ways of wanting to improve change- but the minute this goes away the behavior will go back to normal. First the volunteer manager, now eddie, who knows who will be next.

Hello, I have worked at NHS for quite some time now. I am writing you because I feel that it is not fair for the animals to keep suffering. Going stir crazy in their kennels. Putting too many dogs on gabapentin and trazodone. The favoritism is crazy. I was on dog staff for a brief couple of months before switching to a different position. In that time I had the chance to interact with both Amber and David. When I would want to learn and grow and get more training David would talk in such a condescending manner to me; but was so kind to the other dog staff members. Amber scared me because when I WOULD ASK FOR HELP she would talk to me like I was stupid. She is willing to help and train those she likes. It makes it very difficult to work with her. If that doesn't show you, that these people got these jobs, without having proper qualifications. More recently staff members have gotten positions they have not interviewed for- or do not have credentials for. People throughout the shelter understand the dynamic with David Amber + dog staff and continue to justify their behavior. I have been frustrated with the way they do not properly train you- when I entered the title I am at now. My fellow coworker told me she had to learn everything herself- including handling animals which was no fault to her own but MANAGEMENT. Greg is aware of the favoritism, and defends it. I believe that Greg fully got the CEO position by mistake. When we had a parvovirus outbreak last year, Greg didn't understand juvenile kittens cannot be fully vaccinated and had to run and ask someone. I understand not being educated as research constantly changes- but as a head of the Nevada humane society you would think he would understand vaccination status. We should be getting proper training, and handling, and caring about these animals and there well being not taking the money, and using it for gain. As well as how hard we work- I feel if we truly want the animals term of stay, and for them to get out in good homes, that are a good match, and fear free handling, something needs to be done. I believe in order for this, management needs to change. Tatum Sutliff, and Stacy Sanchez are amazing, and are not involved in the ongoing issues currently please keep that in mind.

-annonymus.

Dear WCRAS Advisory Board and Mayor Schieveh,

Please find my attached letter regarding my experiences working at Nevada Humane Society as a past manager.

If anyone has further questions or would like clarification about my experiences I would be happy to discuss this further. I can be reached at the email address provided.

I submitted an original letter to a few individual members of the Advisory Board for the first meeting but have made a few small additions/edits to the attached to hopefully offer additional detail in support of my observations and experiences. I submit it here to become part of public record for the next meeting on this topic.

I thank you in advance for your time and attention to this matter. I hope this is of some help in illuminating a history of ongoing concerns at the Nevada Humane Society involving Gregory Hall.

Sincerely,

Carrie Brown

4/25/2023

Dear WCRAS Advisory Board Members,

My name is Carrie Brown, I was the adoption manager at Nevada Humane Society from September 2017 to October 2020. During that time, although I retained the title of Adoption Manager, in addition to managing the adoptions desk I assisted managing other departments and areas including admissions, help desk, small animals, cat care, offsite adoptions and sitting on the behavior board. I started at a time without a CEO and the then newly appointed COO Arthur Westbrook and I worked closely together as there was a large manager change over prior to and immediately following my start at Nevada Humane Society. Not long after I started Diaz Dixon was hired as CEO and although Diaz was only there for a short time I saw marked improvements and plans developing for further innovation under Diaz Dixon as a new CEO and Arthur as the COO.

When Diaz Dixon left NHS. Gregory Hall took over as the new CEO. I quickly saw that this was a new environment for him and hoped that he would take advantage of the opportunities given to him to learn from his team and the experience of others who offered. Unfortunately, as time went on it became more and more evident that Greg was over his head in managing a large organization responsible for the safety and well-being of hundreds of animals each day. This was demonstrated by his frequent inability

to make decisions and his lack of knowledge of standard sheltering practices. During this time Greg Hall maintained direct oversight of the veterinarians and clinic. Staff followed chain of command and would bring concerns about animal care (frequently related to the clinic) to the COO and the COO would in turn bring valid concerns to Greg's attention, despite recommendations for change from the COO based on agency standards, and recommendations from experienced managers no changes would be approved or made to rectify often alarming quality of animal care situations.

I firmly believe that Greg's consistent disregard of the advice he received from his COO who previously ran the Carson City shelter and other managers with practical experience, along with his blatant ignoring of concerns that his COO brought to his attention resulted in the loss of several key experienced staff that were keeping the shelter functioning in a safe and humane fashion. One of these was the loss of the extremely skilled and experienced cat care manager Pat Perry, who started shortly after I did. Despite speaking to Greg directly and repeatedly regarding ongoing and numerous concerns about medical care being provided to the cats in the shelter, he would not address the concerns with the medical staff he was directly supervising. This lack of concern and his inability to follow through created such frustration and concerns over the animal's welfare that Pat left the organization. This was followed by the COO leaving over very similar concerns about poor communication, the animals well being and organization itself.

When the COO left, I stepped up and took on additional responsibilities, including oversight of the foster program, the TNR program, assisting with marketing ideas and event planning, setting up a new shelter wide software system and by assisting a new cat care manager in managing a large cat population. As time went on Greg showed no sign of learning more about shelter operations. I would find myself in disagreements with him about marketing and adoption principles and would have to explain common and readily accepted shelter practices to prevent him from instituting changes that would negatively impact the length of stay of animal in our care. I began bringing concerns about animal care directly to Greg Hall and each time I was told it would be taken care of yet nothing changed. What few issues he would address became long drawn-out ordeals where he would go around personally and speak with each manager individually to get their take on the situation before he would consider making a decision, this process was always in addition to our weekly manager meetings. It reached a point where other managers and I stopped going to Greg with issues and concerns because although he would agree with us all or say he would look into a situation no changes to policy were ever made and issues went unaddressed. During one of our manager meetings Greg told managers that he "did not have time" to deal with daily operations despite having no COO.

Other managers expressed concerns to me that when they would advise Greg of situations, want his input or need his help that he would only offer words saying he would look into it but would always fail to follow through. I and other managers began

to find ways to work around Greg and produce our own solutions to problems as we were not only missing the guidance of a COO but also any understanding, support or direction from our CEO. One example of this is when I became concerned about the length of stay for many of the cats in our shelter as they were frequently exceeding 30 days. When I voiced my concerns to Greg nothing happened. So, I worked with other managers to develop a monitoring system, regular meetings to review the length of stay for all animals and develop an individual marketing plan for any animal in our care that was approaching a 30-day length of stay at the shelter.

Time and again Greg would not follow through with important reporting deadlines or reaching out to community contacts despite being provided verbal and emailed instructions and information out lining contact information, dates, and next steps as well as numerous reminders which due to his lack of followthrough would result in late information being submitted or lost contacts that had high potential to be beneficial to the shelter at large (two of many examples include, Reporting statistics to Maddies, and not reaching out to a contact at the Sparks Police department looking to use a NHS shelter dog for highly publicized ride alongs)

The foster coordinators and other hourly staff were routinely coming to me with concerns about animal care and after bringing it to his attention time and again without effect I stopped and continued to manage as best as possible for the animals and staff I cared about.

Leaving the shelter was one of the most difficult decisions I have made as I cared (and still do) deeply for the organization and its mission as well as our staff and all the animals in our care. I worried greatly about the staff and animals I was leaving behind, but I was offered an advancement opportunity where I could help keep pets out of the shelter and in their loving homes. The decision to leave was made a tiny bit easier by a shift in policy after Arthur left as COO. Where once we would frequently return a pet to owners who had to surrender them because they were unable to provide emergency medical care due to the cost of care and lack of finances, Greg began making the decisions as to who would get their pet back post medical care/surrender and would more often than not decide that although we would agree to medically treat the animal we would not return it to the family that cared for it for so many years, instead the animal would be adopted out to a new family. This shift in practice not only resulted in devastated families wanting the best for their pets but in undue stress for the animals from being away permanently away from their home and loved ones.

When I left the shelter, I had so many concerns built up from the time Greg was COO that I felt the need to bring it to other people's attention. Along with 2 other staff members I agreed to speak to newsman Joe Hart (but remain unidentified) regarding my concerns about Greg's lack of leadership skills and the price the animals were paying for it. At that time I provided him with numerous examples of animals not receiving the care they needed. I did not feel it was safe to bring my concerns to the NHS Board since he was their president previously and was still very friendly with

members. I did not feel comfortable coming out publicly because I feared retaliation from Greg on other staff that stayed to care for the animals. On several occasions I witnessed Greg exhibit extreme volatility and outbursts especially when he felt betrayed or embarrassed. I truly believed that any inadequacies at the shelter all stemmed from the leader of the organization, Gregory Hall. I still am not comfortable writing this letter, but I still care deeply for the organization and know how important it is to this community. I have kept in touch with people who have more recently left the humane society and feel strongly that something must change, or I fear animals' lives and the organization itself is at stake unless new management is installed that is experienced managing a shelter of similar size and complexity to Nevada Humane Society.

I do not take writing this letter lightly, I understand what is at stake and feel the price is too high to not speak out at this time.

Sincerely,

Carrie Brown

Please find attached two letters concerning the NHS.

The first is a response from Kris Wells to Jodie Wang one of the owners of Real World Canine in response to a letter Jodie originally wrote to Kris and the rest of the NHS board in regards to NHS staff.

The second is my response to Kris.  
To date I have not received a reply.

Thank you for your time and most especially, thank you for your interest and concern concerning the goings on at NHS.

Thanks.

Cindy Hansen

April 22<sup>nd</sup>, 2023

Dear Kris,

I have been forwarded the letter you sent to Jodie in response to the letter she sent to you on March 28<sup>th</sup>, 2023. I feel the need to reply to your letter, because quite frankly, the information in it is inaccurate and outright false. I was the person in the room with Kaitlin and Amber during the entire discussion about RWC. I was the person in Greg's office during a 2 hour 11 minutes and 8 seconds long conversation, where I told Greg what was said about RWC's owners. I know how long it was because I have the recording. I do not know why Greg chose to ignore my account of the events, but the account that you provided in your response is not what I told Greg, far from it.

I asked Greg if I could record our meeting because I wanted to have a record of what was said. He gave his full permission. I asked to record the meeting because I did not want to have a he-said-she-said situation, about what was said and discussions. I do not intend to summarize my meeting with Greg in this letter. Suffice to say, everything that I am telling you in this letter was told to Greg in that meeting.

I have chosen to address the inaccuracies in your letter point by point, as they occur in the letter.

*Your first paragraph: "Late in February, a volunteer (Cindy) participated in a discussion between two employees (Amber and Kait) related to a potential partner, Real World Canine. Staff and the volunteer were looking at having Real World Canine possibly assist an NHS dog named Punchy and perhaps establishing an ongoing relationship between NHS and Real World Canine."*

The date of said conversation was February 24<sup>th</sup>, 2023. Kaitlin and myself were having the conversation that consisted of these key points:

1. At this time Punchy would not be able to go up to RWC because in reporting her findings to NHS higher ups there were two issues:
  - a. The use of e-collars - NHS as an organization did not condone the use of them – Kait's words: That's a hard no.
  - b. No barking - Amber disagreed with this. Kait's words: Amber says this is the way dogs communicate.

Amber came in during our conversation and just stood there on the other side of the partition. She only engaged when I explained to her use of E-collars was up to the owner, and RWC would abide by their wishes.

I also explained dogs up at RWC or anywhere for that matter communicate just fine without barking and asked her if she preferred and thought the frenzied, anxiety filled aggressive barking out in the pods was dogs communicating in a friendly or healthy manner? And wasn't she the one who always says to her dog staff: Click for quiet?

At this point, I'd like to point out that Amber has a history of being combative when someone



disagrees with her. Greg stated as such during our recorded meeting, and informed me that he is working with her on this issue. I would also like to point out that Amber has two “tells” when she is trying to recover from someone that has a reasonable response that counters her point:

1. Her eyes start darting back and forth
2. She comes up with completely out of left field statements that are always negative

After I countered these 2 points, Amber made the following statements about RWC.

**Amber:** A former employee of RWC who came to work at NHS, but no longer works here, said the owners have swastikas on the back of their vehicle

**My Response:** I just followed them home last night when I left RWC from picking up Lumi, I can assure you there were no swastikas on the back of their vehicle, but I will make it my priority to find out Tuesday when I take Lumi to RWC to go to school.

**NOTE:** There was NO mention of a man in shorts with a swastika on his calf. This was a complete fabrication. The first time I heard of such a thing was when I was talking to Greg and he told me that is what Amber and David told him. I immediately informed Greg that a man in shorts was never mentioned.

**Amber:** The owners tried to adopt a dog from NHS last summer and couldn't so they had someone else adopt it for them, and we were told they are abusing it.

**My Response:** I know their dog, Kaitlin you saw it, it is clearly not being abused. Why would they need someone else to adopt it for them? What dog are you referring to?

**Amber:** Nico.

**My response:** Nico? My Nico? I know exactly which dog you are talking about, I walked him every single day while he was here, and I can tell you Nico is not their dog. I started describing Nico and yes, Amber's eyes started darting back and forth. I asked Kaitlin to look him up, she did and as I knew, it was the Nico that I walked, and Kaitlin said the person who adopted him was a lady from Carson.

**Amber:** We've heard RWC doesn't treat the dogs well.

**My response:** Kaitlin, you were up there, you saw all the dogs, did any of them act like they aren't treated well? Amber, we could hardly walk because of the pack of dogs surrounding us and especially Angela, they followed her like a pack of lap dogs.

At this point, Amber again displayed her tell, eyes darting back and forth. Then she said:

**Amber:** Well, actually it was David who put two and two together.

I could almost audibly hear the big bump, and see the hair flying up, as Amber desperately threw David under the bus to win an argument.

This is the conversation that happened. This is the conversation that I discussed with Jodie.

This is the conversation that I told Greg about. My points in reciting the above conversation to you are:

1. This is not the conversation that you relayed in your response to Jodie. I do not know if Amber or Kaitlin told Greg the tale that ended up in your response, but I know for sure (and have recorded proof) that the above account of the conversation is what I told Greg and he/you chose to ignore it.
2. Of all parties involved in the conversation, I am the only one with nothing to gain or lose by telling the truth about what was said. I do not draw a salary from NHS, so I have no financial ties that would make me want to lie about events. I was not trying to avoid any additional work. I am not the one who said things that weren't true, and now need to change the narrative. The same cannot be said for the others involved in the conversation. I have agreed to take a lie detector test to demonstrate that I am telling the truth.

I would also like to add, that Kaitlin and Amber both knew I intended to speak to RWC owners about what was said because **I told them I would for the following reasons.**

1 – My Lumi goes to school at RWC and if there were any truth to any of it (and I knew there wasn't), then it would behoove me to find out.

2 - Punchy, I was very fond of (still am), and was doing everything in my power to get him up to RWC. And again, if there were any truth to any of it (and I knew there wasn't), then it would behoove me to find out.

3 - Angela and Jodie had **that very day** told Kaitlin and I that they would start with

Punchy, but were already wanting to expand their offer to 3-4 more dogs. So yet again, if there were any truth to any of it (and I knew there wasn't), then it would behoove me to find out.

*Your second paragraph: "The discussion involved staff recall of a guy in shorts who had a swastika tattoo on his calf, possible stickers on his car, and who they believed had been denied adoption by NHS at some point. The context of the conversation was whether or not the person being discussed worked for or had any affiliation with your business. During their discussion and upon researching NHS records, they determined that the person they were thinking of had nothing to do with Real World Canine or any individuals involved in the business. Upon determining that this was a case of mistaken identity, both employees felt comfortable recommending that we pursue the vetting process with Real World Canine as a potential NHS partner."*

Let me say emphatically that "a guy in shorts" was NEVER mentioned, discussed, or hinted at, much less "A guy in shorts who had a swastika tattoo on his calf, possible stickers on his car and who they believed had been denied adoption by NHS at some point. The context of the conversation was whether or not the person being discussed worked for or had any affiliation with your business." On this point I want to be perfectly clear:

1. Amber said swastikas on the vehicles of owners of RWC.
2. Amber said RWC owners were denied adoption.

I find it hard to believe that any reasonable person would hear such a thing and not ask follow-up questions. What was the reason that Amber and David would believe that the "guy in shorts" worked at RWC? By their own admission, neither have ever been there, so they couldn't have had first hand knowledge of who worked there. Did the person fill out a form stating that they worked at RWC? In which case most reasonable people would want to see the form, as it bolsters this rather shaky and unbelievable statement. There must be some reason why this "guy in shorts with swastika tattoo on his calf" was connected to RWC in David/Amber's mind. Or did they think this "guy in shorts" was either Jodie or Angela in disguise? Given the extreme nature of this individual, there must have been a good reason for the initial connection. Why wouldn't you or Greg provide the basis for Amber/David's assumption that this individual was connected to RWC in your letter? Surely, reasonable people would want to understand how that connection was made? Your lack of transparency, and casual mentioning of this "guy in shorts" seems more suspicious because you provide no reasonable basis for the assertion that there might have been a connection.

You state "during their discussion and upon researching NHS records, they determined that the person they were thinking of had nothing to do with Real World Canine or any individuals involved in the business" – Again, this was never discussed.

You state that NHS records were used to determine this person did not work at RWC. What records were reviewed? Did Amber or Kaitlin call the individual during the discussion and confirm employment (the answer is no, I was there)? What information did they have at their fingertips that would prove so rapidly that someone denied adoption did not work for RWC? More importantly, why would Amber repeat such a wild story before she looked at these records that were so readily available? Most reasonable people, upon hearing this, would realize that the "guy in shorts" story is not plausible. I find it interesting that neither you, nor anyone else on the board questioned the sequence of events, nor asked for the data that was used to verify the accusation or its fabricated status.

To be 100% clear, the only thing that was looked up during the meeting was who adopted Nico, the dog that Amber falsely said was adopted by Jodie and Angela.

You state "Upon determining that this was a case of mistaken identity, both employees felt comfortable recommending that we pursue the vetting process with Real World Canine as a potential NHS partner." Neither Amber nor Kaitlin stated they were comfortable recommending the pursual of the vetting process.

As a matter of fact, my last words to Kaitlin and Amber were that if they failed Punchy, that will be enough to make me walk away from NHS and never come back. I told them we are supposed to be here for the dogs and clearly you are not, you are more interested in coming up with lame-assed hurdles such as the ones Amber has produced just now. Does that sound like

something that would be said by someone that has just heard that NHS was going to move forward with an initiative to help Punchy?

*Your third paragraph: "Amber exchanged e-mails with you on March 15 indicating that we would like to make another site visit and explained that we would have to create an SOP (standard operating procedure) and speak to upper management to determine if anything else was needed to move this forward. I believe that you responded on March 19 and I don't believe that NHS has responded to that message. Unfortunately, staff has been shorthanded due to the season and an untimely death of a team member. In addition, the dog in question, Punchy, was adopted out on March 22, NHS does have a number of partners we are currently evaluating in addition to your business and the process does not always move quickly."*

You state "Amber exchanged e-mails with you on March 15 indicating that we would like to make another site visit and explained that we would have to create an SOP (standard operating procedure) and speak to upper management to determine if anything else was needed to move this forward."

I find it interesting that you seem to cherry pick one email sent from Amber, vs all the other emails that were exchanged. Following is a sequence of events and correspondence between RWC and NHS, for your information:

- 1- On February 24<sup>th</sup>, Kaitlin and I toured RWC. Kaitlin sent an email to Jodie, February 24<sup>th</sup>, including questions from Amber and David.
- 2- Jodie responded February 25<sup>th</sup> with very detailed answers – 20 hours and 41 minutes later.
- 3- Amber requested she and David be provided a site visit on March 15<sup>th</sup>– 18 days later.
- 4- On March 15<sup>th</sup> Jodie replied asking Amber to provide possible dates and times, and stated she (Jodie) would make it happen - 10 minutes after Amber's email.
- 5- On March 16<sup>th</sup> I saw Jodie at RWC, while picking up Lumi. Jodie mentioned she had replied to Amber's email and the ball was in her court.

On March 17<sup>th</sup> I approached Amber in her office (regarding Yoshi), and mentioned that Jodie had not yet heard back from her on times for her and David's visit. Amber looked at her computer and responded that Jodie still had not replied to her email, sent March 15<sup>th</sup>". Amber acted a bit annoyed. I remember thinking Amber was being disparaging of Jodie for (supposedly) not responding in two days, yet Amber took 18 days to respond to Jodie.

On March 19<sup>th</sup>, I told Jodie that Amber is claiming that she did not receive her email. Jodie resent the email that same day, and requested that Amber confirm receipt.

I also find it interesting that in my recorded conversation with Greg, Greg made a disparaging comment about the owners of RWC because they were responding so quickly to NHS emails. **Greg** "See, I feel bad because I feel like the folks at Real World Canine, who are probably great people, from what I can tell, they are great people maybe. And please don't tell them that I said this, because I'm not trying to defame them but **maybe they're a little pushy**, because I don't think they understand what it takes for us to get programs together. I mean, I will tell you, just yesterday, we spent an hour on the phone with the pups program." Time stamp: 1:22:01

I find it interesting that Greg takes issue with people who respond to email quickly, but has no issue with Amber taking 18 days to initiate contact for help with a dog in immediate need. Nor does he have an issue with Amber falsely asserting that she did not get a quick response from Jodie.

You state " Unfortunately, staff has been shorthanded due to the season and an untimely death of a team member."

What is the "season" you refer to as the reason you don't believe NHS has gotten back to Jodie's email of March 19<sup>th</sup>? I go in every single day, and from the 19<sup>th</sup> of March to present there has been no special season or event that would justify Amber's inability to respond to email.

With regard to the "untimely death of a team member," I had to read that a few times before I could muster a response. The person that you are referring to is Jay, and he does not deserve to be used as your excuse for Amber not doing her job, especially after his death. Just because Punchy was adopted on March 22<sup>nd</sup> does not release Amber from doing her job and following

basic rules for social interaction and best business practices, such as responding to emails. Just because Punchy was adopted that did not mean the offer was withdrawn by RWC to help other dogs. I would reiterate my previous question, was there ever really any intent on Amber's part to follow through so Punchy could get the help/enrichment from RWC? RWC offered to provide these services to him or any other dog. I believe the answer to that question is glaringly obvious. I truly believe that the ONLY reason and time everyone REALLY became engaged in building a partnership with RWC was AFTER, and BECAUSE of Jodie's letter to the board. You state "NHS does have a number of partners we are currently evaluating in addition to your business."

If NHS has a number of partners, then why did Staci tell me (when we originally spoke about Punchy going to RWC) that in the past there had been partnerships but there were none at present?

You state "and the process does not always move quickly."

Interestingly enough, I was told by Staci and Kaitlin this was an easy thing to put in place. Kaitlin herself told me everyone who needed to say yes had said yes, she just wanted to see the facilities at RWC before sending Punchy up there for his evaluation on March 2<sup>nd</sup>.

*Your fourth paragraph: "There was no defamation, slander or unethical behavior from our employees or any intent to harm you or your business. This was simply a business discussion in a private office between two employees and a volunteer. The mistaken identity was cleared in the moment and that was the end of the discussion."*

Everything that I have previously identified in this email, shows that this statement is incorrect. The rationale that you use to justify this conclusion is erroneous. The lack of thought or questioning of the obvious gaps in your response undermine your credibility and the credibility of NHS.

This was not just a case of **mistaken identity that was cleared in the moment and that was the end of the discussion**. The facts that I present in this letter, along with the obvious gaps in logic, show that your response is not the truth. The truth is that Amber made the statements that she is accused of against RWC and the owners, and she attributed them to David. Period!! I pose one more question to you. In my recorded conversation with Greg, he states that Amber came to him and offered to apologize. If she did nothing wrong, as you state, why did she offer to apologize? Are the points in your letter correct or has she done something wrong and needs to apologize to RWC? Both cannot be correct, and one must be false.

I would also like to make it clear that Amber's behavior during the meeting was in no way anomalous to the general behavior of personnel at NHS. Gossip, name calling, bullying, screaming, holding grudges, personal vendettas, are all commonplace at NHS, against people and dogs. A person on dog staff said, "You're going to die, you're going to die, you're going to die", to a dog that was on its way to be euthanized. People being told, "you can quietly resign or be terminated." Greg was hiding in his office listening to the Advisory Board's committee meeting, when he was supposed to be there to present. NHS suffers from a lack of ethical behavior across all levels of personnel. No one would be surprised to hear that Amber said untrue things about RWC and its owners, and David was the source of this information.

I stand by what I told Greg during our recorded meeting.

1. Amber stated very clearly: the owners have swastikas on the back of their vehicle, the owners tried to adopt a dog from NHS last summer and couldn't so they had someone else adopt it for them, and RWC doesn't treat the dogs well. I did not misunderstand or misinterpret what Amber said. Amber in no way indicated that she was investigating these as allegations. She stated them as facts, and even after I countered each point, she provided no indication that the matter was resolved (as you erroneously state in your letter). I left the meeting with an ultimatum that I was going to stop supporting NHS, which would not have been necessary if everything was resolved during the meeting (as you falsely state in your letter).

2. I am not beholden to NHS or Greg for a paycheck or evaluation. So, I have nothing to lose by telling the truth. I told Greg the truth during our recorded meeting, and he/you chose to ignore my account in your letter to Jodie.

3. I was not wrong to tell Jodie what Amber said about RWC. NHS personnel frequently do

not behave in a manner that “business discussions in a private office” stays private, and what she and David said would have been spread by word of mouth throughout the organization and beyond. A favorite quote of mine: “A lie can get half way around the world before the truth can even get out of bed and get its boots on.” – Admiral Chegwiggon – JAG. Had I not told Jodie, and had she not written the letter, who else would have heard those false accusations, which were not resolved during the meeting.

4. It is not my responsibility to assist NHS to “repair the relationship we had with RWC” as Greg requested in our recorded meeting. First of all, there was no relationship with RWC prior to this incident. Their offer to provide free services for dogs that might need extra help was brokered by me, and was RWC’s first attempt to partner with NHS. Amber’s unprofessional statements about them personally, and your false response to their letters have done irreparable damage to any relationship that could have been established.

5. I am a very good volunteer at NHS. Both Kaitlin and Staci have been heard to say: Cindy’s all the dogs’ favorite, even if she doesn’t walk them, they know her and love her. I am VERY good with the dogs, especially the challenging ones. I love them all, and they all know it. I realize that NHS management may decide to take punitive action against me for telling the truth, which contradicts the information in your letter. I would ask that you consider the fact that I am going to take a lie detector test to verify what I have said in this letter. I am 100% certain that it will validate what I have said in this letter. Please ask yourself, is NHS an organization that will punish people for telling the truth? If so, then it doesn’t deserve good people like myself. I will add that should NHS take retaliatory actions against people who tell the truth, I am certain that the public and donors will not react well.

Should you have any questions or need any clarifications please feel free to contact me.  
Cindy Hansen



Jodie Wang, Owner/CEO  
Real World Canine  
1355 N. McCarran Blvd.  
Reno, NV 89512

Dear Jodie,

Thank you for giving us the opportunity to investigate and respond to your letter regarding Nevada Humane Society. Late in February, a volunteer (Cindy) participated in a discussion between two employees (Amber and Kalt) related to a potential partner, Real World Canine. Staff and the volunteer were looking at having Real World Canine possibly assist an NHS dog named Punchy and perhaps establishing an ongoing relationship between NHS and Real World Canine.

The discussion involved staff recall of a guy in shorts who had a swastika tattoo on his calf, possible 36 stickers on his car, and who they believed had been denied adoption by NHS at some point. The context of the conversation was whether or not the person being discussed worked for or had any affiliation with your business. During their discussion and upon researching NHS records, they determined that the person they were thinking of had nothing to do with Real World Canine or any individuals involved in the business. Upon determining that this was a case of mistaken identity, both employees felt comfortable recommending that we pursue the vetting process with Real World Canine as a potential NHS partner.

Amber exchanged e-mails with you on March 15 indicating that we would like to make another site visit and explained that we would have to create an SOP (standard operating procedure) and speak to upper management to determine if anything else was needed to move this forward. I believe that you responded on March 19 and I don't believe that NHS has responded to that message. Unfortunately, staff has been shorthanded due to the season and an untimely death of a team member. In addition, the dog in question, Punchy, was adopted out on March 22. NHS does have a number of partners we are currently evaluating in addition to your business and the process does not always move quickly.

There was no defamation, slander or unethical behavior from our employees or any intent to harm you or your business. This was simply a business discussion in a private office between two employees and a volunteer. The mistaken identity was cleared in the moment and that was the end of the discussion.

Had there been any concerns about your character or business, there would not have been a recommendation to move forward with the vetting process. Even if the two employees felt that there was a character issue or if they had concerns with your business, they don't have the authority to deny or approve a potential partner and further research and approval of upper-level management would still have been required.

28258 Longley lane • Reno, NV 89502 • 775-856-2000 Fax 775-284-7060  
549 Airport Road • Carson City, NV 89701 • 775-887-2171 Fax 775-887-2128  
nevadahumanesociety.org





As requested, the answers to the four questions you asked are below:

1. The employees involved were interviewed and asked to provide written statements regarding their recall of the conversation that took place five weeks prior to receiving your complaint. After interviewing both the employees and the volunteer, it is clear that no unethical or slanderous actions were taken or intended. Unfortunately, this was a sensitive conversation about a past incident but it was quickly determined that the person in question was not associated with your company. The conversation took place outside a public area and the only person we are aware of who discussed this outside of the meeting was the volunteer. All employees and volunteers are bound by confidentiality agreements signed when they undertake employment or volunteer service.
2. The conversation that day determined that you or your business were not associated with the person in question. There would have been no further discussion about you or your business with respect to him.
3. The conversation in question took place and was resolved with NHS staff that same day. If there was any further conversation regarding this individual, it would not have involved you or your business name.
4. As noted above, the NHS CEO interviewed the employees and volunteer involved. As a result of the complaint, employee guidelines have been updated to direct the employee to speak only to the CEO if they have any question or concern about moral character or fitness of another employee, potential adopter, partner or supplier. The employee guidebook and volunteer handbook already addressed the restriction regarding sharing private conversations at NHS regarding partners or individuals.

I apologize that the details shared with you may have been incomplete or misunderstood and I sincerely apologize for the distress this has caused you and your wife. We value your past support and hope that we can find common ground and move forward. We recently filled a key vacancy for an Animal Care Director, Staci, and she and our CEO, Greg, would like to attend the next site visit if you are still willing to pursue the partnership. I think you may have met Staci at the Heels & Hounds event last weekend.

Again, we appreciate the opportunity to address your concerns. We always try to do right by the animals in our care and those who support our lifesaving mission.



Sincerely,

A handwritten signature in black ink, appearing to read "Kris Wells", enclosed within a thin black rectangular border.

Kris Wells  
President of Board of Directors

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2128  
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**From:** [Clay](#)  
**To:** [schieveh@reno.gov](mailto:schieveh@reno.gov); [Animal - Advisory Board](#)  
**Subject:** Current employee at the Nevada Humane Society  
**Date:** Wednesday, May 3, 2023 6:37:22 PM

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[**NOTICE:** This message originated outside of Washoe County -- **DO NOT CLICK** on **links** or open **attachments** unless you are sure the content is safe.]

To whom it may concern,

My name is Clay Johnson and I am currently employed by the Nevada Humane Society. The other day I received a suspicious email encouraging whistleblowers to come forward if they have any concerns about the NHS, its operations, and its treatment of animals and staff. I have been an employee with this organization since 2017 and I feel obligated to mention that I have never once seen anything that resembles what these accusations are claiming. I have never witnessed animal abuse or mistreatment. I have never seen an employee be unfairly treated. I have nothing but love and admiration for this organization, its mission, and my fellow coworkers, and believe me if any of these accusations were true then I would not work for the company. I am not here for the money, I am here because I love animals and I love how the NHS lets me help them.

For a bit of clarification on who I am and what my role in the organization is, I started working at the Reno shelter as an adoption counselor. Within 6 months I was promoted to adoption supervisor which allowed me to have hands on experience working with more animals, as well as engaging with other managers and supervisors in other departments. In mid-2019 I transferred to the Carson City shelter as an assistant manager, and by the end of 2020 I was promoted to shelter manager and have been in the position since then. I oversee all of the operations at our Carson City facility and even though this job can be stressful I have stuck with it because I know that I am helping these animals when they need help the most. I have been involved in nearly aspect of the shelter from customer service, to animal care, to clinic support. Over the years I have seen tens of thousands of animals come and go in both of our shelters, a sheer majority of whom have been successfully adopted into new loving homes. I have watched the organization and its staff work tirelessly to help animals and owners in our community, including people who have sick animals and/or animals with behavior issues and as a result thousands of lives have been saved.

I understand why people are concerned about the accusations being filed against the organization, but there are a few things that I hope are considered when reviewing our operations. Since I have worked for the organization our save rate has not only been wildly successful, but it has actually increased. We have a 96% save rate on animals, which is absolutely amazing for a open admission shelter. Especially the only open admission shelter in Washoe County and Carson City. We don't have the luxury of saying no to people who want to surrender, which means that we are taking sick animals and animals with behavior issues *and we still are helping and finding homes for them*. We run several programs that are aimed at supporting animal owners in our community, such as vaccine clinics, pet food assistance, microchipping, and were even going to be having a neuter clinics that will alter up to 100 animals. How can anyone look at these save rates, and successful public programs, and say that the NHS is not achieving its mission and animals are being neglected? How about the fact that the NHS has won Best of Reno Best Places to Work several years in a row. If an

organization was filled with disgruntled and mistreated employees you'd think we wouldn't be winning these accolades, yet here we are Best Places to Work several years in the running. These are not subjective opinions, these are verifiable facts, yet I feel like it is being put to the side in order to cater to the people who are complaining.

I feel like the voices of the few that are complaining are drowning out the rest of us that are in support of the organization. We have 120 employees working for the organization, and less than half a dozen have complained? What about the other 100+ employees? Are their opinions going to be sought after and heard? Or are people only interested in the complaints from the people who have something negative to say? Cause I'll be honest, that's how it feels when I get an email that encourages people to complain, but says nothing about the staff that have had the opposite experiences. We have a voice too about our place of work, and right now it seems like our voice is worthless cause it doesn't fit the agenda of the people who want to see the NHS suffer.

I love this organization, its mission, and what it has achieved over the years. I have never worked for a business that strives this hard to help people and animals, and to see this concerted effort to undermine all that hard work absolutely breaks my heart. To see it come from people that I have worked with is also deeply troubling. I hope that anyone that reads this email takes away one thing and that is to please not gloss over all of the amazing things this organization has done, and don't ignore the voices of the hundred plus staff members who are going to refute the accusations being tossed at our organization and the work they do. We have a voice too, and to trample on it is not only wrong, but it is going to be what truly hurts animals in our community.

Thank you for the time,

Clay Johnson

I was a Volunteer for over 6 years putting in more than 20 hours a week. I left when I saw horrible treatment of Volunteers that had been with NHS for 20+ years. Valid concerns about things happening in the clinic and the shelter went ignored and disrespected. I was also really unhappy with the responsibilities that brand new Volunteers were given. Some were making decisions on adoptions without proper training. I was not allowed to do an adoption event on my own until I had a few months of training. I saw people doing adoptions at off site venues that had NO clue what they were doing. Making a decision on who is adopting an animal is very important. Some adopters don't always have the best interest of the animal in mind. Due to low pay the employees that were in charge of training and oversight of the volunteers were leaving. It became a revolving door of employees. I also saw really caring and great employees leave because they weren't considered for a hiring within. So many people were lost because that was a practice that was used most of the time. I was noticing many outside hires had no experience for the position. Very frustrating and sad to see all of this happening and I had to stop volunteering.

Thanks for your attention,  
Diane Groth

**From:** Diego Hernandez <[diegohdez987@gmail.com](mailto:diegohdez987@gmail.com)>  
**Sent:** Friday, April 28, 2023 12:35 PM  
**To:** Animal - Advisory Board <[AdvisoryBoard@washoecounty.gov](mailto:AdvisoryBoard@washoecounty.gov)>; [schieveh@reno.gov](mailto:schieveh@reno.gov)  
**Subject:** Re: Letter from a concerned former employee

**[NOTICE:** This message originated outside of Washoe County -- **DO NOT CLICK** on links or open **attachments** unless you are sure the content is safe.]

Forwarding in an effort to make sure my voice is also heard.

On Mon, Apr 17, 2023, 12:35 PM Diego Hernandez <[diegohdez987@gmail.com](mailto:diegohdez987@gmail.com)> wrote:  
To anyone connected with NHS who wants what's best for the animals,

I'll begin by saying I worked at NHS from 2020 until Fall of 2022. During my time there I was an adoption counselor, the animal admissions desk, dog staff, and trained to be the animal intake staff and the dog evaluator. None of this training came from a manager, supervisor, or anyone in a position above the position I was being trained for.

When I left NHS in the Fall of 2022, it was over a handful of concerns. I was starting to feel like everyone in a position of management was only there to collect a check. The animal care team was constantly being set up for failure with no plans being made to help them or the animals that they're trying to care for. Now that I have been able to see how other shelters are run, it's apparent that NHS is expecting their work force to work solely "out of passion" for the animals. Which seems to be the company's way of saying that they will be leaving everyone underpaid and understaffed with no on-site training, and to just deal with it. Something has to change.

From what I have seen and heard, the management is still just as disconnected. Which is leaving a work force, who knows little to nothing about animals, all alone to try and care for the animals. I can say firsthand that from early 2021 until late 2022, that lack of structure or any real "on the job" training has been a complete detriment to the staff at NHS. During my time there, I was given no real training, no help on how to handle animals, and no assistance with the growing daily task list. NHS was my first step into working with animals, and they gave me zero resources or tools on how to further my education with animals. In my 2 years working at NHS, I never once saw them offer ANY help or education to the animal care team. I've been working at another shelter for around 7 months now and they have already taken the time to train me on proper shelter animal handling and have even gone as far as to get me certified in shelter animal behaviorism. How can NHS justify getting away with not even doing the bare minimum for its employees? Allowing people who do not understand animals to handle them is only going to traumatize the animal or result in the animal biting a human, and isn't that what we all want to avoid?

To continue speaking about the lack of training, I would also like to bring attention to the dog staff supervisor / manager, Amber. The negativity that spreads from Amber is absolutely atrocious. She consistently made me feel targeted, and exaggerated it by playing favorites (something that she still does to current staff). She was rude, impatient, and talked down to/poorly about her staff. All while making it very clear that she doesn't trust them. You would think that as the dog staff manager, Amber would be training all of her staff up to a point that she could at least TRUST them. That was never the case, though, as I have also never seen Amber help her team enough to be willing to train them. There were days back to back that I

was going to Amber directly asking for help, because we did not have enough people to do all of the routine morning tasks. She never once took the initiative to help me, the dogs, or the rest of the team she supposedly runs.

Her extreme negativity was not isolated to just people, though. The way she spoke about the animals while I was there made me feel like she either did not care at all or like she was totally burnt out and not a good fit for her position. Either way, she's continued to be the head of dog staff. This has been of the up-most concern to me, considering she's a big reason I left NHS. There was more than a handful of times that I came to Amber with a concern and I felt totally dismissed. This wouldn't be scary, if my concerns didn't involve a member of the public trying to adopt a dog that was clearly too much for them to handle. In fact, every time I brought up a concern over a mismatched adoption I was blatantly ignored by Amber. She didn't seem to care about the 90 pound dog with all sorts of behavioral issues that was NEVER worked with, and worse yet she didn't seem to care about the 90 year old man who can hardly walk that's trying to take home said dog. Amber seems to echo the thoughts of the board members, which is to just get the animals out. Without worrying about them staying out and certainly not doing very much for them while they are under NHS' care. This, to me, feels like it's going to resort in the same issues that the lack of staffing and training has. More bites, increased length of stay, animals who are suffering, and PEOPLE who are suffering.

Now, I would like to bring the attention to the dogs themselves. With the severe lack of training at NHS, the distrust and lack of care from Amber, and being a grossly underpaid position, the dog staff isn't being given any of the tools necessary to help the animals. Dogs are sitting in their kennels every hour of the day, except for the ~10 minutes they get to spend alone in a yard. Amber does not care enough to be building any sort of enrichment routines for the dogs. So day in and day out, the dogs are staring at a concrete wall with nothing to do. Just waiting for those ten precious minutes they get outside. This is neglect, to put it frankly. Dogs are social animals just like humans, and they need interactions and mental stimulus in order to stay healthy. In my entire time at NHS, I only saw Amber directing a play group between two dogs, twice. And she did not allow anyone else to be a part of it, besides her selected favorite member of staff, because we had "other things to do". There are enough daily volunteers at NHS that it should be no problem to start a more robust enrichment program. The main road block seems to be Amber or any other employee at NHS in a position of leadership not wanting to put in the effort. But the dogs need more than just 10 minutes alone in a yard. More than a 5 minute walk by someone who isn't even handling them properly. The dogs there are in desperate need of more care, and it seems to me that not a single person from management to board member even remotely cares. The entire system at NHS needs to be reworked before the animals silently suffer any longer.

employees feel like their work matters. Where the animals, staff, and volunteers are happy to be here. The over-arching belief that dogs are dangerous and people are not to be trusted is everywhere in this shelter. In our policies, in our staff, and in our walls. And it truly takes its toll on everyone here and everyone who interacts with us. We're not working towards saving lives; we're working on keeping animals out of the community.

Good morning,

This is to update the county advisory board and the mayor's office that I was terminated from my position at NHS this morning. The reason given by management was a violation of the employee handbook. Specifically for making false or malicious statements about the NHS. I do not believe what was contained in my letter was either malicious or false. As I mentioned in the letter itself, I have proof of every claim I made. I also made a point to express that I explicitly do not wish for harm to come to anyone; which does not fit into the definition of malicious. As disappointed as I am; I hope my story proves what a lot of people have been saying. No warning or conversation regarding my termination was made. I was simply terminated. Attached are some photos of my termination letter.

I did not risk my livelihood and my career to bring harm to anyone. I risked everything to raise pay for my fellow staff members who I see constantly on the verge of tears over their finances. I risked everything for the dogs who don't get out of their kennels. I risked everything for the community members who are put into dangerous situations with an animal and the shelter gives them no options. I hope that the board sees what happened today as a testament for a need for change. A testament that doing something for the sake of others in this shelter only results in harm to the individual. They are concerned with one thing and one thing only; protecting themselves and their positions.

I attempted to give a voice to those who cannot speak and was terminated. It has been my experience in life that doing what's right always costs. In those moments where you have something to lose and you do what you believe is right anyway; that's what defines a person. I would also like to share with the board that an email about the situation was shared with staff at some point yesterday. Management are calling them attacks and said anyone could send whatever they like to the board and the mayor's office. However; they said no one is allowed to speak to any news stations. Ironically, I was terminated immediately after this announcement was made to dog staff. Other staff will see what happened to me and refrain from making their cases. The staff are being held hostage by their low pay. In some cases; they are being held hostage by their lack of education to even consider that what we are doing is wrong. I wish the NHS well and my only hope is to make it a better place for everyone involved.

Sincerely,  
Edward Hovore



Nevada Humane Society  
Corrective Action Form

As an at-will employer and depending on the nature of the offence, Nevada Humane Society reserves the right to skip any steps at its discretion.

Date:	5/2/2023
Employee:	Edward FIOVONE
Manager:	KEVIN SUTLIFF
Department:	Intake

Select the Category(ies) of Issue(s):

Unsatisfactory Work Performance	Insubordination or other Conduct Violation	<input checked="" type="checkbox"/>	Violation of Policy and/or Procedure	<input checked="" type="checkbox"/>
Unsatisfactory Customer Service	Excessive Tardiness/Absenteeism		Safety Violation	

Action Type Please select the corrective action you are taking:

Verbal warning 1		Formal written warning 2	
Verbal warning 2		Disciplinary Suspension	
Verbal warning 3		Final Warning	
Formal written warning 1		Termination (Requires Executive Approval)	<input checked="" type="checkbox"/>

Details of the Violations/Issues. List dates, times, and other pertinent information. Please use extra paper if needed. Example: On 01.01.2023 John Doe was 15 minutes late to their 8:00 am start shift. They did not call or text to communicate their tardiness.

5/1/2023 Human Resources became aware of a code of conduct violation you made.  
page 24 of the employee hand book under code of conduct!

① Discourteous - courtesy is the responsibility of every employee everyone is expected to be courteous, polite & friendly to our customers, vendors, and suppliers as well to their fellow employees no one should be disrespectful, or use profanity & any language which injures the image or reputation of NHS.

② Making false, fraudulent, or malicious statements to or about fellow co-workers customers or NHS.





Follow up for this corrective action plan will take place on: <u>MM</u>
Date:
Time:
Required in attendance:

You are formally being notified to bring to your attention the severity of this situation. By signing below, you acknowledge that you received this notice.

Presented by: [Signature] Date: 5/1/23  
 Supervisor Signature

[Signature] Date: 5/1/23  
 Human Resources Signature

I understand I have a right to appeal this warning to upper management as well as any other disciplinary action taken against me up to and including discharge.

Employee Signature [Signature] Date: 5/2/23  
 [Signature implies only that this has been seen and understood by the employee. It does not imply agreement.]



This is a violation of NHS policy as per the Employee Handbook. quote from handbook, page, and specific violation. Please use extra paper if needed. Example" Page 25 "failure to remain at your workstation during working hours." Failure to follow job duties as described from job duties description: Example: Works courteously and cooperatively with other staff members.

Action Plan: Please select action plan below, then in detail list action plan steps. Please use extra paper if needed.  
Example. "Manager Tom will monitor John's attendance for a period of 30 calendar days from (date to date) Any violations within the corrective action time will result in further discipline up to or including termination."

Retraining	supervisor support	improvement	warning level	termination
				5/12/23

Dear WCRAS Advisory Board:

This letter is to give you my thoughts about things going on at the Nevada Humane Society.

I consider myself to be a major donor to the Humane Society and have a vested interest in the organization. When I was a Big Sister, my little and I volunteered often at the shelter and at off site events. I also volunteered by sewing cat carrier covers, embroidered Adopt Me vests for the dogs, TNR trap covers, neckerchiefs for the animals at events and anything else that was needed.

On 3/4/21 I gave the Humane Society McDonalds stock worth \$17,451 which, I believe, was sold for the cash and a check for \$13,549 to total \$30,000 for the clinic remodel.

I got involved as a financial donor prior to this donation after hearing about plans for a dog park at the shelter. I was interested in donating for a water feature or something else that interested me. I called and left messages for Greg about my interest in donating to this project. I called several times and he never returned my call. I finally had to call his assistant or whomever she was and threaten to give my money to another organization if he was not interested in talking to me. He did return my call after that and I met with him and Lisa DeCelles, Development Assistant, at the time to discuss various projects including the clinic remodel. During those meetings I agreed to donate \$30,000 to NHS for the project.

After the clinic remodel was finished in late 2021 there was a small get together with staff and refreshments after a tour of the clinic. Present were: Rebecca Goff, Clinic Manager, Dr. Jessica Slatin, Veterinary Director, Lisa Feder, Chief Operating Officer, Kristen Saibini, Development Director, Megan Barrenchea, Human Resources Director, Greg Hall, CEO and Lisa DeCelles along with myself.

I understand that several administrative staff members have left NHS since then which include Rebecca Goff, Dr. Slatin, Lisa Feder, Kristen Saibini and Megan Barrenchea. I know for sure that Rebecca, Dr. Slatin and Kristen have left and I am assuming the others at that get together are no longer there as on the NHS website the only administrative staff mentioned are: Greg Hall, CEO, Phil Neff, CFO, the cat Care Manager, the Maintenance Manager and the Carson City Manager. The new Development Director, Trent is not even mentioned nor is any clinic manager.

The issue which affects me the most was the outbreak in October of 2022 of Panleukopenia, a disease the cats would have been protected from had they been properly vaccinated. Standard sheltering best practice is to vaccinate all dogs and cats (except underage tiny kittens and puppies – who need to go immediately into foster care to protect them from disease) within minutes of arrival at the shelter with basic vaccines, including for cats, the one that provides protection from this deadly disease. Also, your animal database tracks when dogs and cats are due boosters, so kittens and adults that are in the shelter for longer periods are revaccinated – just as a pet owner would – when the vaccines boosters are due.

I heard that NHS had 170 unvaccinated cats and had to borrow vaccines from other shelters once the outbreak started.

Cats **DIED**, others **suffered** with the illness, and they had to shut down cat intake for a week, which means cats who needed shelter/help could not get it.

Clearly Greg should not personally vaccinate animals, but it is his job to hire and retain qualified people who WILL make sure they are cared for properly. He has gone through 3 qualified COOs in his 4 year tenure – Art Westbrook, Lisa Feder and Rory Adams. And to have the necessary supplies on hand to properly run the shelter.

**THIS DISEASE OUTBREAK SHOULD NEVER HAVE HAPPENED!!!** This is not the way a shelter in a major city like Reno should be run. To not vaccinate the felines in their care to be protected against disease and to not **EVEN HAVE ENOUGH VACCINE ON SITE IF NEEDED** is a travesty.

I have limited my donations to NHS because of these things going on that concern me. Plus when I called Greg to talk to him about my concerns, he never returned my call even when I said I was going to stop my donations. I did not make all my other donations plus \$30,000 plus all the sewing I did and all the time my little and I spent volunteering at the shelter and events to support the care that seems to be happening at the shelter at this time. When I talked to Trent Bingham (new development director) he seemed to care about the proper running of a shelter and keeping donors.

Is anyone paying attention to the care and welfare of the animals in the shelter? I hope so, but, perhaps not.

Please look into these allegations and make the necessary changes. For the welfare of the animals. That is your job.

Thank you for your attention to this matter.

Sincerely,

Gloria Derby

**From:** [Jackie Wolfe](#)  
**To:** [Animal - Advisory Board](#); [schieveh@reno.gov](mailto:schieveh@reno.gov)  
**Cc:** [joel.zva@gmail.com](mailto:joel.zva@gmail.com)  
**Subject:** Animal Welfare at Nevada Humane Society  
**Date:** Thursday, April 27, 2023 1:51:16 PM

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[**NOTICE:** This message originated outside of Washoe County -- **DO NOT CLICK** on **links** or open **attachments** unless you are sure the content is safe.]

To Whom it May Concern,

I am writing today as I feel I have a moral responsibility to the pets of northern Nevada as well as the people employed by Nevada Humane Society. I was an employee of NHS from August 2020-November 2022. I currently am employed by VCA baring blvd as a veterinary technician in training. In those two years at this organization I went from a person who was eager and excited about starting my journey in the animal well fair industry, to someone who was so burnt out and overworked I didn't know if I ever wanted to work in this industry again. When I first started, I was a part-time cat care staff. I grew through this organization to hold other positions such as the small animal care-giver, full-time cat care-staff, and my last position as a full-time animal intake coordinator. Over the course of my employment at NHS and the longer I stayed at this organization, the more I began to see its flaws. NHS is not alone in having flaws as a organization, however, when it coms to caring for living beings these flaws border on negligence.

What I would like to talk about first is how I got the position of small animal care-giver. I was still working in my part-time position on cat-staff, but I was struggling to afford day-today expenses as part-time. There were no fulltime positions open, so I opted to try and work two part-time positions. At about the same time that I was looking for a second position with NHS, I started to notice how little care the small animals (rabbits, guinea pigs, rats, etc.) were receiving. I started to dig a little more in trying to find out whos responsibility it was to care for these animals. in doing so I found out there was no official small animal care-giver positon, and that it had been delegated to the front desk staff when the COVID-19 pandemic hit. While I can understand the need for this during the strict quarantine period, when the shelter began to open up again and started in-taking larger amounts of small animals, this position should have been reinstated. Instead, the front desk staff that was already short-staffed and overworked with the influx of people adopting, were expected to provide all of the care for the small animals as well. As expected, these animals were not receiving the standard of care that should be provided at NHS. I had to spear-head a campaign along with another co-worker to get administration to open a position dedicated to caring for the small animals. This process took around 3 months from the first time I brought up the lack of care to a manager. A staff member who had only been working in the animal welfare industry for approx. 1 year at that point should not have been the only voice advocating for an entire department of animals not receiving the care expected of an animal WELFARE organization. That was just the first of the many incidents that occurred during my time there that made me question the organization.

Another group of animals that I feel consistently get forgotten about by NHS management are the barn cats. The care that the barn cats receive at this shelter borders on neglect. In my time there I watched barn cats sit in room 7 for periods of 3 weeks up to multiple months, stuck in a small den inside a metal cage. This is the worst case scenario for these cats. They are not socialized, not used to being inside, and a staying coped in these metal cages causes extreme stress for these animals. Something needs to be done about the way the barn cats are handled at NHS. The semi-social or companion cats are also included in this group. They are usually housed in the back in small metal cages as well while trying to socialize these cats. The first thing I learned about proper care for cats in shelters is that they need a place to hide. Not having a place to hide can lead to increased behavior issues and increased stress for the cat which has implications on their health. One of the techniques the main care giver for these cats used to socialize these cats was to take away their place to hide as well as any blankets or source of comfort. This led to these cats in many cases completely shutting down or becoming more aggressive/reactive. I would frequently find cats hiding in their own litter boxes out of desperation for somewhere to hide. This treatment is inhumane.

When I transferred to the intake coordinator position I was dealing with a lot more animals (every animal that came through our doors to be exact) and learning a lot more about the way NHS functioned. Unfortunately, I mostly saw disfunction. One of the departments at NHS I ran into the most issues with was unfortunately the Clinic. Not only is there NO clinic staff in the building on the weekends (animals don't get sick on the weekends, right?), but they would frequently leave early without informing care staff. From the time I was a part-time cat staff I was warned from other employees to avoid the clinic if I could as the people who worked in there were a tight clique that didn't enjoy mingling with the other departments. From what I could tell in interacting with them, this was very true. When I became the intake coordinator, I would say the treatment I received from the clinic staff was nothing short of straight up bullying. I felt like I was transported straight back to middle school, and this should NEVER be how someone feels in their place of work. Multiple members of staff had bad attitudes constantly, they would very obviously play favorites among the staff, and there were points where I would be completely ignored when trying to find help. Not only were the technician and assistant staff unfriendly, the shelter veterinarians (this excludes the Dr's hired within the last year as they all seemed very eager to work in the shelter.) had reputations for being scary and less than kind. I had the misfortune of experiencing this first hand. In my time as the intake coordinator (1 year), I started a list of times there was inadequate care given by the veterinarians in my iPhone notes app. When I left that list was very very long. It was so long for me to write every incident out would have this email as long as a novel. So, I'll just mention a couple that were really unfortunate cases.

The first time I recorded an incident for this list, was at the start of what is called "kitten season". It was around 3:30-4pm (the clinic team is supposed to be in shelter till 5pm)and I received a call from an employee at our Carson City location. He informed me he was rushing to our location with a kitten that had a large puncture wound to its abdomen. Of course the first thing I did after ending this call was inform our clinic. This is when I was told by the two doctors on staff at the time that they both had places to be and they were leaving before they could see this cat. The other intake coordinator and I had to basically beg them to give this cat medical attention. Sadly, there are many, many stories just like that one. The next incident I'll tell you about led to me reaching out to the animal care manager at the time about the treatment I received. This happened near the end of the day, it was probably around 4:30pm. We had a dog that was being surrendered by its owner due to it declining in health. When I went into the admissions room to retrieve this dog just by looking at it I could tell this dog was actively crashing. He couldn't hold himself up, he was agonal breathing, and showed no response to external stimuli. I rushed him to the clinic immediately, this dog was dying in my arms as I ran back there. When I entered the clinic Dr. Slatin was in the treatment area with two assistants. I rushed in and exclaimed that I needed help and a doctor as this dog was NOT OKAY and I believed he may be dying. The only response I got from Dr. Slatin was to be yelled at and told "I don't have time for this". I was honestly in shock from this. Another assistant took the dog from me and I walked out of the clinic crying. This dog was humanely euthanized that night. Sadly, nothing came from the email I sent to my manager, and that was not the only time I left the clinic

The clinic weren't the only employees at NHS that were part of the reason morale at NHS is so low. There were many employees at NHS that seemed to take out their own personal anger or feelings of frustration on their fellow employees. One in particular is an employee who almost seems untouchable due to her tenure with the organization. She not only bullied fellow employees when she deemed they weren't doing something correctly ( this included things like using 2 paper towels instead of 1, or filling the cat water bowls as you went rather than all at once at the end of cleaning as she liked), she would go out of her way to inspect the other departments and tattle on them if she felt they weren't up to her standard. This is not conducive to a healthy work environment between coworkers, and its disheartening NHS continues to let her and others treat their coworkers like this simply because they have been working there for a while.

Not only is there an issue with the relationship among staff at NHS, but also among those in the administration. My biggest issue with the management at NHS is how out of touch they seem to be with how the shelter functions. I can almost guarantee if you went into the admin office and asked someone working in there if they knew how we cleaned the kennels, the majority would not know the protocols. It's very hard to work for someone when they do not even respect the work you do enough to know what it

entails. In my opinion the CEO, Greg Hall, is the worst when it comes to understanding the everyday functions of the shelter. As a CEO I do not feel Greg is providing the guidance and leadership it so desperately needs. He does not provide a workplace where his employees feel valued. Paying its employee adequate wages is a big issue at NHS. I remember one time the previous HR manager was asking us how she could raise morale, but made sure to specify raises weren't an option even though she knew "they paid us peanuts". That is a direct quote. After having worked with this company for 2 years, when I left I was only paid 25 cents more than the starting wage. I was shocked by this, but later found out that every time I had supposedly received a raise based on merit, the entire organization received the same raise. I even had to have a meeting with Greg to ask to be paid the same wage as as my fellow intake coordinator and equal. All this told me was that my time, effort, skills, and knowledge was only worth 25 cents to them. This is just one example of how I did not feel valued as an employee. NHS seems to be relying solely on the care and love in the hearts of its employees to keep it running, and eventually this care will get burnt out.

There is also a big safety issue at NHS. As the intake coordinator I worked solo 3 out of 4 days. This meant I was alone in a room with cats and dogs that had never gone through our evaluation process and most of the time their history was unknown. It was part of my job to vaccinate all of the animals that came through intake, and I was expected to do this by myself most of the time. This is very dangerous, and something that would never happen at my current vet hospital. How is one person expected to safely restrain an animal and use a needle to inject the vaccine at the same time. While I thankfully do not have any incidents of injury due to this, there were multiple times I can close. If I deemed that I was unable to vaccinate an animal and asked for the clinic to complete the vaccine, I was met with resistance and even was told i was not allowed to ask the clinic to vaccinate animals I could not on my own. Anytime this concern was brought up it was ignored due to being "short staffed". This issue even came to the point of the previous CEO, Rory Adams, reprimanding my fellow intake coordinator (in the middle of the hallway with others near by) for not vaccinating a dog that tried to bite her and the admissions coordinator multiple times. They were both threatened with disciplinary action for this incident. This tells me NHS does not care about their employees safety and was a tipping point in what led me to leave.

The last issue I will discuss, were the poor decisions I saw being made by managers and supervisors regarding proper placement of animals with behavior issues. There were multiple times I witnessed animals, mainly dogs, being adopted into what I deemed quite frankly were dangerous situations. The one example that comes to mind first was a dog named Hennessey. Hennessey was a very sweet dog, however, he was an easily excitable dog with a strong prey drive. He had restrictions against kids under either 8 or 12 years old, small dogs, and cats. He also had a bite history, but we believed that with the right home Hennessey could be a wonderful dog. Unfortunately, he did not go to the right home the first time he was adopted. The dog care supervisor now manager and adoptions manager at the time allowed this dog to be adopted into a home with two young children (the first 1-2 yo and the second 8-9 yo), and two small dogs. They allowed this despite employees having explained the restriction to the Woman adopting Hennessey as she was becoming aggressive and rude with staff members. Despite many members of staff expressing discomfort with the adoption, it went through. Hennessey was returned within a matter of weeks and one of the small dogs was in the emergency vet hospital as Hennessey had tried to play with him a bit too rough. Instead of having their employees backs those in charge allowed this adoption to happen and endangered both animals and children. I sent an email to my manager at the time expressing my feelings about the situation and again felt there was no follow up.

I stayed a NHS for as long as I could stand before my mental health declined so significantly it was impacting my relationships outside of work. I still care very much for the pets and the people who are still at NHS, that is why I am writing this email. Something needs to change, and it needs to change now. The pets at NHS are suffering from the lack of care they are receiving, and the staff is also suffering while trying their best to provide what they can to the animals. When I left NHS I was not alone. My entire intake department of 4 people quit within 2 weeks, and this was only a small portion of everyone who left around the same time. Everything I wrote here is only a portion of all of the issues arising at Nevada Humane Society. If change doesn't happen and soon, the animals and staff at NHS will continue to suffer from it tremendously.

Thank you,



Jacklyn Wolfe

To Whom it May Concern Affiliated with the Nevada Humane Society,

My name is James and I am a recent resigned staff person at NHS. Upon leaving I had a conversation with upper management about my concerns during my time at the shelter. I would like to document my concerns and expand on them more here.

I began working at NHS in August of 2022 and left in April of 2023. I worked as a Kennel Technician on dog staff until January of 2023. Overlapping with this, I began as the Dog Foster Coordinator, the first of this position, in December of 2022 and continued until I left.

Admittedly, I do not have a background in animal care. The absence of my animal care background is common and problematic with NHS. This trend is made worse by a lack of knowledgeable training in dog handling and other basic animal care industry knowledge. I began on dog staff because I had just moved to Reno, needed a job, and wanted to work with animals. My background and core competency is in working with people; I have a Master's in Counseling and am trained as a psychotherapist.

Throughout my time at the shelter I had many different people confide in me about their concerns with NHS. Various people of all levels of hierarchy have disclosed to me about negative experiences and frustrations; volunteers, foster caregivers, former staff, staff from county, rescue groups, co-workers, management, donors, and trainers. People's negative experiences have been with clinic, euthanasias, lack of fair compensation, and dog staff policies ranging from cleaning, lack of dog handling training, gatekeeping of dog care, lack of transparency, the isolation of dogs from each other and people, lack of stimulation and enrichment, and the long lengths of stay including in Winter. For context, in Winter dogs are in smaller kennels, taken out of their kennels even less (15 minutes a day, and sometimes not at all), and interact with and see less people (only some dog staff and not volunteers) than dogs in the viewing pod kennels. Dogs are in Winter between intake and their evaluation, for behavioral reasons, including if they don't have an outcome plan (meaning they essentially sit there), for medical reasons, and even as they are available but the viewing pods are crowded. This is the section in the back of the shelter that I worked in as a Kennel Technician.

I have interacted with people who have been on staff and left because they have knowledge and experience of animal care practices nationally recognized. They are very upset by NHS' lack of embodiment of allegedly widely accepted policies including failures to maintain minimum animal care standards as recognized by the Association of Shelter Vets, or ASV. Noted concerns relate to reducing lengths of stay, evaluations, fostering, socialization such as play groups, adoptions, fear free approaches to dog behavior, and more. I am not the person to speak to these policies and their national context more specifically. I just deeply encourage NHS to take seriously that many different people with experience and credentials are frustrated for valid reasons.

I am obviously not holding the whole picture; none of us are. However I am sorry to say that an important part of my own concerns with the dog care at the shelter that I feel qualified to speak on are the outlooks of Amber, David, and Heather, Dog Manager, Supervisor, and Evaluator, respectively. It is quite simple; *they are very negative*. This is no revelation. They speak transparently about being cynical. My very first impression of the shelter was being interviewed by Staci, Amber, and Flea and I walked away with the clarity that Amber is burnt out. Amber and

David are *very distrustful* of people including their staff, volunteers, and adopters. They have consistent and pervasive compassion fatigue from being at the shelter for so long. David allegedly comes from a background with police dog training. I didn't see evidence of him being experienced with dogs and I have in fact heard of him undermining other behaviorists demonstrating more skill. I have seen that dogs' behavior can worsen around him because they are picking up on his energy around them. A background with police dogs is a very different orientation and arguably counterproductive for working with traumatized dogs in kennels. With Amber, again, it's quite simple. She doesn't *want* to be there doing that job. I'm not going to go into questioning why, then, she is. I will say that there is a narrative that things are just barely being held together and so people who have been at the shelter for longer are needed and that there aren't other people to do it. This is what's called a scarcity mindset which can develop from temporary circumstances (like how COVID impacted shelters) but isn't actually true. Therefore, dog care is being managed from a lens that reinforces this negativity.

While the pessimism is out in the open, the gravity of its impact on the animals well-being and staff morale is not seriously enough acknowledged. I wouldn't be compelled to write this letter if it weren't for the harm being done to dogs as a result of the negligence of individuals and the shelter addressing this burn out. More dogs are "behaviorally" euthanized. Dogs (especially in Winter) are only out of their small kennels for 15 minutes a day and even then they are alone in the yard. They are not playing with and learning corrective behavior from each other. They are not playing with and receiving enrichment and stimulation and attention from knowledgeable people. When I started, the kitchen door that connects to the large play yard was kept open so *that* dogs who were outside would get the chance to socialize with people coming in and out of the kitchen. Now, this door is kept closed. Dogs are highly social animals, and while they are at the shelter they are going through a traumatic, stressful, and confusing time. This neglect of their mental and emotional care because of endless distrust is not only harming the dogs but is also negatively impacting the morale of staff, volunteers, and the public as well as decreasing the "adoptability" of the dogs. Again, Amber, David, and Heather's distrust leads to gatekeeping which is an effort to falsely over control rather than learn from the dogs themselves. Our work would be so much easier and more rewarding if we trusted more people to clean kennels, the dogs to teach each other, and the public to learn how to engage with dogs at the shelter and in their homes. Instead, due to compassion fatigue we are removed from the framework that caring for dogs is really quite intuitive and that we are also animals that need not "other" them by, amongst other things, pathologizing their behavior in the context of unfamiliar and restrictive surroundings.

The thing is, I'm frustrated, yes, and deeply concerned, because no matter the intent, we have to be objective enough to be accountable for our negative impacts. But I'm actually really sad. When it comes down to it, I really *want* Amber to be doing what she wants. When I've asked her, she says that her passion is working with exotic animals. And I just really want this for her, seemingly more than she wants it for herself.

I think the concerns I'm trying to express are demonstrated well by the recent dog foster experience of Hot Cocoa, who I've worked with in Winter and as foster coordinator. Hot Cocoa is a one year old male Husky. He came to NHS November 21, 2022 as a stray from county animal control. As a young husky he was adopted within a few days and returned again within a couple of days due to a "family emergency" of the owner. He was adopted a second time after a few days and returned again within 3 days due to "nipping at owners mother" when he was being shooed away when he was seeking out food while she was cooking. He "never broke skin, or made any real contact." Again, Hot Cocoa was adopted for a third time within a few

days and returned after 4 days due to “nipping and a bite incident.” The notes about what happened are as follows:

*Per owner, Hot Cocoa bit both owners. The first incident was 12/7 noon time, owner found Hot Cocoa chewing and grabbed Hot Cocoa by the collar took him to the crate, Hot Coco resisted so owner pushed Hot Cocoa into the crate right above Hot Cocoa's tail, he turned around bit the hand that was holding the collar. The bite did leave puncture wounds and caused MINIMAL bleeding. The second incident was 12/8 in the evening, owner was picking up the Childs toys and putting them away. He thought the owner was playing and trying to get the childs toys and then grabbed onto to owners forearm, owner pushed Hot Cocoa off and crated him; there was only bruising left behind.*

*THIS DOG NEEDS SOMEONE WHOSE PATIENT, HAS TIME TO TRAIN HIM, TRAIN HIM CORRECTLY. HEAVILY ADVISE ADOPTERS NOT TO CRATE HIM WHEN HE'S "PUNISHED". BE SURE TO NOTE THAT HE DOES PLAY ROUGH. He's a good dog who needs someone who can tolerate some unwanted behaviors and whose willing to work those behaviors out of him- redirecting behaviors rather than scolding- he has separation anxiety and doesn't do well when yelled out.*

From here, Hot Cocoa went on a 10 day bite quarantine, which I assume was justified by the “MINIMAL bleeding.” Hot Cocoa began a bite quarantine on December 9th, 2022 and from there was considered “unavailable” in Winter. He was considered behaviorally “dangerous” by Amber, David, and Heather and a plan for him to receive the correct, patient behavioral training or an outcome from the shelter weren't done. He sat in Winter for two months.

In early February I was able to find him a foster for a weekend sleepover. His foster caregivers said he was mouthy and at the end of the weekend when they were transferring him to his next foster they had to pull over because he was too aroused while they were driving. Otherwise, they reported that things went well.

After this weekend sleepover, Hot Cocoa went on superbowl Sunday directly to a foster home with a staff person from our clinic. She reported having “husky experience” and a desire to train him, and she is *staff*. When I came back into the shelter I learned that she had brought him to the Carson City shelter at 11pm the same night (how this was possible is unclear) due to him lunging at her when she tried to get him to go into his kennel by pushing him from behind, despite that this type of correction is consistent with what the third owner reported doing that escalated the situation (the first foster reported that he would go into his kennel voluntarily and that when they wanted him to go in they just tossed treats into the kennel rather than pushing him). This is also despite the note that this is not how he should be punished, which is not surprising given the kenneling he has been enduring. The staff foster caregiver reported that she tried to “correct” him multiple times and each time he would lunge and try to bite until *he walked away*.

These weekend interactions happened while his caregivers were not administering his medication prescriptions, including Trazodone, a sedative that is now given to a large population of the dogs when they get to the shelter. This is a controlled substance that was therefore initially not being sent home with dogs. However the side effects for rapid withdrawal can be hallucinations, anxiety, and even seizures. So now the dogs are sent home with Trazadone, however there's no guarantee that prescriptions are being given and it is common for dogs to be returned within a few days for behavior issues.

The staff foster didn't communicate with me, and so when I learned that Hot Cocoa was back at the shelter, I invited Amber to join me in sitting down with her to go over the specifics of what happened. When I turned to Amber and asked her what her thoughts were after the clinic staff member had left the room, she didn't express concern about the person's mishandling/training skills. Instead, she was focused negatively on Hot Cocoa's behavior in response. I was baffled by the foster's escalatory behavior with the dog and Amber's reaction. After this, Amber and David expressed to me that they wanted to euthanize Hot Cocoa because he should have been able to tolerate the person's behavior towards him. At this point I went ahead and got a trusted trainer and licensed dog behaviorist, Josh Green from Barkside, involved. After working with Hot Cocoa he said, "There's nothing wrong with this dog."

Hot Cocoa then sat, again without training or an outcome plan, but also without being euthanized, for over another month, again in Winter, until I was able to place him in a foster home with a volunteer. A volunteer who, in fact, is "patient, has time to train him, [and] train him correctly." He "can tolerate some unwanted behaviors" and is "willing to work those behaviors out of him- redirecting behaviors rather than scolding" and doesn't yell at him; all of which were identified early on as what Hot Cocoa needs. In all, Hot Cocoa has spent almost an entire 4 months in Winter. Hot Cocoa has now been in this foster home for two weeks and is doing very well, the details of which are reflected in his foster's notes and videos, Joel Nelson. Joel echoed Josh's initial impressions and reported to me after his first meeting with Coco, "there is nothing wrong with this dog." In foster Hot Cocoa does not display aggression, resource guarding, or dog reactivity to small, large, female, or male dogs, and he is "the star" of his ZoomRoom obedience class he attends with five other dogs he sits side by side with. He is still considered "unavailable," is receiving training from his foster caregiver, and ultimately in need of a permanent owner that isn't the shelter.

I was told by dog management after the experience with his second foster that he was still alive because I was advocating for him. This means that Hot Cocoa would have had his life ended for being "unsafe" when it was clear to me that the fault was on humans not properly handling him including staff and fosters. If this preventable issue was addressed, *was believed* that it *could* be addressed, then Hot Coco could have had a chance to be happy and thrive much sooner. How many Hot Cocoa's have instead been brought to the behavioral board, a board that makes decisions based on Amber's initiating, and only requires three of five votes in favor in order to euthanize a dog the next day without transparency even amongst staff, and of which Amber and David are two of the five members, with fatal outcomes?

In summary, I am concerned about the well-being of the dogs at NHS and their needs being met. I am concerned with things carrying on the way that they currently are instead of longer term (five years or more) staff reflecting honestly. I am deeply concerned about the unnecessary euthanasias, low morale, under socialization and increased reactivity of dogs, and lack of implementation of standards of care resulting from Amber, David, and Heather's negativity. The many dogs that depend on NHS could otherwise thrive under the care of a more knowledgeable, professional, and compassionate team.

Sincerely,

James



Attention:  
 Greg Hall, CEO  
 NHS Board of Directors  
 Washoe County Regional Animal Services Advisory Board

Dear NHS Board of Directors and Mr. Hall,

I would like to start with an introduction. My name is KC Gardner, and I am writing to you all today to express my concerns over a pattern of what I believe to be incompetency of NHS dog staff that is leading to dog suffering, unsuccessful adoptions and dangerous situations for the public. I am not alone in these concerns. They are shared by my customers and other respected qualified K9 experts in our community.

I have worked in the breeding, training, handling and grooming industry since 1992, when I traded a legal career in the military for my dogs. I have been very active in fostering, personally, I have had dogs of my own that received their Canine Good Citizenship Certification with the AKC and Tricks Ribbons. As well as, Field Trials, Water Dog, Gun Dog, Splash Dog awards for competitions; ALL with positive reinforcement training. Building trust with my dogs, as opposed to hurting or scaring them into doing the behaviors I ask. I am a certified AKC CGC, CGCU, CGUC and TRICKS dogs Evaluator as well as ADPT nationally recognized. I train 40+ dogs DAILY, to transition into new homes and STAY there.

I work with multiple adoption/rescue groups to better the chances of these dogs in need, on many different levels. I donate MY personal grooming services (so dogs have a better chance of getting adopted). I donate my training time and time in my gym (so dogs that have been in a facility for extended stays have some zoomie time and TRAINING).

I donate free services so adoptive families have the resources to keep a shelter dog in their home for the life of the dogs. I give all adoptive families a free evaluation and a free private training to get off on the right foot and hit the ground running.

I DO WHAT I DO SO ADOPTED DOGS SUCCEED.

I currently regularly donate my time and facility weekly to local rescue groups and shelters, welcoming dogs and volunteers to use my facility and experience in providing enrichment and obedience training. I used to provide this service to NHS, but have elected to cease doing so based on my observations of the quality of NHS dog staff, NHS adoption practices and lack of basic level of care as recommended by the Association of Shelter Veterinarians (ASV) not provided to NHS dogs.

Here are my **FIRST HAND** experiences. There are countless others I have heard from my clients, community colleagues and advised on over the last year.

Last year one of your senior dog staff **David Smith** visited my facility, along with one of your brilliant handlers (Josh Green) to tour my facility and see what we offer our dogs and customers. While inviting him into "my home" I found him argumentative and with seemingly no knowledge of even the most basics of dog enrichment and psychology. He kept telling me he had a history of "training police dogs". I have NEVER spent 45 minutes arguing with a person over how to handle shelter dogs, until this visit. He had no understanding of dogs, except some crude and cruel protection and aversive handling of dogs. **NO** person should ever try to relate to a shelter dog using fear and pain, for any kind of training. This logic not only escaped him but frustrated him.

Even if he does have his alleged experience, which I question, this by no means qualifies him to work with shelter dogs, as their needs for health and success is quite the opposite of police and military dogs. Police and military dogs are trained to elicit stress and aggression using pain, fear and other aversive techniques. This is the exact opposite of what a qualified shelter dog staff member should be doing.

In addition, while anecdotal, the behavior of the dogs around David Smith tells me all I need to know. He doesn't seem qualified and has the wrong energy for vulnerable shelter dogs. Put simply, dogs don't like David. He doesn't have the passion or knowledge to see their success. He elicits stress and aggression in them.

At one point, he was on the leash with a shelter dog the volunteer brought to us, and **I personally removed the leash from his hand and told him he can not handle a dog that way.**

If **David Smith** is senior dog staff at NHS this represents a serious quality control and executive level management failure at NHS. If he is so inappropriately unskilled, how good can the people he trains and manages at NHS be? How could he even get hired to begin with?

In addition, last month **David** came in my store asking for more donations and more free training offerings for NHS adoptions. He was contentious and disrespectful to my Front Desk Supervisor, who ultimately felt for the dogs at NHS and donated a gift card. Based on his representation of NHS in our community, my concerns about NHS treatment of animals and the concerns and experiences of my customers with NHS, she made it clear that we no longer support NHS.

There are serious failures and incompetency in NHS adoption practices, such as misleading adopters about dogs, misdiagnosed behavior problems, and inappropriate matching of dogs and homes. This unfairly misleads adopters and most importantly creates dangerous situations for adopters and our community. Young large breeds adopted out to elderly couples, dogs who haven't been properly screened into home with resulting injuries to current dogs or people, a lack of dedication to finding the appropriate match for adoptive dogs, refusal to take the dogs back when these things occur, have resulted in damage to families, pets and most importantly the dogs being adopted out and marked as DANGEROUS. Often resulting in unnecessary euthanasias.

NHS practice of drugging dogs on Trazodone and Gabapentin is excessive and dangerous. The heavily drugged dogs the adopters meet in your meeting rooms is unfair and misleading. The public thinks they are getting a calm gentle dog, when in fact they are often getting a hyper aroused, understimulated dog with behavior problems. Then, NHS sends these dogs to their new home with no Rx refills or instructions on how to gently detox these vulnerable animals. Within 2 days the dogs are rapidly detoxing in a new and stressful environment. Often leading to damage of property, bites and potentially seizures.

The side effects for rapid detox of Trazodone

- Constipation
- Diarrhea
- Dry mouth



- Headache
- When stopped abruptly: agitation, [anxiety](#), sleep disturbance
- Low blood pressure
- Manic episodes
- Serotonin syndrome: hallucinations, agitation, delirium, coma, fast heart rate, muscle tremor, dizziness, stomach upset
- Increased risk of bleeding
- Hyponatremia
- Seizures

It is completely unethical and dangerous to send a heavily drugged dog with no prescription refills to a new home with well meaning, but unskilled adopters. This practice can and does lead to bites, for which the dogs ultimately pay more with their lives.

My customers and myself are busy people with many demands on our time, but it would appear that things have gotten so bad at NHS that we must finally say something. I am not alone in my refusal to financially support the NHS anymore. Many donors are frustrated at the lack of executive level and staff competency, and thus animal suffering, we all see. We are not alone in our concerns about the state of decline at the NHS over the last few years. I have witnessed some of the most amazing NHS employees, who's sole dedication was to the welfare of ALL these animals; lost and sacrificed due to politics and management's incompetence. Often these people have extensive animal care credentials and experience, take their concerns to NHS executive management and nothing is done. I do understand that the NHS truly has to be run like a business. However, it is imperative that businesses operate with knowledgeable, reliable, caring employees. In the case of the NHS, THIS IS NO LONGER THE CASE.

**I request the following from the NHS Board in writing:**

I encourage the board to do their due diligence and look into what actual qualifications David Smith has.

What verified qualifications does David Smith have?

Who promoted him to his current position and what qualifications and knowledge did they have to do so?

What ongoing evaluation and training standards is he being held to?

Is he responsible for training NHS dog staff?

Is he responsible for any behavior modifications or evaluations?

Why are so many dogs at NHS misdiagnosed with behavior problems that in my professional opinion are not accurate?

Who evaluates dogs and diagnoses their behavior?

What qualifications do they have and what evaluations standard practices are being followed?

Who is in charge of adoptions and dog meet and greets?  
What qualifications do these people have?  
Who is training them?

Why are so many dogs at NHS drugged on Trazodone and Gabapentin and sent home with no prescription refills?  
Is this still in practice?  
If not still a practice, when did this change and for how long was it a practice?  
What percentage of the total dogs in the NHS are currently on Trazodone and Gabapentin and how does this compare to nationally recognized standards and at what dosage?

There is a saying in dog behavior modification that “energy travels down the leash”. I believe the same is true in any organization. It is the responsibility of the NHS Board to ensure that executive management is knowledgeable and necessarily qualified to not only provide ethical and appropriate care for these animals, but also to be capable of hiring the correct, appropriately educated, caring staff.

KC Gardner  
Vice President  
PennyPhan Partners Inc  
Zoom Room Reno Summit  
C)775.409.6565

Good Morning,

My name is Megan Barrencea, I was the HR Director at NHS from April 2018- December 2021. I left the organization due to Greg Hall's poor leadership.

I was recently out of the country for two weeks when I received word about the Advisory Board meeting. I had asked my old NHS co-worker Nicole Theodoulou to submit the attached letter on my behalf, but received notice that I needed to submit my letter again to ensure that my concerns (that I reported directly to NHS BOD President Kris Wells on 07/25/2022) got to all the right people.

Please let me know if you have any further questions from me that I can help to answer.

Best

--

Megan Barrencea

Dear Kris and Fellow NHS Board Members,

I am writing this letter to you today to also express my concerns regarding Greg's leadership of NHS. I had never planned on writing this letter, and I am very sorry to be writing this letter to you. I know this puts you all in a very tough situation. However, it is for the welfare of the animals and the welfare of the people still trying to stick it out under Greg's leadership that have compelled me to share my opinions & own experiences under Greg.

As you know I worked very closely with Greg from day 1 until my departure 7 months ago. When Greg first started as the CEO he was excited to make a difference, he was willing to learn, and willing to listen. He would often over analyze and would not be able to make a decision unless pressed, which I often had to do. But since he was new to the role, animal welfare, and being a leader, it was easy to have patience, understanding & try to help him along. Believe me, since the organization had SO much leadership turnover in the past few years, NHS truly needed stability, which is why I was such a big supporter of Greg. We were all determined not to let him fail.

In the beginning Greg let me do what I needed to do to get the HR functions cleaned up at NHS- which as you know, that hard work brought turnover down from over 95% to below 50% the lowest in NHS history. This is still one of my greatest professional accomplishments. The only reason I left the Nevada Humane Society was because of Greg, and the negative impact his leadership had on my mental & physical wellbeing. Which I did share with him when giving my 3-week notice.

There are many reasons why I believe Greg should not remain in the CEO role at NHS, but below are a few:

- **Follow through**- Greg is notorious for saying he will get something done, he will even give himself a deadline, but rarely ever meets that deadline. You often have to press Greg 3-5 times to get him to do even the smallest tasks. He is a bottle-neck to the organization. Additionally, he

has very poor time management skills, often late for meetings, or misses them, because he “gets to talking with someone, or gets distracted.” He can not be relied upon, which causes frustration, dissatisfaction, and resentment

- **Micro-manager**- Greg has become a micromanager. He wants to be involved in every decision, every discussion, every interview, and does not know how to effectively delegate. This leads to things not getting done altogether, or things being very delayed because (either he does not trust his leaders to get it done, or he wants to be seen as the hero and do it all himself).
- **Trust**- Greg also does not inspire trust. Greg is notorious for over-sharing private information. This caused a lot of contention between myself as the HR Director, and Greg when he would be sharing confidential information with staff, volunteers, etc. This makes Greg a liability to the organization. Greg is also very adept at pitting people against each other and making sure that criticism is not directed at him but at someone else. Greg never accepts accountability or responsibility but will often find others to blame or point the finger at to explain why something went wrong or was not done.
- **Unprofessional Behavior**- When Greg gets stressed or agitated he will often lash out at staff. He will do this in group settings and meetings, which is not only extremely inappropriate, unprofessional and disrespectful, but further increases the frustration, dissatisfaction and resentment. He sets a bad precedent of behavior to everyone below him on how to handle conflict and when a labor market is this tight, it does not make good business sense to alienate your staff in that manner.

I know Greg has been attacked professionally and personally from the get go, by Bonney Brown, by Joe Hart, and by others. But I hope the Board can realize that 4 Directors leaving the organization in a 7-month timeframe is very alarming, and that should hopefully be a strong indicator to the Board that where there is smoke there is fire. While I do not agree with the tactics taken by Bonney, Carrie, and others there is some truth to their concerns. Greg does not have the business acumen, animal welfare acumen, or leadership acumen to lead this organization.

I fear that if Greg is left to continue poorly treating & leading staff in this way, then they will continue to leave, and then animals will suffer as a result. I hope you find this information objective & helpful.

Sincerely,

Megan Barrenchea

Nevada Humane Society  
Board of Directors & Stakeholders;

I realize I am one of many people affiliated with Nevada Humane Society (NHS) who have come to you with concerns about Greg Hall's leadership and the negative impact it is having on both the staff and the animals. I truly hope that you will take the time to review the issues I've witnessed and experienced and act in the best interest of the organization. Please know that I love the people and pets NHS serves and sharing the negative experiences I had during my time at the organization is very difficult for me.

In addition, based on his previous behaviors, and the disparaging and untrue statements he has made about me to current NHS staff members, I am fearful of being retaliated against by Greg Hall. However my desire for the animals and people served by NHS to see an improvement in the conditions at NHS outweighs that concern and I very much hope that sharing my experiences can help bring about positive change for the organization.

Below is a list of issues related to Greg Hall's performance as CEO of NHS and his persisting inability to perform his job duties. The animals, staff and reputation of the organization are suffering greatly on account of these ongoing issues and the toxic culture he has created makes it impossible for the organization to retain talented leadership staff.

**Inability to maintain leadership staff:** Greg Hall is incapable of maintaining a strong, effective leadership team due to his inability to meet deadlines, complete tasks, delegate, and his unprofessional behavior. Greg Hall focuses all of his efforts on retaliating against anyone he feels disagrees with, or challenges him in any way. This behavior has resulted in the loss of many highly competent, skilled directors and managers and has ultimately negatively impacted NHS.

Below are specific examples of leadership and staff departures I witnessed during my time at NHS:

- Five directors left within a one year time frame
- Two COOs were hired during my three year tenure at NHS, one for eight months and the other for only four months
  - Greg Hall has since done away with this position entirely rather than attempting find someone who can work with him in this capacity
- The entire marketing, development and events team with the exception of myself left within a one month period in 2022, and they all did so due to a lack of confidence in Greg's ability to lead the organization, his poor treatment of staff, and frustration with his lack of maintaining disease control and animal care best practices

Many former employees of NHS who are no longer with the organization have raised concerns to the NHS Board of Directors related to Greg Hall specifically within the last seven months including those listed below:

- Megan Barranchara, former HR Director -submitted a written, formal complaint

- Chelsea Sladek, former Adoptions Manager submitted a written, formal complaint
- Kristen Saibini, former Development Director and former Board Member -shared a verbal complaint with Board President Kris Wells
- Nicole Theodoulou, former Marketing & Communications Director -shared a verbal complaint with Board President Kris Wells

Prior to that, Diaz Dixon, Bonney Brown and Carrie Brown have submitted complaints about Greg Hall to the NHS Board of Directors.

If at any point, Greg Hall feels that someone is criticizing or challenging him in any way, he focuses his time and energy on retaliating against the person in question (pushing them out of the organization ultimately) rather than doing his job. After three years working under Greg Hall I believe he intentionally keeps specific leadership positions unfilled to justify his inability to do his job, based on the need for him to complete the duties of unfilled director and manager positions.

In addition, Greg Hall has turned three essential director roles into manager positions after terminating or forcing out the previous leadership team members occupying those roles. The roles are; HR Director, Development Director and Marketing & Communications Director. By making these organizational changes, Greg Hall is pushing out highly-qualified, skilled leadership team members and hiring less-experienced, less-skilled people to fill these roles at a lower rate of pay. The organization will suffer greatly from these changes -specifically in the fundraising, marketing and event planning areas.

**Unprofessional treatment of staff:** In July of 2022, Kristen Saibini (who at that time was the Development Director) and I met jointly with Greg Hall to share that we were at that time extremely concerned about the lack of management staff, lack of staff oversight and the egregious lack of animal care within the shelter. At this time NHS was without managers and/or directors to oversee the adoptions, volunteer, foster, and community cats programs. NHS was also short staffed in the clinic at this time. We proposed to Greg Hall that he allow the managers and directors still employed at NHS to stop doing certain aspects of our jobs and take on operational and animal care related tasks to ensure that the animals and staff stay healthy, safe and not burned out from compassion fatigue. Greg Hall reacted very poorly to this recommendation, became extremely defensive and met with Kristen Saibini and I separately following this meeting to let us know he would not be implementing our proposed solution. At this time Greg Hall behaved in an extremely defensive, disrespectful manner that certainly did not create an atmosphere where we felt our ideas were welcome or appreciated. When asked how he planned to ensure the shelter continued to run effectively, Greg Hall had no proposed solution, and again become defensive and disrespectful upon feeling challenged. Kristen Saibini was so offended by Greg Hall's behavior towards her and lack of action to keep the animals in the care of NHS safe, she quit. This was a tremendous loss as she was a very talented, dedicated and successful Development Director, and genuinely an asset to the organization. This type of behavior and staff treatment is inappropriate and highly unprofessional. Greg Hall claims to

have an “open door policy” however concerns, questions and proposed solutions are frequently met with this type of response from Greg Hall.

**Misogynistic treatment of female staff:** I can personally attest to having been in many situations with Greg where I was treated differently than male employees. Overall male employees are given a great deal more respect and Greg holds them less accountable than female employees. In addition, Greg does not take advice, feedback or concerns from female employees as seriously as he does from male employees.

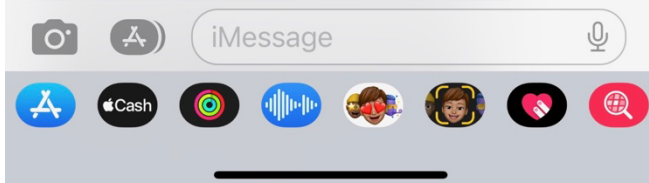
In addition to my personal experience, I received the text messages below from a female NHS staff member working in the NHS clinic. Sadly this employee was too fearful of retaliation from Greg Hall to speak up within the organization, but was so upset that she reached out to me for advice on who to contact. These correspondences are provided below for your review, but have been cropped to protect this employee's name.

1.

I hope everything with you is going well! We miss you lots here  
♥

I just had a question cause I know you were on the board here for a while. How does someone go about filing complaints about the CEO? Many, many people that I have talked to, myself included, are at a lost on what to do about the way things are going. No one feels heard and many feel he is a misogynist, as he basically laughs in our face and disregards any medical knowledge given from a woman about any patients!

I love it here so much and of course don't wanna leave, but I'm not really comfortable working for a man who doesn't respect not even just me as an employee, but a medical professional.



2.

you. Hope things are going well and it saddens me to hear about how things are at NHS. I would recommend any employees who have concerns get them to the board president, Kris Wells, and the board VP, Rita Eissman. The board is Greg's boss. I would suggest any employee also ask Kris and Rita to keep the details they send confidential for fear of retaliation. I'm sorry it's like this. The staff and animals deserve so much better.

3.

This is extremely helpful! Thank you so much ♥

You really brought so much joy to this place between fostering, volunteering and working here! I never got a chance to tell you since you were gone so suddenly, but it's been amazing working with you! 😊



**Wrongful termination:** In December of 2023 Greg Hall verbally informed me that he would be promoting me to Chief Marketing Officer and giving me a \$2,000 annual raise. Upon returning from having taken one flex day off (a standard practice for overtime worked) I was immediately terminated for “incorrectly utilizing the time keeping system” to track this flex day off. Greg Hall personally instructed me and the entire marketing and events team in March of 2022 not to utilize the official timekeeping system (Paycom) for flex days as our team was given special permission to use flex days outside of the pay period the overtime was worked. This special accommodation was made due to the very busy schedules marketing, development and events team maintain during event season, making it impossible to utilize flex days within the pay period the overtime was worked. Due to this special accommodation, Greg Hall requested that we not log our flex days in Paycom as specified in the NHS Employee Handbook, but rather keep track of them in our personal outlook calendars and to inform our managers via email. A practice we all followed consistently since receiving that verbal instruction in March of 2022. Greg Hall literally fired me on paper, for something he personally instructed me to do after promising me a raise and promotion just one week earlier. Prior to being terminated, I had never received any corrective action, always received exemplary performance reviews and the issue I had been terminated for had never been discussed with me, despite the fact that I’d been following the timekeeping process as instructed by Greg Hall since March of 2022.

I am happy to provide additional details on my wrongful termination and mistreatment by Greg Hall, as I have outlined this experience to an employment attorney and the Unemployment Department in an effort to better understand my rights and refute this unfair treatment.

It is my belief that I was fired in retaliation for voicing my concerns about the state of the organization and sharing with Greg Hall that things had gotten to a point where I was starting to feel uncomfortable having my name associated with NHS despite how much I love helping pets and people in our community through that work. Now that I have been terminated, it is easy for Greg Hall to dismiss my concerns as anger from a disgruntled former employee. I assure you I am sharing my concerns out of a genuine love for the organization and its mission.

**Exposing the organization to risk:** The lack of time without an experienced HR professional was detrimental to the organization, caused a significant increase in work for managers and directors and put the organization at great risk. During the many months NHS was without a qualified HR professional, staff had no resource to share concerns, complaints and personal matters that affected their work.

**Illegal behavior:**

Greg Hall shared with me on multiple occasions that he felt another employee was on drugs and mentioned this employee by name. Greg Hall had no proof of this and sharing this suspicion with one of this employee’s peers (myself) was highly unprofessional and illegal. I am happy to be more specific in a private setting but do not want to further damage this former employee’s reputation beyond what Greg Hall has already done.

In September of 2022 I was experiencing a very serious and personal health issue. At that time there was no experienced HR professional in place at NHS. During this time there was only a part time HR assistant who was brand new to the field and working part time from Florida. Greg Hall intimidated me into sharing the details of this matter with him, despite repeated requests I made not to discuss this very private information.

Greg Hall regularly makes disparaging comments about former NHS employees, Washoe County Regional Animal Services staff and Northern Nevada SPCA staff. Greg Hall has made disparaging and untrue comments to me personally about; Diaz Dixon, Brenna Rose, Megan Barrenchea, Lisa Feder, Jill Dobbs, Art Westbrook and Shyanne Schull. Since being terminated from the organization, Greg has told current employees I am no longer with the organization for something “egregious” and has instructed them not to speak to me.

**Inability to adhere to standard disease control and prevention best practices:** The lack of leadership team members and staff oversight I mentioned previously (in the inappropriate treatment of staff section) ultimately led to the Panleukopenia outbreak that affected and killed NHS shelter cats. This outbreak was avoidable and it is my opinion that it occurred due to a lack of much needed managerial oversight, lack of experience and lack of accountability.

Greg Hall made a public statement on KRNV News 4 Reno that “The biggest lesson we learned is the importance of making sure every animal that comes into the shelter is vaccinated.” This is a truly embarrassing statement that makes the organization appear unprofessional and the animals at risk as a result.

Greg has consistently made decisions that have caused animals to get sick, staff to be overworked unnecessarily and the organization’s reputation to suffer. Sadly this is not unusual, nor is the lack of transparency about these issues when they occur.

**Consistent inability to provide required reports to grant funders:** Greg Hall is consistently late with the required reports to grant funders, causing NHS to be out of compliance and ineligible for additional grant opportunities. This gives NHS a negative reputation in the industry and prohibits the organization from procuring additional grant funding while this requirement remains incomplete and late.

The message below was sent to me on LinkedIn in February, from the Mansfield Endowment Fund contact working with NHS out of desperation as she was unable to receive a response from Greg Hall despite numerous attempts.

- Elizabeth Grimm sent the following message at 10:37 AM

[Elizabeth Grimm](#) (She/Her) 10:37 AM

## **Impact story**

Hi Nicole, Nice to meet you! I'm working on an impact story for the Community Foundation of Northern Nevada's 25th anniversary. I've been trying to reconnect with Greg to get a quote on the impact of the Mansfield Endowment Fund on your organization and was hoping you could help me. Here's what I know: The Mansfield Endowment for the Benefit of the Humane Society was established in 2005 and has since granted nearly \$2.8M to the Nevada Humane Society. The fund primarily provides veterinary care and supports cat adoption events. It has even been used for the Cat Action Team, who supports initiatives like neutering cats and returning them to the community. I'm hoping you can help me with a quote about the impact of this generosity and possibly a picture or a sign honoring the Mansfields (if you have one) or from a cat adoption event that they supported. Thank you! -Elizabeth Grimm

- Nicole Theodoulou, PMP sent the following messages at 2:19 PM

[Nicole Theodoulou, PMP](#) (She/Her) 2:19 PM

Hi Elizabeth, I'm sorry to hear that you are having trouble reaching someone at Nevada Humane Society. I left the organization in January so I'm afraid I'm not much help. During my time at NHS I was very grateful for the funding your organization provided and I do hope you are able to reach someone who can help you. Sincerely, Nicole

**Failure to utilize funds procured for projects / programs within the required time periods:**

- NHS was awarded \$100,000 from Maddie's Pet Project for disaster relief after the Caldor Fire
  - There was a one year period allotted for these funds to begin to be utilized and no progress has been made in utilizing them or even planning to
- NHS was awarded \$10,000 from Petsmart for disaster relief after the Caldor Fire
  - No progress has been made in utilizing them or even planning to
- \$350,000 was procured by former CEO Diaz Dixon from donors for the development of an NHS dog park
  - None of these projects have been started on.
  - The disaster relief funding was awarded over a year ago and no additional training, supplies, vehicles or plans have been developed as required in the grant agreement. The Carson City Shelter Manager attempted to make progress here, but without the support of the CEO no progress was made.

**Inability to work with leaders at other animal welfare organizations:** Greg Hall's inability to work collaboratively and effectively with other animal welfare organizations in our area is a huge detriment to NHS. The leaders of these other organizations do not trust or respect Greg Hall and as a result, NHS is often left out of valuable community events and opportunities that would benefit the organization to participate in.

Greg Hall continuing to serve as the CEO of Nevada Humane Society despite the impacts of his actions and his lack of ability to lead the organization effectively is very unfortunate for the people and pets being negatively affected. I sincerely hope for the sake of the animals in the care of NHS, the staff there and the community, that Greg Hall is removed from his position as CEO.

Sincerely,  
Nicole Theodoulou

I am 79 yrs old, use an electric scooter due to severe degenerative disc disease (now all discs are herniated) and in 2021 I was in my 11th year of "non-smoker" COPD, Chronice Bronchitis & Asthma & am reliant ONLY on RTC ACCESS bus service for any travel.

#### Background:

In July, after a tragic death by Coyote of my dearest Part Maine Coon AUGIE, I came to NHS to adopt a kitty to comfort & be comforted by. AUGIE had been a large 25 lb cat!! I found a gentle sweet little 4 lb kitty name CRACKLES who needed a little medicine each day. I took her as a "foster" to eliminate any medicinal costs for myself. I even found there was an ear cream substitute to give her, with less difficulty for all. Unfortunately, in my grief for AUGIE, I thought I couldnt warm up to such a tiny kitty. I was drastically mistaken and a day after I had requested she return to NHS, I was mortified and wanted her back. I believe someone named Morgan (?) told me CRACKLES had already been adopted by one of the technicians. THEN, I saw her photo up on the website as "ready for her new home"! I called to check. I received an entirely different story. At this new "story" I began to seriously wonder "what really happened to poor CRACKLES!" I had to let this go finally. Could NOT get a definitive answer. And I must admit I became quite suspicious of different "stories" about CRACKLES final outcome.

#### SECOND ATTEMPT AT ADOPTION:

So I came back to adopt another larger cat and ended up finding one at end of day - about 5:30. I pleaded the staff to process the paperwork because my travel is so difficult. After all work had been completed, one staff person noted: "Oh! THIS cat had just been surrendered because it bit the new parent and slashed her! We were supposed to have him on hold while we observed him ourselves for trauma or whatever!! " I decided I could handle this. Had experience in Los Angeles and was confident. WRONG! This poor kitty was "savage"! I returned him immediately!

#### THIRD ATTEMPT AT FINDING MY NEW KITTY:

Now, when I came back to adopt, a third time, "Chelsea" refused to let me go past a few steps inside the doorway: saying:

"You are banned from adopting from NHS!"

She physically blocked me from moving forward with her body. She did not touch me, but stepped in front of me so I could not go forward! I was shocked & terribly upset. I asked to speak with the Director, Greg Hall. He asked about the latest cat experience, and said the board had had a meeting and I was brought up as a person who should be banned from attempting to adopt from NHS! The alleged reason given to me was they had "heard" that I was speaking badly of how NHS was now handling things! This was a complete fabrication! I used to volunteer at NHS in around 2004, 2005! I supported NHS with all my Animal Rights Activist heart!!

Disabled, 77 years old, on oxygen: Now, I had to wait in hot sun for my bus. I called RTC ACCESS could they send a bus sooner -- no, they couldnt. I waited in hot sun in my scooter. Tried to lie down on the grass when my very bad discs started to hurt too much. At one point Chelsea dared to come out and asked me to come inside to wait because the appearance of me waiting outside was making people uncomfortable. I Refused and Must Admit Was Rude to her at that point!!

Finally, a complete stranger, a nice young man who'd been delivering something in his pick up truck -- offered to drive me and my scooter home!!!

I was rescued!!

What type of people are heading up the administration of NHS now?? I finally had to use two friends to pretend to adopt "CONNOR" whose photo showed how large a cat he is!! I even found a baby kitten from a family whose cat had not been spayed! For CONNOR to have a little sister, MOLLY!! They fell in love as soon as she gently approached him and quickly gave him a little lick on his face!! I have a very heavy heart that these other people are Not Really Committed in their Hearts to both the animals & humans NHS is here to serve!!

I actually was do traumatized from that experience. I seriously began questioning myself -- was I starting to appear "weird" or a little "dementia" starting? I went to my DR (my primary care) and he knew me -- & said: no, NOT-- YOU!! You really just experienced another type of masked abuse!!! It should never have happened to you!!!

Please, do not permit these phony people to continue to "abuse" anyone or any possible poor animal -- whatever really happened to CRACKLES??

Thank you for investigating. Our entire "no kill" Community deserves better!!

Sincerely,

Fran V. Aperones, J.D.