



Intake Policy

1. **Intake.** Intake is when The Community Cat Alliance (CCA) takes into its custody a cat or kitten. Intake does not include the cats that we Trap, Neuter, and Return immediately, i.e., the day or so after, their spay/neuter procedures.
2. **Authorized Intake.** The Community Cat Alliance is a TNR organization and only does intake of cats or kittens from colonies where we have a TNR request that is not closed. ¹
 - a. **TNR Colony Kittens.** The CCA Foster Coordinator is the only person authorized to approve intake of colony kittens for CCA. This is so that the Foster Coordinator can ensure that CCA has room with our foster care providers and that we have finances adequate to support the medical needs of the animal(s). CCA may intake kittens from sites with a TNR request that are under the age of 8 weeks dependent on available fosters. Any kitten over the age of 8 weeks that is trapped shall be returned to its colony following spay/neuter and vaccinations, unless the foster coordinator has determined that the kitten is adoptable. The Adoption Coordinator is the point of contact for our foster partners.
 - b. **Injured TNR Colony Cats.** The Medical Coordinator is the only authorized person who can approve intake of injured cats for CCA. This is so that the Medical Coordinator along with the Foster Coordinator can ensure that CCA has room with our foster care providers and that we have finances adequate to support the medical needs of the animal(s). Once treated, the cat will be returned to the colony.
 - c. **Friendly TNR Colony Adult Cats.** Friendly TNR Colony cats include those dumped or reside at a TNR colony and that behave like a domesticated cat. Friendly cats should be funneled to a partner rescue organization for intake. Examples of these organizations include the Winchester Area Society for the Prevention of Cruelty to Animals (SPCA) and Dakota's Dream Animal Rescue (DDAR).
 - d. **Non-Colony kittens or cats.** All requests from the community or CCA volunteers to rescue animals from non-TNR colonies need to be funneled to partner rescue organizations. CCA recognizes that partner organizations may be unable to rescue all the animals needing help and this creates a hardship on our field team, but we are trying to remain focused on TNR and may need to limit intake due to foster care and financial constraints.
 - e. **Cats and Kittens at Completed TNR Colonies.** CCA has been doing TNR for nearly a decade and our volunteers care independently for cats at colonies that are no longer the subject of "open" or active TNR efforts. These are "completed" TNR colonies.
 - i. For colonies where CCA has completed the TNR request and that are being fed/maintained by caretakers (including people that also volunteer for CCA), the caretaker must create a new TNR request for cats or kittens from these

¹ An Open TNR request is a status set in Shelterluv by the TNR Coordinator. It indicates that we are trapping or planning to trap at the location.



colonies to qualify for intake by CCA. This enables CCA to maintain accurate record keeping in Shelterluv.

- ii. Caretakers should contact the CCA TNR Coordinator to check the Shelterluv system and verify if a new TNR request is required.
- iii. Once a TNR request is in the system, the cats are considered for intake as specified in this policy.

3. **Unauthorized Intake.** Any CCA volunteer that intakes a cat or kitten without approval by the CCA Foster Coordinator or the Medical Coordinator shall accept full responsibility for the animal. This includes the fostering, care, and financial responsibility for the cat or kitten. It is not considered a CCA responsibility or intake.

4. **Intake Exam.**

- a. CCA does not have access to on-demand veterinary services, nor does CCA have the financial capacity to schedule an office visit for a veterinarian to exam each animal that we intake. To provide the highest level of care possible, CCA shall do an intake exam for each cat or kitten that we intake and enter them into our Shelterluv system. In addition to the colony location, this shall include the following:
 - i. Photograph
 - ii. Physical exam to document the temperament, age, gender, weight, the condition of the body, eyes and ears, and any obvious injuries.
 - iii. Treatments such as
 1. Initial deworming with a product such as Pyrantel and Safeguard.
 2. Flea and tick killer (if available).
 - iv. Vaccination to include initial FVRCP vaccine (if healthy and at least 4 weeks old).
 - v. Scan for a microchip to identify the owner of friendly or abandoned cats.
- b. Any cat or kitten that has medical issues or injuries shall be scheduled for an examination by a Doctor of Veterinary Medicine as soon as possible, which may include a trip to an emergency veterinary clinic.

5. **Foster Care.** Cats and kittens that CCA intakes shall only be fostered by CCA volunteers that have signed and returned a CCA Foster Care Agreement. The agreement shall indicate that a CCA Foster Care Provider has never been convicted of animal cruelty, neglect, or abandonment. All signed agreements shall be returned to and filed electronically by the CCA Secretary.

6. **Return of Cats or Kittens to Colonies.** Any cat or kitten that CCA has taken into foster care with the intent of adoption that does not adequately socialize within a two-week period, shall be released back to their colony so long as the animal is healthy, has been spayed/neutered, and vaccinated.



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7. **Fundraising.** CCA has limited financial capacity. To minimize the impact of intake costs on our TNR mission, volunteers shall be required to coordinate with the Fundraising Director and Outreach Coordinator so that we can fundraise for kittens or injured animals that we intake. This means sharing photographs and stories about litters and/or animals to support fundraising.
 8. **Authority to Halt Intake.** The CCA Foster Coordinator and TNR Coordinator shall communicate regularly with CCA Treasurer to discuss the demands for intake and foster care and the financial status of CCA. The Treasurer and/or CCA Board of Directors has the authority to halt intake at any time based on financial considerations. Additionally, the Medical Coordinator may halt intake, in consultation with the board, if medical circumstances merit it.