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| **Cat Care Plan** |
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| **Pet Name:** |
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| **Room:** |
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| **Date completed:**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Completed by:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Review date:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Photo of Owner and Pet**

**General information:**

* Breed:
* Sex: M/F Desexed: Y/N
* Colour:
* DOB:
* Cat registration provided:
* Microchip number:
* RACF approved admission date:

**Emergency details:**

* Emergency contact details:
	+ Guarantor:
	+ Mobile:
	+ Landline:
* Veterinarian details:
	+ Veterinary Hospital/Service

Address

Telephone

**Pre-admission assessments:**

* Physical assessment date:
* Behavioural/Temperament assessment date:
	+ Pet training or courses:

**Veterinary care:**

* Annual Vet visits – date last visit:
* Vaccination requirements, dates and evidence:
* Worming schedule (3 monthly), dates and evidence:
* Flea treatment schedule (3 monthly), dates and evidence:

**Cat specifics:**

* Pet temperament/personality:
* Pet likes:
* Pet dislikes:
* Pet general health:
* Pet illnesses and care required:
* Additional information

**IPC and safety:**

* Pet alert signage:
	+ RACF entry points:
	+ Residents’ bedroom door:
* Safety:
	+ Pets are discouraged from licking residents, health care workers or visitors. Pets are not kissed or brought close to a person’s face.
* IPC:
	+ Hand hygiene (liquid soap and water or alcohol-based hand rub (ABHR)) is performed after contact with a pet or pet items and before preparing or eating food, drinking or any other hand to mouth activities. Washed hands are dried with disposable paper towel and where ABHR is used the hands are rubbed completely dry.
	+ Residents are assisted where required.
	+ Signage (laminated) is available at the point of hand hygiene to instruct in the correct steps to wash or ABHR.

**Grooming:**

* + Claw review and cutting requirements:

**Food and feeding**

* Designated feeding area:
	+ Location:
	+ Cleaning and pest free requirements:
* Pet water:
	+ Fresh water daily:
		- Responsible:
		- Time re-filled:
	+ Water bowl cleaning:
		- Responsible:
		- Dedicated water bowl washed (detergent and water) daily (not attended at hand washing sinks or where food is stored or prepared for human consumption):
* Pet food:
	+ Commercial pet food (no raw meat or chews) only.
* Moist food single serve brand:
* Dry food brand:
* Feed times:
	+ Responsible:
	+ Morning:
	+ Night:
* Cleaning bowls and utensils:
	+ Dedicated food bowl and utensils washed (detergent and water) after every use not attended at hand washing sinks or where food is stored or prepared for human consumption):
		- Responsible:
* Food storage:
* Designated area (not in residents’ fridge or near other human consumption items or utensils) location:
* Moist pet food unused is discarded immediately or if not eaten in 4 hrs is discarded - in general waste
* Dried food is stored in a sealed labelled plastic container – away from human foods:
* Catering safety and IPC:
* Persons must not come between pets and their food
* Hand hygiene is performed after handling pet food, feeding animals and cleaning bowls/plates and utensils

**Waste and litter**

* Responsible:
* Waste management system type:
	+ Litter tray
	+ Litter box
	+ Self-cleaning automatic litter box
* Designated location:
	+ Resident’s room
	+ Outdoor area
* A scoop and disposable waste bag are used to collect/remove urine/faeces. Bagged waste is disposed in an external (labelled) general waste bin.
* Litter tray or box daily removal of urine/faeces:
	+ Time:
* Weekly litter tray or box cleaning/disinfection and litter change:
	+ Weekday (and as required if visibly soiled):
* Cleaning and change of litter in self-cleaning automatic litter box (manufacturer guidelines):
	+ Duration:
	+ Date:
* Safety and IPC:
	+ Pregnant women or those with allergies, do not manage pet body products
	+ A scoop and disposable waste bag are used to collect/remove faeces.
	+ Bagged waste is disposed in an external (labelled) general waste bin.
	+ PPE (gloves and aprons) for handling or managing anything contaminated with faeces or urine.
	+ Hand Hygiene is performed pre donning and post doffing PPE.
	+ If a person comes into direct or indirect contact with faeces, urine, vomit or saliva, remove soiled items and wash the area of body/hands with soap and water.

**Sleeping/resting**

* Location that cat rests (i.e. resident bed, windowsill):
* Location that cat sleeps (i.e. resident bed, carry container, cat bed):
* Cat bedding or clothing cleaning:
	+ Responsible:
		- Weekday allocated for cleanliness and insect infestation check:
		- Date allocated for monthly machine wash with detergent and hot water or ozone
		- Process: i.e. items can be taken offsite to laundromat, domestic machine or place in dissolvable washbag for laundering at RACF:

**Environmental controls:**

* Environment cleaning/disinfection process within facility, resident room and where pet is frequently taken (consideration to fur/hair)
	+ Responsible:
* Routine
* Consideration to outdoor areas
* Consideration to spill management
* External provider undertakes vermin/pest control management throughout facility - frequency:
	+ Providers name:
* Identified insect infestation management:
	+ Have the insect identified for correct management by the veterinarian and licensed pest control operator:

**Secure carry container:**

* Kept location of cat carry container:
* Container cleanliness:
	+ Responsible:
		- Weekday check for insect infestation and clean:
		- Process and responsibility for cleaning:
		- Date for monthly container bedding machine wash:
		- Process and responsibility for washing: