**Attachment A – Medical Approval Rubric Sample\***

Community Programs Manager, Deputy Director, or Director may edit rubric as appropriate

**Qualifying factors:**

* Owner has not received assistance from PACC for this pet in the last 12 months
* Owner is not requesting assistance for a condition specifically not covered on Common condition, clinic, and funding guide

**Risk Factors:**

***Intake***

From 85705, 85706, or 85713 zip code *5 points*

Owner is facing/experiencing homelessness *5 points*

From 85711, 85745, or 85746 zip code *3 points*

From 85712, 85714, 85719 *1 point*

***Income***

From 85705, 85714, or 85719 zip code *5 points*

Owner is facing/experiencing homelessness *5 points*

From 85706, 85711, or 85716 zip code *3 points*

From 85701, 85712, or 85713 zip code *1 point*

***Breed:***

Pet is a large dog (estimated 50lb or more) *5 points*

Pet is Chihuahua or cat 3 *points*

**Need:**

***Medical***

Critical (Immediate) (Hospital) *8 points*

Urgent (within 48 hours) (Urgent Care) *5 points*

Required (48 hours – 2 weeks) (PCP) *3 points*

Elective *0 points*

***Immediacy***

Owner came to PACC to surrender or *8 points*

called for surrender appointment

**Referral Type**

Owner met through APS activity *8 Points*

outreach efforts, or referred by partner

organization

Partner is any community based orgs.

human social service agency,

or as determined by a supervisor

Referred by vet clinic *5 Points*

Referral comes FROM clinic

***23 points or more is approved***