



## Delaware Office of Animal Welfare Animal Shelter Inspection Report

**Facility Name:** Brandywine Valley SPCA- NC

**Street Address:** 600 South St. New Castle DE 19720

**Phone:** 302-516-1000 **Email:** wfenstermacher@bvspca.org

**Date of Inspection:** 11/2/2021 **Time:** 1:15  a.m.  p.m.  
**Name of Inspecting Official:** Natalie Titus, DVM, Capt Rebecca Stratton  
**Person Interviewed:** Jennifer Jenkins/ Rachel Golub ; **Title:** Staff / Director of Programs  
**Type of Inspection:** Routine **Complaint # (if applicable):** [Click here to enter text.](#)  
**Inspection Results:** Approved

This inspection is based on 16 DE Admin. Code 4501 promulgated under the authority of 16 Del. C. §3008 F.

AREA TO BE INSPECTED	REGULATIONS	C	NC	N/A
<b>Shelter Care and Treatment – 16 Del. C. §3002 F</b>				
a. Disease control and health care program by a veterinarian: Dr. Sheri Wood		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Written veterinary protocols	8.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Vaccinations	8.2-3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Examination within 72 hours	8.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Veterinary care/medical treatment provided		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Designated treatment and isolation and/or quarantine areas		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Animal Adoption, Recovery, and Rehabilitation – 16 Del. C. §3003F</b>				
a. Business hours	9.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 72 hour stray holding period		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Animal recovery procedures				
1. Checking for identification on strays		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Lost/found lists; post on website	9.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Five-day recovery period implemented		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Maintains and utilizes rescue registry		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Health certifications on imported animals		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Euthanasia in Animal Shelters – 16 Del. C. §3004F</b>				
a. Five-day hold period		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Conditions met-no reasonable alternatives		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Animal care/control manager authorization		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Health/behavior-veterinarian determination		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

e. Euthanasia technician certification on file	6.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Method and procedures				
1. Euthanasia area and equipment	10.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Current policy and procedure manual		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Persons administering euthanasia	10.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Proper authorization	11.7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Method and procedure	11.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Verification of death	13.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Record Keeping and Reporting – 16 Del.C. §3007F</b>				
a. Animal Statistics	14.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Quarterly report on website	14.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Annual Report	14.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Animal records complete	14.3-14.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**REMARKS:**

**CORRECTIVE ACTIONS:**

**NUMBER OF ANIMALS AT THE FACILITY** *(List species and numbers.)*

Species	No.	Other Species	No.	Other Species	No.	Other Species	No.
Dogs	85	Rabbits	2				
Cats	77						