

d. Severe health/behavior

Herman Holloway Campus – Carvel Building 1901 N. Du Pont Highway New Castle, DE 19720 Telephone: 302-255-4620; FAX: 302-255-4621 DHSS_OAW@state.de.us

Delaware Office of Animal Welfare Animal Shelter Inspection Report

Facility Name BVSPCA Georgetown Campu	18				
Street Address 22918 Dupont Blvd, Georgel	lown DE	1994	7		
Phone 302-856-6361 Fax				Ema	IL.
				o.m.	Completed: 1:10 a.m.
Name of Inspecting Official: Dr. Stoltzfus	; Cpt. St	ratton	1		
Type of Inspection; □ Routine 🗹 Re-	Inspectio	on	□ Со	mplain	t #: 2017-001
Inspection Results: & Satisfactory	Unsatisf	actor		Cond	
This inspection is based on 16 DE Admin. C			-		
C ≃ Compliant N	IC = Not (Comp	liant	N/A	A= Not Applicable
AREA TO BE INSPECTED	REGS	C	NC	N/A	COMMENTS
Facilities – 11 Del. C. §1325					
a. Proper Shelter	T			1	The state of the s
b. Food and Water		4		1	1 1 1 1
c, Sanitary Conditions		-		1	
Shelter Care and Treatment - 16 Del. C. 53002	ž F		e to vene		Province Control of the Control of t
a. Disease control and health care program				1	
by a veterinarian: Dr.	ļ			✓	
b. Written veterinary protocols	8.1			1	
c. Vaccinations	8.2-3	1			The same of the sa
d. Examination within 72 hours	8.4			1	N SIE EXTRU
e. Veterinary care/medical treatment provided		1			
f. Designated treatment and isolation				1	
and/or quarantine areas Animal Adoption, Recovery, and Rehabilitation	167		62002		
a. Business hours	9.2	-	93003	F	Trus.
b. 72 hour stray holding period	9.2	1			
c. Animal recovery procedures		-		✓	Comment of the second of the s
Checking for identification on strays				1	CHANGE CONTRACTOR OF THE CONTR
Lost/found lists; post on website	9.1			1	
Five-day recovery period implemented	3.1			1	The second secon
d. Maintains and utilizes rescue registry				✓	
				/	
e. Health certifications on imported animals Euthanasia in Animal Shelters – 16 Del. C. \$30	045			1	
	U4P				I
a. Five-day hold period	100			✓	
b. Conditions met-no reasonable alternatives	20.00			1	
c. Animal care/control manager authorization				1	LATET TO

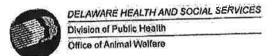
1. Veterinarian determination	f -	- X	1	
e. Euthanasia technician certification on file	6.3		1	
f. Method and procedures			1	The state of the s
1. Euthanasia area and equipment	10.2		1	
2. Current policy and procedure manual			1	
3. Persons administering euthanasia	10.1		1	
4. Proper authorization	11.7		1	
5. Method and procedure	11.0		1	
6. Verification of death	13.0		1	- C. 4
Record Keeping and Reporting - 16 Del.C. §3	007F	CIESTON C	Sypa With	
a. Animal statistics	14.1-			
Quarterly report on website		1	E 75	The state of the s
2. Annual Report	,	2	1	
b. Animal records complete	14.3	1		

ADDITIONAL OBSERVATIONS/EXPLANATION:				AP 9 2511111
		7.57		
medical records complete, all vaccinations appropriately recorded				
2) stallstics up to date			J. 16 44 44	
		inide lists		
and the second s				V. 12.
			- F-14	
The state of the s				
Company Compan				
		<u> </u>		
and the same of th	40			
	and the second s			
CORRECTIVE ACTIONS/COMPLIANCE DATE:				
		+ 1/G	20124	
The second secon	\$ 100 Mg 100	12-10-11-12		
			77	
				(4=)

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

Species	No.	Other Species	No.	Other Species	No.	Other Species	No.
Dogs		A 101110-000		5 W A			
Cats				Signature of Insp			

Copies: Original to Shelter. Copy to Depware Office of Animal Welfare.



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reet Address 22918 Dupont Blvd, Georgeton	wn, DE	19947			The state of the s
none 302-856-6361 Fax				_Email	
The state of the s	12:55	rian	n f n	m (Completed: 3:15 r. a.m. & p.m.
			,, D P		
Name of Inspecting Official: Lt Stratton; Dr	Stolizio	13	-	laint	#- 2017-001
Type of Inspection: 🗹 Routine 💢 Re-In				npiaini	#; 2017-001
Inspection Results: 🛭 Satisfactory 🗀 L	Insatisfa	actory	e.	Condi	itional
Inspection Results:	de 450	1 pror	nulga	ted un	der the authority of 16 Del. C. 93000 1
The state of the s	= Not C	***************************************	2.7		A= Not Applicable
AREA TO BE INSPECTED	REGS	c	NC	N/A	COMMENTS
Facilities – 11 Del. C. §1325			0117		
a. Proper Shelter		1			
b. Food and Water		1			
c. Sanitary Conditions		1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Shelter Care and Treatment – 16 Del. C. §3002	F	in the same	1	1 10	
Disease control and health care program by a veterinarian: Dr. K. Rife		1	+		
b. Written veterinary protocols	8.1	1			willian protocols on shared drive for all staff to access
c. Vaccinations	8.2-3		1		see additional observation (1)
d. Examination within 72 hours	8.4	1			
e. Veterinary care/medical treatment provided		1	1		heartworm positive dogs (2)
f. Designated treatment and isolation and/or quarantine areas		1			
Animal Adoption, Recovery, and Rehabilitation	on – 16	Del, C	9300	or T	not posted for public view at main gate (3)
a. Business hours	9,2		1	-	not posted for public view at main gard (4)
b. 72 hour stray holding period		1		-	
c. Animal recovery procedures	-	1		-	
Checking for identification on strays	0.1	1	-	-	
Lost/found lists; post on website	9.1	11	-	-	
 Five-day recovery period implemented 		1	-	-	
d. Maintains and utilizes rescue registry		1	+-	7	
e. Health certifications on imported animals	0045	1			The state of the s
Euthanasia in Animal Shelters - 16 Del. C. 53	UU4F		T Total	-	
a. Five-day hold period	-	1	-	+	
b. Conditions met-no reasonable alternatives	iiii	1	1		
c. Animal care/control manager authorization		1	1	i e	

	Veterlnarian determination		1			see additional observation (4)
e.	Euthanasia technician certification on file	6.3		3.00	1	no licensed CET all licensed vet techs
f.	Method and procedures		1			
	Euthanasia area and equipment	10.2	1		01	
-0010	2. Current policy and procedure manual		1	2.2	1 1"	
-	3. Persons administering euthanasia	10,1	1			
_	4. Proper authorization	11.7	1			
-	5. Method and procedure	11.0	1			
	6. Verification of death	13.0	1			a
Re	cord Keeping and Reporting - 16 Del.C. 93	007F	-	0.0		Pro- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	Animal statistics	14:1- 2				
	Quarterly report on website		l	1		missing 3rd Q stats (5)
-	2. Annual Report		1			
b.	Animal records complete	14.3		1		see additional observation (1)

1) multiple records do not reflect the vaccines being given within 8 hours, this may be clarical error of	with data entry. Ialer records appeared to be complete.
2) 3 heartworm + dogs in shelter and no definitive treatment had been started, stated that would be	
3) business hours on door of sheller not on outer gate	
4) Shall make sure that record reflects the actual vaterinarian making the determination	
5) missing 3rd Q stats	
	A CANADA
CORRECTIVE ACTIONS/COMPLIANCE DATE:	
1) Post business hours at main gate as this is locked so they are visible to the public - corrected 12/	13/17 COMPLIANT
2) Heartworm positive dogs should be treated as disease continues within them and potential for inf	action of other dags. 11/22/17 conference call with Dr Wood, W. Fenstermacher and
A, Lamb re: change in protocols for heartworm treatment in the shelter and these dogs will be treated	d (orthwith, COMPLIANT
3) post Q3 stats - checked 12/6/17 and present on website, COMPLIANT	
4) nood to make sure that data entry reflects actual time given for vaccines, por W. Fenstermacher	here has been balning and more recent records were complete, review records within
60 days	14

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

Species	No.	Other Species	No.	Other Species	No.	Other Species	No.
Dogs	48			1			
Cats	27					£	57
ignature of	Owner O	perator or Represe	tative	Signature of Insp	ecting Offi	cial(s)	4

Copies: Original to Shelter. Copy to Delaware Office of Animal Welfare.