

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 Delaware SPCA					
Street Address 455 Stanton Christina Road,	Newark	DE 1	9713		
Phone 302-998-2281 Fax				Ema	il
Date of Inspection: 10/19/18 Start	t: <u>10:00</u>	_ ∄ a.	.m. 🗆	p.m.	Completed: 11:00 _ ■ a.m. □ p.m.
Name of Inspecting Official: Cpt. Strattor	ı; Dr. Sto	Itzfus	1		
Type of Inspection: ☑ Routine ☐ Re-I				mplain	nt #: 2018-004
•••	Unsatisf			-	ditional
			-		
This inspection is based on 16 DE Admin. C	.oae 450	T pro	muiga	atea ur	nder the authority of 16 Dei. C. 93008 F.
C = Compliant N	IC = Not (Compl	iant	N/	A= Not Applicable
AREA TO BE INSPECTED	REGS	С	NC	N/A	COMMENTS
Facilities – 11 Del. C. §1325	I STATE	3 2	- 29		PARTY OF THE PARTY
a. Proper Shelter		1			
b. Food and Water		1			
c. Sanitary Conditions		1			
Shelter Care and Treatment – 16 Del. C. §3002	2 F		-		
a. Disease control and health care program		1			
by a veterinarian: Dr. Madhulal Valliyatte		✓			
b. Written veterinary protocols	8.1	1			
c. Vaccinations	8.2-3	1			
d. Examination within 72 hours	8.4	1			
e. Veterinary care/medical treatment		1			
provided		✓			
f. Designated treatment and isolation					
and/or quarantine areas					
Animal Adoption, Recovery, and Rehabilitation		el. C.	\$3003	F	
a. Business hours	9.2	1			
b. 72 hour stray holding period		1			
c. Animal recovery procedures					
Checking for identification on strays		1			
Lost/found lists; post on website	9.1	1			see comment (1)
3. Five-day recovery period implemented		1			
d. Maintains and utilizes rescue registry		1			
e. Health certifications on imported animals		✓			
Euthanasia in Animal Shelters – 16 Del. C. §30	04F				
a. Five-day hold period		1			
b. Conditions met-no reasonable alternatives		1			
c. Animal care/control manager		1			
authorization		✔		l	

1. Veterinarian determination		1			
e. Euthanasia technician certification on file	6.3			1	no licensed CET all licensed vet techs
f. Method and procedures					
 Euthanasia area and equipment 	10.2	1			
Current policy and procedure manual		1			
3. Persons administering euthanasia	10.1	1			
4. Proper authorization	11.7	1			
Method and procedure	11.0	1			
6. Verification of death	13.0	1			
Record Keeping and Reporting – 16 Del.C. §3	007F			3/41	
a. Animal statistics	14.1-				
	2				
 Quarterly report on website 		√			
2. Annual Report		1			
b. Animal records complete	14.3	1	1		

ADDITIONAL OBSERVATIONS/EXPLANATION:	
(1) stray cats not noted on website	
CORRECTIVE ACTIONS/COMPLIANCE DATE:	
(1) corrected 12/19/18, all strays will be listed on website COMPLIANT	

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

Species	No.	Other Species	No.	Other Species	No.	Other Species	No.
Dogs	49						
Cats	24			1			
Signature of Owner, Operator or Representative			Signature of Insp	ecting Offi	cial(s)	_	

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

	Veterinarian determination		1			
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a.	Animal statistics	14.1-				T
		2				
	Quarterly report on website		1			
	2. Annual Report		1			
b.	Animal records complete	14.3	1	1		

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