# ANIMAL FACILITY SITE VISIT CHECKLIST

*Note: This checklist is adapted from the CCAC document: guidance for animal care committee members conducting annual site visits - date of publication: June 2018*

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| **SITE** | MSVU FISH LAB |
| **DATE OF VISIT:** |  |

**Names of site visit team members and their signatures** [signature implies member is aware of any hazards and has agreed to participate]

|  |  |
| --- | --- |
| **Printed Name/Role** | **Signature** |
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| **ANIMAL Species Present:** |  |
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| **PROGRAM ELEMENT** | **APPROPRIATE?** | | |
| **Yes** | **No** | **COMMENT**  **(include TARGET DATE for any follow-up action needed)** |
| Facility Infrastructure and Maintenance | | | |
| A. Design of the Facility | | | |
| 1. Appropriate clean to dirty traffic patterns |  |  |  |
| 1. Sufficient and appropriate housing and procedural space |  |  |  |
| 1. Sufficient and appropriate service space (washing area, storage) |  |  |  |
| B. Environmental Parameters | | | |
| 1. Good air quality (including any HVAC equipment) |  |  |  |
| 1. Temperature control and records |  |  |  |
| 1. Appropriate control of light (photoperiod, intensity) |  |  |  |
| 1. Sufficient availability of back-up power |  |  |  |
| 1. Duplication of critical pieces of equipment |  |  |  |
| C. Maintenance of Internal Surfaces | | | |
| 1. Condition of walls |  |  |  |
| 1. Condition of ceilings |  |  |  |
| 1. Condition of floors |  |  |  |
| 1. Condition of counters |  |  |  |
| 1. Condition of sinks |  |  |  |
| D. Equipment Maintenance |  |  |  |
| 1. Records of equipment maintenance |  |  |  |
| E. Security of the Facility | | | |
| 1. Access control into the facility |  |  |  |
| 1. PI and other emergency contact numbers |  |  |  |
| F. Other | | | |
|  | | | |
| Animal Care and Facility Management | | | |
| 1. Overall quality of animal care |  |  |  |
| 1. Housing and environmental enrichment for each group of animals |  |  |  |
| 1. Sufficient availability of qualified personnel at all times when animals are present |  |  |  |
| 1. Good overall coordination of activities throughout the facility to avoid cross-contamination or other problems |  |  |  |
| 1. Approved protocols posted with Notice of Approval |  |  |  |
| 1. All SOPs for protocol readily available |  |  |  |
| 1. Humane endpoints posted in the immediate vicinity of the animals |  |  |  |
| 1. Apparently effective communication among Consulting Veterinarian, Facility Manager, Animal Care Technician, and animal users |  |  |  |
| 1. Tank cards present with necessary information (date of birth. Clutch ID) |  |  |  |
| 1. Daily room checklist posted, clear, up to date |  |  |  |
| 1. Evidence of proper incident reporting and recording |  |  |  |
| 1. Any “sick animal” reports recorded |  |  |  |
| 1. Summaries of procedures undertaken by research team members for each group of fish |  |  |  |
| 1. Ready availability of surgery, breeding records |  |  |  |
| 1. Access to and monitoring of high-quality water |  |  |  |
| H. Biosecurity | | | |
| 1. Humane vermin control |  |  |  |
| 1. Foot/hand sanitization |  |  |  |
| 1. Personal protective equipment (PPE) |  |  |  |
| 1. Presence and use of quarantine areas |  |  |  |
| 1. Other |  |  |  |
| I. Biosafety/Application of Occupational Health and Safety Measures | | | |
| 1. All electrical fixtures sufficiently protected and in good working order |  |  |  |
| 1. Evidence of proper management of potential slippery floors |  |  |  |
| 1. Any hazards not controlled /identified? |  |  |  |
| 1. Other |  |  |  |
| J. Housekeeping (Cleanliness, Storage/Organization of Materials, Waste Storage/Disposal) | | | |
| 1. Evidence of sufficient general organization and cleanliness |  |  |  |
| 1. Evidence of cleaning procedures in place for tanks and other equipment |  |  |  |
| 1. Evidence of proper waste disposal |  |  |  |
| 1. Evidence of procedures in place for proper disposal of carcasses |  |  |  |
| 1. Evidence of proper sanitation in place for special facilities (surgery, food preparation, etc.) |  |  |  |
| 1. Clearly indicated expiry dates on items such as drugs, products, cleaning solutions, feed, supplements, and equipment maintenance. |  |  |  |
| 1. Other |  |  |  |

Please email the completed report to: [**ethics@msvu.ca**](mailto:ethics@msvu.ca)