

Animal Welfare Assessment Checklist

Housing and Environment

Assessment of the physical environment where animals are kept, including space, shelter, ventilation, and cleanliness.

Stocking Density (Animals/m²)

Type of Flooring Material

- ☐ Concrete
- ☐ Wood Shavings
- ☐ Straw
- ☐ Grass
- ☐ Other (specify in LONG_TEXT)

Describe Ventilation System

Adequacy of Shelter from Weather (Rain, Sun, Wind)

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Average Temperature (°C) Inside Housing

Enter a number...


Describe Any Observed Stressors Related to Housing (e.g., noise, lighting)

Write something...

Lighting Schedule (Natural vs. Artificial)

- ☐ Primarily Natural
- ☐ Primarily Artificial
- ☐ Combination (Specify hours of each in LONG_TEXT)

Photographs of Housing Environment

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Nutrition and Hydration

Evaluation of the adequacy and accessibility of food and water sources for the animals.

Average daily food consumption per animal (kg)

Enter a number...

Water intake per animal per day (liters)

Enter a number...

Food source(s)

- ☐ Commercially produced feed
- ☐ Pasture/Forage
- ☐ Crop residue
- ☐ Other (specify in LONG_TEXT)

If 'Other' was selected for food source, please specify:

Write something...

Method of food delivery

- ☐ Automated feeder
- ☐ Manual feeding
- ☐ Trough/Basin
- ☐ Other (specify in LONG_TEXT)

If 'Other' was selected for method of food delivery, please specify:

Write something...

Signs of malnutrition observed (check all that apply)

- ☐ Weight loss
- ☐ Muscle wasting
- ☐ Rough coat
- ☐ Lethargy
- ☐ None observed

Date of last feed/water source review

Enter date...

Health and Veterinary Care

Review of preventative health measures, disease management, injury prevention, and access to veterinary care.

Number of documented illnesses/injuries in the last 12 months

Enter a number...

Vaccination schedule adherence (species-specific)

- ☐ Fully Compliant
- ☐ Partially Compliant
- ☐ Not Compliant

Date of last comprehensive veterinary inspection

Enter date...

Summary of any observed signs of illness or distress (e.g., lameness, respiratory distress, abnormal behavior)

Write something...

Attach veterinary records (if available)

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Procedure for dealing with injured or sick animals

- ☐ Clearly defined protocol in place
- ☐ Protocol partially defined
- ☐ No defined protocol

Number of deaths in the last 12 months (total)

Enter a number...

Describe protocols for euthanasia (if applicable) and pain management.

Write something...

Behavior and Social Needs

Observation of animal behaviors and assessment of opportunities to express natural behaviors and interact socially (where appropriate).

Are opportunities provided for species-typical social interaction?

- ☐ Yes, always
- ☐ Yes, sometimes
- ☐ No
- ☐ Not Applicable (Solitary Species)

Describe any observed abnormal behaviors (e.g., stereotypies, aggression).

Write something...

Estimate the proportion of animals exhibiting signs of boredom or frustration (0-100%).

Enter a number...

How would you assess the level of environmental enrichment provided to encourage natural behaviors?

- ☐ Excellent
- ☐ Good
- ☐ Adequate
- ☐ Poor
- ☐ Nonexistent

Detail any opportunities for animals to explore and engage in foraging behaviors.

Write something...

Are animals able to retreat from dominant individuals or disturbances?

- ☐ Yes, easily
- ☐ Yes, with some difficulty
- ☐ No
- ☐ Not Applicable

Based on observations, how would you rate the overall opportunity for animals to express natural behaviors?

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Handling and Management Practices

Examination of how animals are handled, moved, and managed by staff and others, focusing on minimizing stress and injury.

Are animals handled gently and calmly?

- ☐ Yes
- ☐ No
- ☐ Not Observed

Average time spent handling an individual animal (minutes)

Enter a number...

Methods used for restraint during procedures (check all that apply)

- ☐ Manual restraint
- ☐ Chemical restraint
- ☐ Mechanical restraint (e.g., halters, chutes)
- ☐ Other (specify in LONG_TEXT)

If 'Other' restraint method selected, please specify:

Write something...

Is training provided on animal handling techniques?

- ☐ Yes
- ☐ No
- ☐ Unsure

Date of last handling/restraint training for staff

Enter date...

Describe any observed stressful or painful handling practices.

Write something...

Are animals allowed to move at their own pace?

- ☐ Yes
- ☐ No
- ☐ Partially/Sometimes

Record Keeping and Traceability

Review of records related to animal health, welfare, and management practices.

Date of Last Animal Health Check

Enter date...

Number of Animals Currently Housed

Enter a number...

Summary of Recent Illnesses or Injuries (and corrective actions)

Write something...

Vaccination Protocol Followed?

- ☐ Yes, fully compliant
- ☐ Yes, with minor deviations
- ☐ No
- ☐ Not Applicable

Upload Vaccination Records

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Date of Last Parasite Treatment

Enter date...

Description of Animal Source/Origin (e.g., farm name, breeder)

Write something...

Batch/Group ID (if applicable)

Enter a number...

Emergency Preparedness

Assessment of plans and procedures for dealing with emergencies that could impact animal welfare (e.g., extreme weather, disease outbreaks).

Number of staff trained in emergency procedures.

Enter a number...

Potential emergency scenarios addressed in the plan (select all that apply)

- ☐ Fire
- ☐ Flood
- ☐ Extreme Heat
- ☐ Extreme Cold
- ☐ Disease Outbreak
- ☐ Power Outage
- ☐ Natural Disaster (e.g., earthquake, tornado)
- ☐ Other (Specify in LONG_TEXT)

If 'Other' selected above, please specify the other emergency scenarios considered.

Write something...

Date of last emergency preparedness plan review.

Enter date...

Summary of the evacuation plan for animals (including routes, holding areas, etc.).

Write something...

Emergency contact list (including veterinarians, local authorities).

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Is there a designated backup power source?

- ☐ Yes
- ☐ No
- ☐ Partial (Specify in LONG_TEXT)

If 'Partial' selected above, describe the backup power capabilities.

Write something...

Location of emergency supplies (food, water, medication).

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Staff Training and Competence

Evaluation of the training and skills of personnel involved in animal care and management.

What animal handling training has staff received (select all that apply)?

- ☐ Low Stress Handling
- ☐ Animal First Aid
- ☐ Species-Specific Behavior
- ☐ Disease Recognition
- ☐ Medication Administration
- ☐ Emergency Response

How many hours of animal welfare training has each staff member received in the last 12 months?

Enter a number...

Date of last refresher training for animal handling

Enter date...

What is the primary method used to document staff training?

- ☐ Paper Records
- ☐ Digital Database
- ☐ Training Certificates
- ☐ Other (please specify)

If 'Other' selected above, please explain the method of training documentation.

Write something...

Upload training records for review (e.g., certificates, training manuals).

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Is there a designated animal welfare champion or coordinator?

☐ Yes

☐ No

If yes, what are the duties and responsibilities of the animal welfare champion/coordinator?

Write something...