

INFECTION CONTROL AND ZONOTIC DISEASE RISK AWARENESS, BELIEFS, AND POLICIES OF FLORIDA ANIMAL SHELTERS

¹H Campbell

¹College of Veterinary Medicine, College of Public Health and Health Professions, University of Florida, Gainesville, FL, USA.

The growing role of animal shelters as sources for pets in households across the United States has brought to light an interesting lack of data concerning how animal shelters regard and manage risk of zoonotic disease transmission within their facilities. One study by Steneroden, Hill, and Salman (2010) surveyed western US shelters to gather information about infection control and demographics, and the current survey seeks to gather similar information to characterize Florida shelters. This project aimed to collect baseline information from municipal shelters in the State of Florida, of both shelter demographics and perceptions about zoonotic disease in the shelter environment. Objectives of the study were to gather demographic information for Florida shelters, evaluate knowledge and training of animal care staff in infection control and disease awareness and management in Florida animal shelters, and determine interest of shelter management in further training for staff in infection control and zoonotic disease management in shelters. A 59-question survey was sent by email using the Survey Monkey web site to shelters located in Florida that had a facility for housing animals and performed animal control duties in 2011, with a completed response rate of 19 of 60 shelters identified.

47% of shelters had no veterinarian, volunteer or otherwise. 26% of shelters had no species exclusions for acceptance into the shelter. Community service workers and volunteers at almost every shelter were not rabies vaccinated. A rabid animal was confirmed in 17% of shelters in the last five years. Animal Control officers and paid employees with animal contact were the most likely to be bitten by animals in the shelters (median 96% of bites), and dogs and cats were by far the most common sources of animal bites in humans (median 46% and 54% of bites respectively). Rodents were responsible for 12% of animal bites in one shelter. Eighty-four percent of shelters reported access to a microscope, and 16% of shelters had no tools for diagnosing zoonotic disease. Five common zoonotic diseases were reported in at least 84% of shelters. 63% of shelters had some sort of written infection control plan in the facility. 44% of responding shelters trained Animal Control officers and paid employees with animal contact annually and 61% train new staff in this category, but only 17% of shelters reported training volunteers annually, while 27% of shelters reported training new volunteers. Eighty-four percent of shelters had interest in further infection control and zoonotic disease management training for shelter staff. Online courses were the preferred method of training for 84% of shelters, and 79% would also like online or printed material for training purposes.

Results from this study can be used to guide development of training materials for shelter staff and highlight the need for further research into infection control in animal shelters to reduce zoonotic risk in animal shelters.

