

**EQUINE CARE PROGRAM** 

**Assessment Tool** 



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## INTRODUCTION

#### **About this Tool**

The purpose of this tool is to help you determine if your facility meets the requirements of the Equine Care Program. This assessment tool provides a step-by-step way to observe your entire facility and horses, and to evaluate your management practices.

Within this document, you will find sections which focus on the health and behaviour of horses, their environment, and the management practices currently in place at your facility. It is designed to be applicable to different styles of horse management and housing across Canada, so some sections may not apply to your facility. You can mark these as Not Applicable or "N/A."

Below is the suggested order of how to conduct your self-assessment. However, you may answer the questions in any order you wish.

- 1. Observe horses during turnout or at any time you would normally observe them (e.g., during morning feeding) and conduct all horse observations (*Horse Observations*, p. 6)
- 2. Examine outdoor environments for horses, including fencing, shelter, and water (*Outdoor Environment*, p. 16)
- 3. Examine indoor environments for horses, if horses are stabled (*Indoor Environment*, p. 26)
- 4. Review facility protocols and horse management practices (Management & Protocols, p. 37)

#### **Using this Tool**

The scoring of the program requirements is designed in a manner that a response of "Yes" indicates that the program requirement is met, and "No" means the requirement is not met. The scoring in the Horse Observation section works a bit differently, where acceptable and unacceptable scores are described for each observation.

You might notice that there are limited spaces to enter information about your horses, paddocks, and stalls in the scoresheets. This is because the assessment uses a sampling method, which means it looks at a smaller group of horses, paddocks, and stalls to understand the bigger picture. There is a guide available in Appendix A which explains how to use sampling. Some program requirements in this tool will include guiding questions to help you determine if you are meeting a requirement, or not.

Any horse management documents in this program (e.g., Herd Health Plan) can be electronic or written.



#### **Referencing the Facility Manual**

The Facility Manual contains more details about the requirements listed in this tool, as well as rationale for each of the requirements, additional resources, and recommendations for elevating horse care. The Facility Manual also includes sample protocol documents and fact sheets for each named document in this tool. You will notice that each section corresponds to a Criterion section in the Facility Manual. You can refer to the No. columns beside each requirement in this tool to find additional information in the Facility Manual.

#### **How Often Should I Complete this Assessment?**

You may complete this assessment as often as you like. It is recommended that you conduct this assessment at least annually. This will allow you to compare your assessments over time and identify what you are doing well and what practical improvements can be made. You can complete the assessment all at once, over a few days or weeks, or even months – go at your own pace!

#### **Questions and support**

Our team is here to help! If you would like more information about the Equine Care Program or if you have questions, please do not hesitate to contact us at equinecare@equestrian.ca.



# HORSE OBSERVATIONS

During any time that you would normally observe horses at your facility (e.g., during morning or evening feeding), examine all horses. If you have more than 15 horses at your facility, you may wish to observe a sample of horses to ensure your assessment does not take too long and is still representative of your equine herd. **Refer to Appendix A to learn more about sampling.** 

Check the horse's body condition (especially underneath blankets), look for injuries, and the colour and consistency of any nasal discharge. As they move around, observe their gait (if possible) to see if there is any lameness present. Refer to the scoring guides below for details on how to assess body condition, injuries, nasal discharge, and lameness. **Record your scores in the Horse Observation Scoresheet.** 

The welfare of horses and the safety of both people and horses is paramount. Observe horses from a safe distance and score only what you can see. Indicate if a horse cannot be scored, indicate this in the scoresheet.





#### **BODY CONDITION SCORING (BCS) GUIDE**

Observe horses to the best of your ability, ideally while the horse's head is in a natural upright position. Score the horse based on their overall fat deposition, using the table and figure below.

Indicate if the horse is overweight or underweight, alongside the category (e.g., red – underweight) in the Horse Observation Scoresheet. If the horse cannot be scored (e.g., the horse is blanketed), indicate this in the scoresheet.

Appropriate actions should be taken for horses with a BCS of 3 or lower AND at a BCS of 8 or higher. In other words, a horse with a category score of red (underweight or overweight) AND any horse with a score of yellow (underweight).

#### **Table 1. Body Condition Scoring Categories**

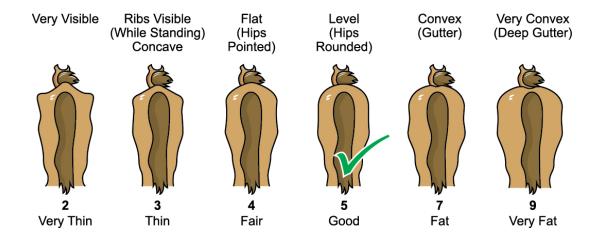
The **crease** refers to the shape of the horse's back, most noticeable at the loin. A **negative crease** means that the backbone is visible, and the fat deposition does not reach the top of the bone. A **neutral crease** means the back (particularly at the loin) is level, meaning the fat is equal (or nearly equal) with the top of the bone. A **positive crease** means that the fat deposition is past the top of the backbone, creating a rounded V-shape.

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| Unacceptable<br>BCS of 1,2, 8, or 9   | Concerning BCS of 3 or 7   | Acceptable<br>BCS of 4, 5 or 6   |
|---|--|--|
| Underweight (1, 2): Easily visible bone structure (withers, spinous processes, scapula, ribs, tailhead and hook bones) Overweight (8, 9): Noticeable thickening of the neck Shoulder is flush with the body/rounded shoulder Bulging fat deposition Obvious positive crease down the back (see image below) | Underweight (3): Clearly visible "injection triangle" in the neck Accentuated bone structures All ribs easily visible Approaching Overweight (7): Fat deposits along the neck and withers ("cresty" neck) A positive crease along the back (see image below) Overall "fleshy" appearance | Neck blends smoothly into the body Withers blend smoothly into the body or have a slight rounding of fat cover Crease along the back should be slightly positive, neutral, or negative (see image below) Ribs may be faintly discernable |

Figure 1. Body Scoring (Rumps & Hips)





You may also find it helpful to refer to the Body Condition Score section in Appendix D of the NFACC Code of Practice for the Care and Handling of Equines, which you can access here: <a href="www.nfacc.ca/codes-of-practice/equine">www.nfacc.ca/codes-of-practice/equine</a>.

#### **LAMENESS SCORING GUIDE**

Observe horses to the best of your ability, ideally as they are moving around (e.g., as horses are being led out outside during turnout). Indicate the score in the Horse Observation Scoresheet. If you cannot observe the horse while walking, indicate this in the scoresheet.

If while standing the horse is unable to weight bear on a leg, this is an immediate score of 2. If lameness is visible only when the horse is moving, this is a score of 1.

Appropriate actions should be taken immediately is a horse has a lameness score of 1 or 2.

**Table 2. Lameness Scoring** 

| Lameness<br>Score | Description   |
|-------------------|---|
|                   |   |
| 0                 | <b>Appears Sound:</b> Horse appears sound with no obvious lameness when walking and turning in both directions.   |
| 1                 | Lame: Horse shows signs of a hitching gait, a shortened stride, and/or stiffness.   |
| 2                 | <b>Non-ambulatory:</b> Horse shows extreme reluctance to move forward and may not bear weight at all on the sore limb even when standing still. When forced to move, the horse has a pronounced "hopping" gait. |



#### **INJURY SCORING GUIDE**

Observe the horse to the best of your ability. Score any injury you locate in the Horse Observation Scoresheet, based on the description and images in the table below. Indicate the location of the injury on the horse's body (see figure below) in the scoresheet. **The injury must be larger than a quarter to record.** If the horse cannot be scored, indicate this in the scoresheet.

An *injury* is defined as an area on the skin with visible hair loss (no hair regrowth), abrasions (scrape) and/or punctures or lacerations (cut). If there are multiple injuries or lesions on the same horse, record all lesions or injuries separately.

Images and table below adapted with permission from "Reliability of an injury scoring system for horses." by Mejdell, C.M., Jørgensen, G.H., Rehn, T. et al. 2010. Acta Vet Scand 52, 68. https://doi.org/10.1186/1751-0147-52-68. Copyright 2010 by BioMed Central Ltd.

Appropriate actions should be taken is a horse has an injury or lesion score of  $4 \ge 0$  on any area of the body.



**Table 3. Injury Scoring** 

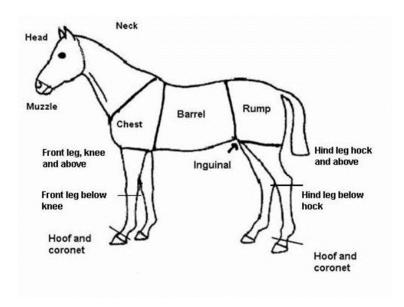
| Injury Score | Description of Injury  | Reference Image |
|--------------|--|-----------------|
| 0            | No visible lesions   | None            |
| 1            | Lesions involving hair loss only (alopecia) (e.g., superficial bite)   |                 |
| 2            | Lesion involving a moderately sized contusion (bruise) with or without hair loss and/or an abrasion (scrape) in the skin |                 |



| 3 | Lesion involving a minor laceration (cut) and/or a larger contusion (bruise) with obviously swollen parts of without hair loss  |  |
|---|---|--|
| 4 | Laceration involving injury to deeper tissues (e.g., muscle, tendon) or a laceration without visible damage to underlying tissues but of a size that normally requires surgery        |  |
| 5 | Extensive and severe injury that may lead to long lasting loss of function (e.g., laceration with extensive soft tissue damage, seriously injured tendon, joint damage) or even death |  |



Figure 2. Injury Scoring Location Guide



### **NASAL DISCHARGE SCORING GUIDE**

Nasal discharge can indicate an underlying illness or other medical condition (e.g., allergies). Observe the horse's nostrils using the table below. Record the score in the Horse Observation Scoresheet.

**Table 4. Nasal Discharge Scoring** 

| Nasal Discharge | Description   |
|-----------------|---|
| Score           |   |
| 0               | <b>Absence:</b> No nasal discharge, or discharge is present in small amounts, and is thin in consistency and transparent in colour.                                     |
| 1               | <b>Present:</b> Nasal discharge can be from one or both nostrils and is excessive. It may be watery or thick in consistency, and transparent or yellow-green in colour. |



## HORSE OBSERVATION SCORESHEET

Horses observed must be 5 years of age or older.

| Horse # / Name | Body Condition<br>Score | Lameness<br>Score                | Injury Score and Location | Nasal<br>Discharge    |
|----------------|-------------------------|----------------------------------|---------------------------|-----------------------|
| 1              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 2              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 3              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 4              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 5              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 6              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 7              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 8              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 9              |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 10             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 11             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 12             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 13             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 14             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 15             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 16             |                         | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 |                           | O 0 O 1               |
| 17             |                         | 000102                           |                           | <b>O</b> 0 <b>O</b> 1 |



| 18 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
|----|----------------------------------|---------|
| 19 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 20 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 21 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 22 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 23 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 24 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 25 | <b>O</b> 0 <b>O</b> 1 <b>O</b> 2 | O 0 O 1 |
| 26 | 000102                           | O 0 O 1 |

| Additional Notes: |  |  |  |
|-------------------|--|--|--|
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |
|                   |  |  |  |



# **OUTDOOR ENVIRONMENT**

This section corresponds with the following Criteria in the Facility Manual: 8. Housing; 9. Risk Management; and 10. Water and Nutrition.

Tour around your facility, starting with any outdoor paddocks, runs, or pens where horses are turned outside. Review the requirements below and enter your scores in the Paddock Scoresheet. **Refer to the Sampling Guide in Appendix A.** 

### **PADDOCKS**

| No             | Requirement   | Score  Record your score under the Shelter column in the Paddock Scoresheet. |
|----------------|---|--|
| 8.2<br>Shelter | Horses have access to an adequate natural or constructed shelter in each paddock.   | O Yes<br>O No  |
|                | If any paddocks have a constructed shelter, it must be large enough to accommodate all horses at the same time. Measure the size of the shelter (length by height) with a measuring tape and count the number of horses in the paddock. Constructed shelters must be 11.2m <sup>2</sup> each for the first 2 horses, and 5.6m <sup>2</sup> for each additional horse. | If No, what is your plan to address:   |
|                | Use this formula to determine if the spacing allowance for a constructed shelter is adequate:   |  |
|                | Number of horses in paddock = $X$ if $X$ is $>2$  |  |
|                | Formula: $22.4\text{m}^2 + 5.6\text{m}^2(X) = \text{minimum spacing allowance}$   |  |
|                | If any paddocks are scored as No, then does your facility have a plan to monitor and move horses indoors (e.g., into a barn), to an area with access to an adequate shelter, or blanket horses accordingly?   |  |
|                | Considerations:   |  |
|                | <ul> <li>Who monitors horses and makes decisions to move or blanket horses accordingly?</li> <li>What do you do to protect horses during inclement conditions?</li> </ul>   |  |



| 9.1, 9.9  | Each paddock free from obvious hazards.   | O Yes  |
|-----------|---|--|
| Safe      | Observe the fencing around the paddock.   | O No   |
|           | <ul> <li>Examples of obvious hazards:</li> <li>Protrusions (e.g., nails, screws)</li> <li>Loose, unstable, or broken fencing</li> <li>Small paddocks fenced with barbed wire, page wire, or narrow gauge high-tensile steel wire fencing</li> <li>Electric fencing is touching or is in contact with a water source</li> <li>Temporary electric fences (used for strip grazing or pasture rotation) is used as permanent fencing</li> </ul> | If No, what is your plan to address:         |
| 8.3       | Adequate Space  | O Yes  |
| Adequate  | Observe horses in paddocks. Horses are able to:   | O No   |
| Space     | <ul> <li>Easily walk forward, turn around with ease, and lie down in a normal resting posture.</li> <li>Easily escape aggression from other horses in the paddock (if applicable).</li> </ul>   | If <i>No</i> , what is your plan to address: |
|           | Record your score under the Adequate Space column in the Paddock Scoresheet.  |  |
| 9.0       | Gate Size   | O Yes  |
| Gate Size | The gate in each paddock (designated for horse entry) at least 1.22m wide.  | O No   |
|           | Record your score under the Gate Size column in the Paddock Scoresheet.   | If No, what is your plan to address:         |
|           |   |  |



| 10.0<br>Accessible<br>Water | There is an accessible water source in each paddock.  Record your score under the Water column in the Paddock Scoresheet.  Acceptable water sources:  Trough Container Bucket or pail Automatic waterer. Check the functionality of any automatic waterers. If unfunctional, score as No. Body of water (stream, pond, dig out, lake), permitting the water is not impeded by ice or snow | ○ Yes ○ No If No, what is your plan to address: |
|-----------------------------|---|---|
| 10.0                        | The water source in each paddock is <b>clean</b> .  | O Yes O No                                      |
| Clean<br>Water              | Record your score under the Clean column in the Paddock Scoresheet.  A water source is considered clean if the water is not obviously coloured or murky, there is no build up of algae on the bottom or sides, and it does not have an unpleasant odour.  | If <i>No</i> , what is your plan to address:    |
| 10.5                        | There is an accessible salt source in each paddock.   | O Yes   |
| Salt                        | Record your score under the Salt column in the Paddock Scoresheet.  | O No  |
|                             | If there are any paddocks with no salt source, does your facility have a plan for providing daily salt for horses?  | If <i>No</i> , what is your plan to address:    |
|                             | Considerations:   |   |
|                             | <ul> <li>Is salt provided loose in rations or in a container?</li> <li>Are horses brought indoors overnight where they have access to a salt block?</li> </ul>  |   |



| 9.2<br>Fencing | Applicable to facilities with electric fencing.  There is at least one functional electric fence meter, and it is used to monitor the voltage in electric fencing, as needed. | O Yes O No If <i>No</i> , what is your plan to address: |
|----------------|---|---|
|                |   |   |



## PADDOCK SCORESHEET

| Paddock # | 8.2<br>Shelter | 9.1, 9.9<br>Safe | 8.3<br>Adequate<br>Space | 9.0<br>Gate Size | 10.0<br>Accessible<br>Water | 10.0<br>Clean<br>Water | 10.5<br>Salt | 9.2<br>Fencing |
|-----------|----------------|------------------|--------------------------|------------------|-----------------------------|------------------------|--------------|----------------|
| 1         | OYON           | OYON             | OYON                     | OYON             | OYON                        | O Y O N                | OYON         | O Y O N        |
| 2         | O Y O N        | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 3         | O Y O N        | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 4         | NCYC           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 5         | O Y O N        | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 6         | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 7         | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 8         | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 9         | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 10        | O Y O N        | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 11        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 12        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 13        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 14        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 15        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 16        | OYON           | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |
| 17        | O Y O N        | OYON             | OYON                     | OYON             | OYON                        | OYON                   | OYON         | OYON           |



| 18 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
|----|------|------|------|------|---------|---------|---------|---------|
| 19 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 20 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 21 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 22 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 23 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 24 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 25 | OYON | OYON | OYON | OYON | OYON    | OYON    | OYON    | OYON    |
| 26 | OYON | OYON | OYON | OYON | O Y O N | O Y O N | O Y O N | O Y O N |



## **MUD MANAGEMENT**

| No  | Requirement  | Score   |
|-----|--|---|
| 8.0 | There is a plan for managing mud in paddocks and ensuring all horses have access to a mud-free area where they can comfortably lie down.  Appropriate strategies include:  Bringing horses indoors overnight or during muddy conditions Pasture rotation Providing drainage in high traffic areas (e.g., near feeding or watering sources, horse shelters, or gates) and ensuring drainage is away from feed and water sources Removing manure regularly. Soil stabilizers (e.g., grid systems) Providing dry bedding (e.g., shavings, straw, hay) in shelters or surrounding feed sources Ensure appropriate stocking density (not overcrowding paddocks) | O Yes O No If No, what is your plan to address: |



## HERBICIDES, PESTICIDES, FERTILIZERS, AND CHEMICAL STORAGE

Has your facility used fertilizers, herbicides, or pesticides within the past year? Yes / No

If Yes, then score the requirements below. If No, score as N/A.

| No  | Requirement  | Score   |
|-----|--|---|
| 9.6 | If your facility uses fertilizers, herbicides, or pesticides, there are Chemical Records of any fertilizers, herbicides, or pesticides used within the past year.  Chemical Records include:  Type of fertilizer, herbicide, or pesticide used Date(s) of application Location(s) of application | O Yes O No O N/A If No, what is your plan to address: |
| 9.5 | Applicable to facilities with client horses.  There is a plan for notifying clients about the application of fertilizers, pesticides, herbicides, or manure at your facility, including areas of application and how long areas should be avoided to prevent health risks to horses.             | ○ Yes ○ No ○ N/A If No, what is your plan to address: |



Does your facility use toxic chemicals? Yes / No

Toxic chemicals include cleaning solutions, pesticides, herbicides, fertilizers, and pest control chemicals.

If Yes, then score the requirements below. If No, score as N/A.

| No                 | Requirement   | Score  |
|--------------------|---|--|
| 9.11               | Toxic chemicals are stored securely with a safeguard.                                       | O Yes  |
| Toxic<br>Chemicals | Acceptable safeguards include:  | O No   |
| Chemicais          | Latches on chemical container or box  | O N/A  |
|                    | Stored in a room, large container, shed or separate building with a door that can be locked | If <i>No</i> , what is your plan to address: |
|                    |   |  |
|                    |   |  |
|                    |   |  |
|                    |   |  |
|                    |   |  |
|                    |   |  |



# **SAFETY**

| No                             | Requirement   |   |
|--------------------------------|---|---|
| 9.0<br>Hazard<br>Monitoring    | There is a plan for monitoring hazards on the property and addressing them promptly.  Considerations:  Who monitors your facility, both indoors and outdoors, for hazards? How often do they monitor for hazards? Can caregivers or clients report hazards that they identify? Do you use a checklist or other written or electronic system for documenting and addressing hazards? What actions do you take if a hazard is identified? | O Yes O No If No, what is your plan to address: |
| 9.0, 9.9<br>Outdoor<br>Hazards | Outdoor facilities are free from obvious hazards that could injure horses.  Inspect your facility and look for hazards such as:  • Abrasive or sharp edges on water sources  • Pitchforks or shovels in aisleways  • Dangerous objects in paddocks (e.g., metal scraps, pitchforks, etc.)   | • Yes • No If No, what is your plan to address: |



# INDOOR ENVIRONMENT

This section corresponds with the following Criterion in the Facility Manual: 8. Housing; 9. Risk Management; and 10. Water and Nutrition.

Does your facility have indoor housing for horses in which horses are stalled for extended periods of time (e.g., overnight)? Yes / No

If Yes, then score the requirements under the Barns and Stalls sections below. If No, score as N/A.

Take a walk around your indoor facilities. The following sections include observations of your barns (e.g., absence of mold, sufficient lighting), the stalls (e.g., appropriate size, well bedded), as well as your feed storage and nutrition program. Review the requirements below and enter your scores in the Stall Scoresheet.

Refer to the Sampling Guide in Appendix A.



## **INDOOR HOUSING**

Indicate the number of barns at your facility uses to house horses:

If you do not have any barns at your facility, score the requirements in this section as N/A.

| No                            | Requirement   | Score   |
|-------------------------------|---|---|
| 9.0, 9.9<br>Indoor<br>Hazards | <ul> <li>Indoor facilities are free from obvious hazards that could injure horses.</li> <li>Inspect your barns and look for hazards such as: <ul> <li>Loose, uneven, or broken floorboards in barns or walkways</li> <li>Abrasive or sharp edges on water sources</li> <li>Uncovered incandescent light bulbs in aisleways or stalls</li> <li>Pitchforks or shovels in aisleways</li> </ul> </li> </ul> | O Yes O No O N/A If No, what is your plan to address: |
| 9.7<br>Air Quality            | The air quality maintained to prevent a buildup of dust or moisture and ammonia.  You should not be able to smell ammonia when the barn has been cleaned, and if you experience eye irritation, the ammonia concentrations have exceeded acceptable levels.  Only assess after stalls have been cleaned/mucked.   | O Yes O No O N/A If No, what is your plan to address: |



| 9.7<br>Mold          | Barns are free of visible mold. Pay attention to the ceilings and sides of the barns.                          | <ul> <li>○ Yes</li> <li>○ No</li> <li>○ N/A</li> <li>If No, what is your plan to address:</li> </ul> |
|----------------------|--|--|
| 8.5<br>Lighting      | Lighting is sufficient in barns so that horses are easily visualized. You should not have to squint your eyes. | O Yes O No O N/A If No, what is your plan to address:  |
| 9.0<br>Door<br>Width | All doorways intended for single horse entry are at least 1.22m in width.                                      | <ul> <li>○ Yes</li> <li>○ No</li> <li>○ N/A</li> <li>If No, what is your plan to address:</li> </ul> |



| 9.4<br>Non-Slip<br>Flooring | There is non-slip flooring in areas designated for grooming, tacking up, or bathing horses.  Score as N/A if your facility does not have areas designated for these purposes, or if these areas are outdoors.  Indicate the non-slip flooring type in the following areas:  Grooming/tacking areas:  Bathing areas:  Acceptable non-slip surfaces include:  Rubber mats Stamped or grooved concrete Rough cut planked floor | <ul> <li>○ Yes</li> <li>○ No</li> <li>○ N/A</li> <li>If No, what is your plan to address:</li> </ul> |
|-----------------------------|---|--|
| 8.1<br>Daily<br>Turnout     | Horses have opportunity for daily turnout or exercise, unless under stall rest for medical reasons advised by a veterinarian, or due to severe environmental conditions.  Score N/A if all horses are housed outdoors 24/7.  Average number of daily turnout hours for horses:  | O Yes O No O N/A If No, what is your plan to address:  |



## **STALLS**

If you do not have any stalls at your facility, score the requirements in this section as N/A.

| No                           | Requirement  | Score   |
|------------------------------|--|---|
| 8.4<br>Sufficient<br>Bedding | Bedding sufficient in stalls. Record your score under the Bedding column in the Stall Scoresheet.  Sufficient: bedding covers at least 2/3 of the stall floor area AND is at least 5 cm deep in the centre of the stall  Insufficient: bedding covers less then 2/3 of the stall floor area and/or is less than 5 cm deep in the centre of the stall  If the barn has soft or comfort (padded) stall systems, the depth of bedding can be minimal. | O Yes O No O N/A If No, what is your plan to address: |
| 9.8<br>Bedding<br>Type       | Bedding type is non-toxic. Record your score under the Safe column in the Stall Scoresheet.  Bedding type(s) used:  Acceptable bedding sources include:  • Wood shavings, sawdust, or pellets (e.g., pine)  • Straw  • Shredded paper  • Peat moss  Unacceptable bedding includes substances that are toxic for horse, including bedding derived from black walnut, maple, or red maple.   | ○ Yes ○ No ○ N/A If No, what is your plan to address: |



| 10.0<br>Stall Water<br>Source | There is a water source in each stall. Record your score under the Water column in the Stall Scoresheet.  Acceptable water sources include:  Bucket, container, or pail Automatic waterer. Check the functionality of any automatic waterers. If non-functional, score as No. | O Yes O No O N/A If No, what is your plan to address: |
|-------------------------------|---|---|
| 10.0<br>Clean Stall<br>Water  | The water source provided in each stall is clean. Record your score under the Clean column in the Stall Scoresheet.   | O Yes O No O N/A If No, what is your plan to address: |



#### 8.3 Stall Size

Observe horses in stalls. Record your score under the Size column in the Stall Scoresheet.

Horses are able to:

- Easily walk forward, turn around with ease, and lie down in a normal resting posture.
- Stand with the head fully raised without contacting the ceiling or fixtures (e.g., light, fan)

Minimal spacing requirements (based on horse height): horse's height (cm) + 61cm

Round the horse's height to the nearest whole number.

$$12hh = 6m^2$$

$$15hh = 9m^2$$

$$16hh = 11m^2$$

$$13hh = 7m^2$$

$$17hh = 12m^2$$

$$14hh = 6m^2$$

$$18hh = 13m^2$$

- O Yes
- O No
- O N/A

If *No*, what is your plan to address:



## **TIE-STALLS**

Does your facility have tie-stalls that are used to house horses temporarily? Yes / No

A *tie-stall* (or standing stall) is a three-sided space in a barn where horses are restrained.

If Yes, then score the requirements below. If No, score as N/A.

| No                | Requirement  |  |
|-------------------|--|--|
| 8.3<br>Tie Stalls | Observe horses in tie-stalls. Are horses able to:  • Lie down in a comfortable resting posture • Stand with the head fully raised without contacting the ceiling or fixtures (e.g., light, fan) • Step forward comfortably | <ul> <li>○ Yes</li> <li>○ No</li> <li>○ N/A</li> <li>If No, what is your plan to address:</li> </ul> |



## **STALL SCORESHEET**

| Stall # | 8.4<br>Sufficient<br>Bedding | 9.8<br>Safe | 10.0<br>Water | 10.0<br>Clean | 8.3<br>Size |
|---------|------------------------------|-------------|---------------|---------------|-------------|
| 1       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 2       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 3       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 4       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 5       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 6       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 7       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 8       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 9       | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 10      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 11      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 12      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 13      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 14      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 15      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |
| 16      | OY ON                        | OY ON       | OY ON         | OY ON         | OY ON       |



| 17 | OY ON |
|----|-------|-------|-------|-------|-------|
| 18 | OY ON |
| 19 | OY ON |
| 20 | OY ON |
| 21 | OY ON |
| 22 | OY ON |
| 23 | OY ON |
| 24 | OY ON |
| 25 | OY ON |
| 26 | OY ON |

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### **FEED STORAGE**

Does your facility feed concentrates to horses? Yes / No

*Concentrates* are grains, cereals, minerals, vitamins, pelleted rations, supplements, or combinations of such, that are designed and formulated for horse consumption.

#### If Yes, then score the requirements below. If No, score as N/A.

| No   | Requirement   |                  |
|------|---|------------------|
| 9.10 | Concentrates stored securely with a safeguard.  Acceptable safeguards include:  • Latches on feed bins or containers.  • Stored in a room, large container, shed or separate building with a door that can be locked. | O Yes O No O N/A |
| 9.10 | Feeding instructions for concentrates are labelled on the body of the bin or container (not the lid) or posted in an area visible to all persons where concentrates are stored or prepared for horses.                | O Yes O No O N/A |

### **NUTRITION**

| No   | Requirement   |                  |
|------|---|------------------|
| 10.2 | Horses are provided appropriate feedstuffs and daily access to forage.  Type of forage(s) provided to horses:   | O Yes<br>O No    |
|      | Appropriate feedstuffs include:      Grass (pasture)     Hay or hay cubes     Haylage or silage     Straw (only as a secondary source, for weight loss purposes)     Concentrates (formulated for horses) |                  |
| 10.1 | Applies only to horses fed silage or haylage.  Horses are vaccinated against botulism.  | O Yes O No O N/A |



# MANAGEMENT AND PROTOCOLS

The following sections cover herd health, your boarding agreement (if you have client horses), handling and training, caregiver training (e.g., staff, volunteers) responsible for looking after your horses, grooming, blanketing, equipment care, emergency preparedness, transportation, and euthanasia (if you use a non-veterinarian). Protocols (electronic or written) offer evidence of the management practices conducted by yourself and any caregivers.

### **HERD HEALTH**

This section corresponds with the following Criterion in the Facility Manual: 1. VCPR; 2. Herd Health Plan; 4. Hoof Care; and 5. Health and Identification Procedures.

If any of the requirements do not apply to your facility, indicate N/A where applicable.

| No  | Requirement   | Score         |
|-----|---|---------------|
| 1.0 | There is a VCPR Validation Form, signed and dated by the Attending Veterinarian and the facility owner annually.  Includes:   | O Yes<br>O No |
|     | <ul> <li>Attending Veterinarian's first and last name, clinic or business name and address, and phone number</li> <li>Attending Veterinarian's signature and date of signage</li> <li>Facility address</li> <li>Facility owner's first and last name, and phone number</li> <li>Facility owner's signature and date of signage</li> <li>A statement that a VCPR is established between the Attending Veterinarian and facility owner</li> </ul> |               |
|     | Attending veterinarian refers to the veterinarian who you primarily seek advice from about maintaining the health of horses at your facility.   |               |



| 2.0 | There is a Herd Health Plan Review Form, signed and dated by the Attending Veterinarian and the facility owner annually.  Includes:  • Attending Veterinarian's first and last name, clinic or business name and address, and phone number  • Attending Veterinarian's signature and date of signage  • Facility address  • Facility owner's first and last name, and phone number  • Facility owner's signature and date of signage  • A statement that the Attending Veterinarian has reviewed your facility's herd health plan and the protocols are appropriate for maintaining herd health | O Yes<br>O No    |
|-----|---|------------------|
| 2.1 | There is a Parasite Control Protocol.  Includes:  Parasite control method(s) Frequency of method(s) used  | O Yes<br>O No    |
| 2.2 | There are Parasite Control Records.  Includes:  • Horse identifier (e.g., name of horse)  • Date of parasite treatment or date of testing (e.g., fecal egg counts)  | O Yes<br>O No    |
| 2.3 | If the Attending Veterinarian has advised to vaccinate horses, there is a Vaccination Protocol.  Includes:  Types of vaccine(s) administered Frequency of vaccination   | O Yes O No O N/A |
| 2.4 | If the Attending Veterinarian has advised to vaccinate horses, there are Vaccination Records.  Includes:  Horse identifier (e.g., name of horse) Vaccines administered Date of vaccine administration   | O Yes O No O N/A |



| 2.5 | There is a Sick and Injured Horses Protocol.  | O Yes |
|-----|---|-------|
|     | <ul> <li>Includes:</li> <li>All horses are observed at least once per day for signs of well-being.</li> <li>Information about signs of lameness and laminitis (founder), dental problems, colic, and infectious diseases (e.g., respiratory infections, equine infectious anemia), and parasitism in horses.</li> <li>Information about signs of toxicity in horses (e.g., from toxic plant</li> </ul>  | O No  |
|     | <ul> <li>Information about normal vital signs of horses.</li> <li>Sick or injured horses are identified and treated, and veterinarian advice is sought on appropriate care and treatment if horses do not improve, or arrangements for euthanasia are made, as needed.</li> <li>Medications are purchased from regulated and reputable sources, including a veterinarian or veterinary clinic, pharmacy or veterinary pharmacy, or licensed animal medicine outlet.</li> <li>Medications administered to horses are used in consultation with and as per the advice and directions of the prescribing veterinarian.</li> </ul>  |       |
|     | If your facility has client horses, your protocol must also include:  |       |
|     | <ul> <li>Actions taken to notify a client if their horse is sick or injured.</li> <li>Actions taken to treat a client's horse that is sick or injured, if the client cannot be contacted in a reasonable amount of time or refuses to provide treatment, causing the horse to be in distress.</li> </ul>  |       |
| 2.6 | There is an Infectious Disease Protocol.  | O Yes |
|     | Includes:   | O No  |
|     | <ul> <li>There is an isolation plan in place. This can be a designated segregation area (indoors or outdoors) where new arrivals or sick horses are housed. At minimum, the segregation area must prevent nose-to-nose contact between horses. An isolation plan may also include isolating the entire property at the discretion of the Attending Veterinarian.</li> <li>Water and feed sources in the segregation area are cleaned between uses.</li> <li>Actions taken to segregate suspected or confirmed cases of infectious disease and prevent or limit the spread of disease.</li> <li>Authorities are advised of horses that are suspected or confirmed to have a federally reportable disease.</li> </ul> |       |



| 9.3 | There is a plan to reasonably segregate any sick or injured horses for quarantine or treatment purposes. At minimum, nose-to-nose contact between horses must be prevented.  If there is an existing segregation area, view the area. The area can be indoors or outdoors. If there is nowhere to segregate horses on the property, see the Infectious Disease Protocol.   | O Yes<br>O No    |
|-----|--|------------------|
|     | Plan:  |                  |
|     | Considerations:  |                  |
|     | <ul> <li>Where is a horse housed if they are ill or injured and need to be segregated?</li> <li>How do you prevent the segregated horse from having nose-to-nose contact with other horses?</li> <li>What does your veterinarian recommend if segregation at your facility is not possible?</li> </ul>   |                  |
| 2.7 | There is a Heat and Cold Stress Protocol.  | O Yes            |
|     | Includes:  | O No             |
|     | <ul> <li>Information about signs of heat and cold stress in horses.</li> </ul>   |                  |
|     | Actions taken to assist horses that show signs of heat or cold stress.   |                  |
| 2.8 | <ul> <li>If your facility has gestating mares or jennets, there is a Foaling and Newborn Care Protocol.</li> <li>Includes: <ul> <li>Gestating mares or jennets are observed close to foaling at least twice per day for signs of health, well-being, and foaling.</li> <li>Expert advice or help from veterinarian or experienced personnel is sought if any abnormalities are observed during birth (e.g., foal is not visible after 10 minutes of active labour), following birth or as needed.</li> <li>Newborn foals are monitored to ensure they can rise and suckle unassisted.</li> <li>Foals receive colostrum. If colostrum is not available, an alternative antibody source is readily available.</li> </ul> </li> </ul> | O Yes O No O N/A |



| 4.0 | There is a Farrier Schedule.  | O Yes            |
|-----|---|------------------|
| 7.0 |   | O No             |
|     | Includes:   |                  |
|     | Horse identifier (e.g., name of horse). All horses at your facility are reflected in the schedule, including client horses ( <i>if applicable</i> )   |                  |
|     | <ul> <li>Farrier first and last name, or company name</li> </ul>  |                  |
|     | <ul> <li>Scheduled trimming date(s)</li> </ul>  |                  |
| 4.1 | If your facility has client horses, the Boarding Agreement includes the following:  • A statement that clients are responsible for ensuring their horse's   | O Yes O No O N/A |
|     | hooves are trimmed and maintained to prevent hoof overgrowth and abnormalities (e.g., cracks) that may cause injury or discomfort to horses  • Actions taken if a client's horse is in distress due to hoof overgrowth or abnormalities                 |                  |
|     | Client horses refer to any horses at the facility that are owned by other parties. For example, any horses that are boarded at the facility for care, training or exercise, rehabilitation, or breeding purposes are considered client horses.          |                  |
| 5.0 | If your facility uses a non-veterinarian (operator) to perform castration on horses, and it is permittable by your provincial legislation, there is a VCPR Castration Validation Form.  | O Yes O No O N/A |
|     | Includes:   | 0 1 111          |
|     | <ul> <li>First and last name of the operator, business name (if applicable), and<br/>phone number.</li> </ul>   |                  |
|     | <ul> <li>Operator's signature and date of signage.</li> </ul>   |                  |
|     | <ul> <li>Veterinarian's first and last name, clinic or business name, and phone<br/>number.</li> </ul>  |                  |
|     | <ul> <li>Veterinarian's signature and date of signage.</li> </ul>   |                  |
|     | <ul> <li>The operator has a valid VCPR with a licensed veterinarian who is<br/>willing to supply training (on the procedure and pain management),<br/>prescribe the required drugs for pain control and provide interventions<br/>if needed.</li> </ul> |                  |
|     | • The operator has the competencies to perform castration and meets the requirements in the Code of Practice.   |                  |



| 5.1 | If your facility uses a non-veterinarian (operator) to perform dental procedures on horses, there is a VCPR Validation Dental Form.  Includes:  • First and last name of the operator, and phone number  • Operator's signature and date of signage  • Veterinarian's first and last name, clinic or business name, and phone number  • Veterinarian's signature and date of signage  • The operator has a valid VCPR with a licensed veterinarian who is willing to supply training (on the procedure and pain management), diagnose oral disease or other issues, prescribe the required drugs for pain control, sedation, and provide interventions if needed  • The operator has the competencies to perform dental procedures and only works under direct veterinary supervision | O Yes O No O N/A |
|-----|---|------------------|
| 5.2 | If your facility performs horse identification procedures, there is an Identification Protocol.  Identification procedures include hot-iron or freeze branding, tattooing, and microchipping.  Includes:  Identification method(s) used Handling, stress, and pain mitigation measures used Horses are never branded on the jaw or cheek or branded when wet (if applicable)  | O Yes O No O N/A |
| 5.3 | Tail docking of horses is prohibited.   | O Yes<br>O No    |



### **BOARDING AGREEMENT**

This section corresponds the following Criterion in the Facility Manual: 3. Boarding Agreement.

Does your facility have client horses? Yes / No

*Client horses* refer to any horses at your facility that are owned by other parties. For example, any horses that are boarded at your facility for care, training or exercise, rehabilitation, or breeding purposes are considered client horses.

If Yes, then score the requirements below. If No, score as N/A.



|            | J                                  |
|------------|------------------------------------|
|            | 0                                  |
| your uning | 0                                  |
| 1          | nere is a<br>and it is<br>Boarding |

#### O Yes

- O No
- O N/A

#### Includes:

- Horses must not be subjected to avoidable pain or abuse during handling or training, or that causes injury as a direct result of the training method used
- Horses must not be subjected to training methods or actions that are abusive or intentionally injurious
- Horses must only undergo training that matches their physical capabilities and level of maturity or age
- The use of electric spurs or prods, or any other shockrelated training devices on horses is prohibited
- Tail nicking and blocking are prohibited
- Violations of the agreement will be reported to designated persons
- First and last name, and phone number or email address of the person(s) responsible for addressing abuse complaints (e.g., facility owner or manager)

#### The Agreement also includes a list of horse handling and training methods that are prohibited, which at minimum must include:

- Soring
- Excessive use of whips or spurs
- Jabbing a horse in the mouth with the bit
- Forcing the horse's head position by the tying the horse to a fixed object
- Hitting or kicking a horse
- Use of nosebands in a way that impedes a horse's ability to breathe or is tight enough to cause pain or injury
- Riding or driving an exhausted, lame, or injured horse
- Off-label use of medications to alter performance or behaviour without consulting with the prescribing veterinarian
- Hypersensitizing a horse



| 6.1 | If your facility has caregivers, there is a Factsheet outlining signs of fear and stress in horses included in the Caregiver Training Program.  Includes:   | O Yes O No O N/A |
|-----|---|------------------|
|     | <ul> <li>Information on signs of fear and stress in horses.</li> <li>Explanation of the handling concepts: field of vision, flight zone, and point of balance</li> </ul>  |                  |
| 6.2 | <ul> <li>If your facility tethers horses, there is a Tethering Protocol.</li> <li>Includes: <ul> <li>Tethering method(s) and equipment used.</li> <li>Safety precautions implemented to prevent injury to horses, including the direct supervision of horses when tethered.</li> <li>Tethering is only used to restrain horses off-site temporarily (e.g., during backpacking or trail riding).</li> </ul> </li> </ul>  | O Yes O No O N/A |
| 6.3 | There is at least one Zero-Abuse Policy posted in a location visible to all persons.  Includes:  • Abuse towards horses is prohibited.  • First and last name, and phone number or email address of the person(s) responsible for addressing abuse complaints (e.g., facility owner or manager).  | O Yes<br>O No    |
| 6.4 | There is a plan for reporting abuse towards horses at your facility.  Plan:  Considerations:  Who is designated to receive reports of abuse?  What actions are taken to address reports of abuse?  Examples of appropriate actions:  Reviewing your facility's Zero-Abuse Policy with the individual and providing a verbal or written warning.  Terminating employment, boarding, or other services with the individual (if applicable).  Reporting the abuse to appropriate enforcement authorities, as needed. | O Yes O No       |



### **CAREGIVER TRAINING**

### Corresponds the following Criterion in the Facility Manual: 7. Caregiver Training.

Does your facility have any caregivers? Yes / No

A *caregiver* is defined as anyone who has responsibilities related to the care and handling of the horses at the facility. For example, caregivers may be individuals who are employees, volunteers, or working students.

#### If Yes, then score the requirements below. If No, score as N/A.

Does your facility have a Caregiver Training Program? Yes / No

Does each document in the Caregiver Training Program have:

- (a) Date of last review? Yes / No
- (b) First and last name, or initials of the reviewer on each document? Yes / No

The Caregiver Training Program includes the following documents:

| ☐ (7.0a) All applicable Herd Health Plan protocols        |
|---|
| ☐ (7.0b) Equine Code of Practice Factsheet                |
| ☐ (7.0c) Humane Handling and Training Ethics Agreement    |
| ☐ (7.0d) Signs of Fear and Distress Factsheet             |
| ☐ (7.0e) Emergency Preparedness Protocol                  |
| ☐ (7.0f) Identification Protocol ( <i>if applicable</i> ) |
| ☐ (7.0g) Tethering Protocol ( <i>if applicable</i> )      |
| ☐ (7.0h) Blanketing Protocol ( <i>if applicable</i> )     |
| ☐ (7.0i) Transportation Protocol ( <i>if applicable</i> ) |
| ☐ (7.0j) Transportation Decision Tree                     |
| ☐ (7.0k) Euthanasia Protocol ( <i>if applicable</i> )     |

| No  | Requirement   |                  |
|-----|---|------------------|
| 7.3 | There are Caregiver Training Records demonstrating that all caregivers have reviewed the Caregiver Training Program, as needed. | O Yes O No O N/A |
| 7.3 | There is an Equine Code of Practice Factsheet included in the Caregiver Training Program.                                       | O Yes O No O N/A |



Do any caregivers solely speak/read a language other than English? Yes / No

### If Yes, then score the requirement below. If No, score as N/A.

| ľ | No  | Requirement   |                  |
|---|-----|---|------------------|
| 7 | 7.1 | All documents in the Caregiver Training Program translated into languages understood by all caregivers. | O Yes O No O N/A |

# **GROOMING, BLANKETING, AND EQUIPMENT**

Corresponds with the following Criterion in the Facility Manual: 11. Grooming, Equipment, and Blankets.

If any of the requirements do not apply to your facility, indicate N/A where applicable.

| No   | Requirement  | Met?             |
|------|--|------------------|
| 11.0 | There is at least one Equipment Factsheet posted in a location that is visible to all persons.  Includes:  • Information about physical and behavioural signs of ill-fitting equipment in horses.  | O Yes<br>O No    |
| 11.1 | <ul> <li>Applicable if horses are blanketed at your facility. There is at least one Blanketing Protocol posted in a location that is visible to all persons.</li> <li>Includes: <ul> <li>The condition of the horse beneath the blanket is examined at least once per week to observe the horse's body condition and for signs of skin infections and ill-fitting blankets (e.g., rubs or abrasions).</li> <li>Information about factors to consider when blanketing (e.g., clipped or unclipped hair coat, body condition, health status, weather conditions).</li> <li>Information about the importance of maintaining blankets to ensure good condition (e.g., washing, repairs, waterproofing).</li> </ul> </li> </ul> | O Yes O No O N/A |
| 11.2 | Applicable for restraint equipment owned by the facility (client owned equipment excluded).  | O Yes<br>O No    |



|      | There is a plan to inspect and maintain restraint equipment to prevent discomfort or injury to horses, as needed.  | O N/A                |
|------|--|----------------------|
|      | Plan details:  |                      |
|      | Examples of restraint equipment for horses include halters, lead ropes, leg hobbles, lead chains (shanks), stocks, or chutes.  |                      |
|      | Considerations:  |                      |
|      | <ul> <li>How often do you inspect restraint equipment for signs of repair?</li> <li>What actions do you take if you notice issues with restraint equipment?</li> </ul> |                      |
|      |  | 0.77                 |
| 11.3 | There is a plan for inspecting horses for burdocks and removing burdocks from horses that may cause pain, discomfort, or injury promptly?                              | O Yes                |
|      | moni noises that may cause pain, disconnoit, or mility promptly;   | $\sim$ $\sim$ $\sim$ |
|      | Plan:  | O No                 |
|      |  | O No                 |



# **EMERGENCY PREPAREDNESS**

Corresponds the following Criterion in the Facility Manual: 12. Emergency Preparedness.

If any of the requirements do not apply to your facility, indicate N/A where applicable.

| No   | Requirement  |       |
|------|--|-------|
| 12.0 | There is an Emergency Preparedness Protocol.   | O Yes |
|      | Includes these types of emergencies:   | O No  |
|      | • Fire.  |       |
|      | Power failure or outage (including loss of water for facilities with automatic waterers or electric well pumps).   |       |
|      | • Natural disasters or events common to your facility's area (e.g., flood, wildfire, winter storm, extreme heat or cold).                                  |       |
|      | • Large animal rescue (e.g., horse becomes stuck, or entrapped on their side or back).   |       |
|      | For each type of emergency above, the protocol must include:   |       |
|      | <ul> <li>Actions to take. Actions must include the provision of shelter, food,<br/>and water to horses during or in preparation of emergencies.</li> </ul> |       |
|      | • For fire emergencies, horses are secured in a safe location after being evacuated from a barn.   |       |
|      | • Emergency supplies or equipment required for actions and where it is stored or located (e.g., fire extinguisher, first aid kit).                         |       |
| 12.1 | If your facility has client horses, there is a Client Contact List.  | O Yes |
|      | Includes:  | O No  |
|      | Horse identifier (e.g., name of horse)   | O N/A |
|      | Horse owner's first and last name, and phone number  |       |
|      | Alternate emergency contact (first and last name, and phone number)  |       |
|      | Horse's primary veterinarian's first and last name, clinic or business name, and phone number  |       |
|      | Horse's insurance company and insurer's phone number (if applicable).  |       |



| 12.2 | Emergency contact information is posted in a location visible to all persons.  Includes contact information (name and phone number) for the following:  • Facility owner or manager  • Local fire department, police, and ambulance  • Attending Veterinarian (or other veterinarian with emergency hours)  • Farrier  The full address of your facility and locations of any known facility hazards (e.g., propane tanks) and safeguards (e.g., power shut-offs, fire extinguishers) must also be posted. | O Yes<br>O No |
|------|--|---------------|
| 12.3 | Horse halters and lead ropes are on stall doors, near gates of paddocks, or another area that is easily accessible to all persons (e.g., by a barn entrance or exit) during an emergency.  | O Yes<br>O No |
| 12.4 | There is at least one up-to-date and inspected fire extinguisher in each barn and on the premises in an easily accessible location (e.g., near an entrance or exit).   | O Yes<br>O No |
| 9.12 | There is at least one No Smoking Policy posted in a location that is visible to all persons.   | O Yes<br>O No |

# **TRANSPORTATION**

Corresponds the following Criterion in the Facility Manual: 13. Transportation.

| No   | Requirement  |       |
|------|--|-------|
| 13.1 | There is a Transport Decision Tree posted in a location that is visible to all | O Yes |
|      | persons.   | O No  |



Do you transport horses to and from your facility? Yes / No

### If Yes, then score the requirements below. If No, score as N/A.

| No   | Requirement   |            |
|------|---|------------|
| 13.0 | There is a Transportation Protocol.  Includes:  | O Yes O No |
|      | <ul> <li>Horses are assessed for fitness prior to being loaded for transport with consideration of all relevant transport factors (e.g., total duration of anticipated trip, prevailing weather conditions).</li> <li>If the expected duration of the horse's time without access to feed or water is longer than 24 hours, horses must be fed and watered within 4 hours of being loaded. Horse must not be without access to feed, water, or rest for more than 28 hours, after which they must have a rest period of at least 8 consecutive hours before resuming their journey.</li> <li>Unfit horses are not transported, except to receive veterinary care on the advice of a veterinarian.</li> <li>Horses are individually assessed before loading an upon arrival to your facility.</li> <li>Horses are provided water upon arrival to your facility.</li> </ul> | O N/A      |
|      | If your facility has gestating mares or jennets, and/or mature stallions, the protocol must also include:   |            |
|      | <ul> <li>Mares or jennets in the last 10% of their gestation periods are not transported.</li> <li>Mares or jennets with its suckling offspring, and mature stallions must be segregated from all other animals during transport.</li> </ul>  |            |



# **EUTHANASIA**

### Corresponds the following Criterion in the Facility Manual: 14. Euthanasia.

Do you use non-veterinarian (operator) to euthanize horses? Yes / No

If Yes, then score the requirements below. If No, score as N/A.

| No   | Requirement   |               |
|------|---|---------------|
| 14.0 | If your facility uses a non-veterinarian (operator) for the euthanasia of horses, there is a Euthanasia Protocol. | O Yes<br>O No |
|      | Includes:   | O N/A         |
|      | Operator's first and last name, and phone number.   |               |
|      | <ul> <li>Acceptable on-site euthanasia method(s) (refer to the Code of<br/>Practice).</li> </ul>                  |               |
|      | Once the euthanasia method is performed, unconsciousness is confirmed immediately and when it is safe to do so.   |               |
|      | A secondary euthanasia step or method.  |               |
|      | Death is confirmed before moving or leaving the horse.  |               |
|      | Disposal is in accordance with provincial and municipal regulations   |               |



# **APPENDIX A: SAMPLING GUIDE**

**Sampling** is when you observe a portion of a population, to make appropriate assumptions about your herd. It saves time while still giving you a representative observation of the condition of your horses. The thresholds for each section (observing paddocks, stalls, or horses) are listed below.

For example, if you have 16 horses over 5 years of age at your facility, this falls under the 15-19 category. Therefore, you would randomly select 13 horses to observe during your assessment.

Sampling tables adapted from Animal Welfare Indicators. (2015a) AWIN Welfare Assessment Protocol for Horses.

**Table A. Horse Observations Sampling** 

| Number of Horses | Suggested Sample Size |
|------------------|-----------------------|
| 1-14             | All horses            |
| 15-19            | 13 horses             |
| 20-24            | 16 horses             |
| 25-29            | 19 horses             |
| 30-34            | 24 horses             |
| 40-44            | 26 horses             |
| 45-49            | 28 horses             |
| 50-59            | 29 horses             |
| 60-69            | 32 horses             |
| 70-79            | 35 horses             |
| 80-89            | 37 horses             |
| 90-99            | 39 horses             |
| 100+             | 41 horses             |



Table B. Paddock Sampling

| Number of Paddocks | Suggested Sample Size |
|--------------------|-----------------------|
| 1-14               | All paddocks          |
| 15-19              | 13 paddocks           |
| 20-24              | 16 paddocks           |
| 25-29              | 19 paddocks           |
| 30-34              | 24 paddocks           |
| 40-44              | 26 paddocks           |

**Table C. Stall Sampling** 

| Number of Stalls<br>(in all barns) | Suggested Sample Size |
|------------------------------------|-----------------------|
| 1-14                               | All stalls            |
| 15-19                              | 13 stalls             |
| 20-24                              | 16 stalls             |
| 25-29                              | 19 stalls             |
| 30-34                              | 24 stalls             |
| 40-44                              | 26 stalls             |