Disaster Care and Shelter Considerations for Livestock, Service, and Companion Animals in the COVID-19 Pandemic Environment

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This guidance was developed with input from United States Department of Agriculture (USDA) Animal and Plant Health Inspection Services (APHIS) Animal Care and the California Office of Emergency Services, and is based on existing best practices, aligning with pandemic guidance from the California Department of Public Health (CDPH), Centers for Disease Control and Prevention (CDC), American Veterinary Medical Association (AVMA), National Animal Rescue and Sheltering Coalition (NARSC), and others. Due to the fluid nature of the coronavirus disease 2019 (COVID-19) pandemic situation, guidance may change. Jurisdictions and entities should consult the most updated guidance when planning for disaster sheltering during a highly contagious disease or pandemic.

Preparing for Emergency Animal Care & Shelter During a Pandemic

The scientific name of the new strain of coronavirus is SARS-CoV-2. In people, the disease caused by the virus is called Coronavirus Disease 2019, also known as COVID-19. Because we are addressing the virus itself in the context of animal health, we refer to it as SARS-CoV-2. When referring to the disease in people, we will refer to it as COVID-19.

The provision of mass care and shelter to displaced animals during the 2020 and 2021 fire seasons and beyond will be more complex due to the ongoing COVID-19 pandemic. Traditional approaches to sheltering will need to be aligned with guidance and best practices established by local and county health officials, the CDC, and the CDPH. The purpose of this document is to outline options and considerations in disaster planning for animal population needs in a highly infectious disease environment.

This guidance provides a range of possible sheltering options for livestock and companion animals, many of which may require conversations at executive levels within your agency or organization as a means of reaching consensus on suitable approaches and implementation. For this reason, preplanning is highly encouraged. Engagement of external stakeholders early in the planning process will ensure integration of comprehensive considerations.

Traditional natural disaster preparedness principles remain valid and must be integrated with COVID-19 specific considerations, including necessary amendments to plans and procedures. Shelter plans will need to implement protocols for social distancing, face coverings or personal protective equipment (PPE), hygiene, isolation, and quarantine, as well as other COVID-19 requirements.

Response to emergencies and disasters while maintaining concurrent COVID-19 mitigation and response requires careful and strategic planning. While COVID-19 remains a threat, many resources, including those historically available for response, may be unavailable. Responders, employees, and volunteers have and will continue to be impacted by the pandemic, whether through illness or other personal or financial hardships. To the extent possible, it is important to build redundancy into emergency response plan roles and responsibilities. This will mitigate impacts when personnel are not available to perform traditional response roles and will facilitate a broader depth of staffing in each critical position.

It is important to encourage livestock, service, and companion animal owners to develop, practice, and frequently review their own emergency preparedness plans for addressing animal needs in emergencies. For livestock emergency preparedness see the USDA's Do YOU Have a Plan for Your Livestock Should Disaster Strike? USDA Preparedness Fact Sheet, October
For service, companion animal, and pet emergency preparedness, see the AVMAs resource tool Pets and Disasters.

Planning Assumptions

- The pandemic will continue to pose a threat to communities involved in the disaster, and isolation or shelter-in-place (i.e., shelter in the animal’s current location – pasture, boarding facility, etc. rather than moving them to shelter-at-home) orders will continue to be the best recommended disease mitigation practices.
  - Sheltering-in-place may include sheltering-at-home but should be not confused with stay-at-home orders.
- PPE will be limited and there may be challenges associated with procurement.
- Traditional pools of trained shelter volunteers may be unavailable for placement in shelters and the County and State may be requested to assist in identifying available personnel to work in non-traditional roles.
- Social distancing will continue to be the best practice to curb the spread of COVID-19.
- Evacuations will require individuals with confirmed cases of a highly contagious disease, such as COVID-19, to leave their home or County/State-supported site isolation and quarantine facilities, along with their animals.
- The ability of Community Animal Response Teams (CARTS), nongovernmental organizations (NGOs), and other veterinary medical volunteers to staff shelters will be limited due to the widespread nature of the pandemic’s impacts. Additionally, a large portion of the volunteer pool may be considered an ‘at risk’ population due to their age or underlying medical conditions, which will limit their ability to deploy, hampering the ability of these entities to respond.
- Due to social distancing and isolation efforts, there may be a reluctance for evacuees to allow their animals to shelter in a congregate environment.
- Residents with pets/animals may have a greater reluctance to evacuate.
- Evacuations for individuals with animals who are transportation disadvantaged, including those who rely on public transit, will be more challenging because of the evacuees’ possible reluctance to ride buses and similar transportation.

Planning Partners

Here is a list of departments/agencies that could be involved in advanced planning conversations for animal sheltering:

- California Department of Food and Agriculture
- California Governor’s Office of Emergency Services
- California Department of Social Services
- Local Government Offices of Emergency Management
- Animal Control/ animal shelter(s)
- University of California, Davis Veterinary Emergency Response Team
- Procurement (Public Works, Department of Finance)
- American Red Cross
- Fairgrounds
- Federal Emergency Management Agency (FEMA)
- California Veterinary Medical Association/ Veterinary Medical Reserve Corp.
• Community Animal Response Team(s) and other volunteer organizations
• County Agriculture Advisors and Commissioners.
• Appointed and elected officials (as deemed appropriate)

General Planning Considerations
• People suspected of or with a confirmed diagnosis of COVID-19 should avoid contact with animals, including pets, livestock, and wildlife. The primary means of people becoming infected with the virus that causes COVID-19 is through person-to-person spread.

• Based on limited data available, the risk of animals, including pets, of spreading SARS-CoV-2 to people is considered to be low. However, in the event a companion animal tests positive for SARS-CoV-2, state, local and federal public health and animal health partners should be prepared to take additional steps to mitigate potential risks associated with exposure to these animals. See CDC Guidance If You Have Pets and COVID-19 Pets and Animals Frequently Asked Questions. Also see the AVMA Interim Recommendations for intake of companion animals from households where humans with COVID-19 are present.

• The greatest risk of COVID-19 exposure to staff, volunteers, and the public at animal shelters comes from person-to-person contact. Shelters should follow CDC guidance on preventing COVID-19 exposure in businesses to help plan, prepare, and respond to COVID-19. In particular, staff and volunteers should not come to work if sick and should take steps to help prevent the spread of COVID-19. Interventions to reduce the risk of COVID-19 transmission are the same at an animal shelter or clinic as in other aspects of daily life; follow up to date information from the CDC on how to protect yourself.

• Human sheltering strategies will impact animal sheltering strategies. Animal shelter solutions should complement those occurring with humans – where possible, locate animals adjacent to human shelters or shelter pets with their families in hotel rooms wherever allowed.

• Service animals are not pets. See the CDC Guidance for Handlers of Service and Therapy Animals. Ensure individuals with disabilities or access and functional needs are not separated from assistive devices, service animals, or personal care assistants during evacuation and transportation.

• Establish a worksite-specific contagious disease prevention plan for all emergency animal shelter facilities, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at the facility to implement the plan. This may be done in advance if emergency shelter facilities are pre-identified.

• Train and communicate with employees, employee representatives, volunteers, and visitors on the plan.

• When the worksite-specific contagious disease prevention plan is activated, designate staff to regularly monitor the facility during the day for compliance with the plan and document and correct deficiencies identified.

• Regularly review and modify activities, as necessary, to adhere to the most updated COVID-19 and/or infectious disease guidance. Failure to do so could result in workplace illnesses that may cause a need for additional resources or operational changes.

• When possible, administrative duties can be done from home, a hotel, or other remote location, to reduce the number and density of responders at the shelter. The care and handling of animals can be accomplished only on-site.
Emergency Animal Sheltering During COVID-19 Pandemic

Following the NARSC guidance, four types of animal sheltering strategies are recognized by this document, including:

1. Hotels – non-congregate shelters, to include humans with animals sheltering in private hotel rooms, or other private lodging.
2. Cohabitated shelter – congregate co-habitational shelters, to include humans and animals sheltering in the same facility.
3. Collocated shelter – congregate co-located shelters, to include humans and animals sheltered on the same site but animals are sheltered in a separate facility from humans.
4. Animal-only shelter – congregate animal only shelters.

Another commonly used sheltering strategy for livestock and other large animals is sheltering-in-place (i.e., shelter in the animal’s current location – pasture, boarding facility, etc. and may include sheltering at the animal’s home premises). This strategy requires personnel coordinating with the Operational Area (County) Emergency Operations Center to gain approved access to go into evacuated areas to care for and feed these animals.

In the chaos of emergency evacuations, it is likely that members of the public will flock to specific locations previously known to support animal shelter needs, such as fairgrounds used especially for large animals. It is important to coordinate consistent messaging by working with the local city or county Emergency Operations Center Public Information Officer(s) to ensure public advisories of shelter locations are widely disseminated. In the event the public preemptively bring animals to a shelter location that has not yet been recognized or activated by local or county officials, the shelter operator should immediately notify the local or County Emergency Management and Animal Control Agencies so that Emergency Operations Center recognition and support for the animal shelter can be arranged.

Congregate Shelter Intake and Animal Screening

Establishing an intake or triage area before entering the general population is important. To minimize potential disease transmission risks, when possible, have animals stay with their owners in vehicles or social distance in the parking area until they are ready to be evaluated at intake. Provide intake forms for people to complete while waiting. Keep animals from the same family or those that were evacuated together physically distanced from other animals awaiting intake screening. Pre-planning is fundamental to limit the number of animals comingling before intake or triage.

Each animal, including livestock, entering the congregate animal shelter should be examined by a veterinary professional or trained personnel. Masks, gloves, and gowns or coveralls should be worn while doing intake exams to reduce contagious disease risks. Figures 1 and 2 depict a set of basic COVID-19 screening questions owners or other civilians bringing animals to the shelter should be asked to evaluate the animal exposure risk. The intake screening/triage area should be separate from the shelter animal populations and public foot traffic areas to reduce exposure. There is no need to bathe an animal because of COVID-19 concerns; at this time, there is no evidence that the virus can spread to people from the skin or fur of pets. Do not wipe or bathe pets with chemical disinfectants, alcohol, hydrogen peroxide, or other products, such as hand sanitizer, counter-cleaning wipes, or other industrial or surface cleaners.
• Animals with no signs of illness suggestive of a contagious disease may enter the congregated general animal population.
• Animals that have signs of illness should be placed in an isolation area. Animals exhibiting signs of contagious disease or other serious health problems should be examined by a veterinarian.
  o Isolation is an area designated for animals exhibiting clinical signs of illness. Prompt removal of sick animals from the general population is the single most important step in controlling a communicable disease outbreak. Isolation separates animals exhibiting clinical signs of a contagious disease from other animals who are not showing clinical signs, with the intent to prevent spread of the suspected contagion.
• Animals that have been exposed to infectious disease within the past two-weeks, such as a confirmed human and/or animal case of COVID-19, should be housed in a separate quarantine area where they can be monitored for signs of illness.
  o Quarantine is an area designated to monitor animals who have confirmed exposure to an infectious disease but are not exhibiting clinical signs of illness. All exposed animals should be considered an infectious risk regardless of vaccine status and these animals should be quarantined to protect other animals from exposure. Quarantine separates and restricts the movement of animals who were exposed to a contagious disease to monitor if they become clinical and to prevent further potential spread of the contagion.
Communicable and Infectious Diseases Animal Shelter Intake Flowchart

Animal displays signs of communicable or infectious disease

Shelter Intake

SHELTER INTAKE

Complete
• Owner Risk Questionnaire
• Animal Health Screening

Animal has no signs of illness and no known exposure to positive cases of infectious disease

Animal displays signs of communicable or infectious disease or has known exposure to positive cases of infectious disease

Shelter veterinarian determines individual animal quarantine/isolation period is complete

Animal placed in either quarantine or isolation area

Animal placed in quarantine when confirmed exposure but no symptoms of illness present

Quarantined animal shows symptoms of illness

General population animal shelter

Animal has no signs of illness and no known exposure to positive cases of infectious disease

Animal displayed in isolation when symptoms of illness are present

Figure 1: Basic COVID-19 Intake screening questions to assess animal risk.
When possible, ask the animal’s owner about the animal’s recent exposure to infectious diseases, including COVID-19. Use that information to determine how to classify each animal and to assess the risk to the animal shelter. Figure 2 below depicts risk levels identified by CDC and provided by the AVMA.

![Risk Levels Diagram](Credit: AVMA Guidance Protecting Veterinary Team During the Pandemic)

**Small and Large Animal Isolation, Quarantine, and Veterinary Care**
- Follow [CDC guidance on zoonoses prevention in emergency animal sheltering](https://www.cdc.gov/zoonoses/animalshelters/index.html).
- The shelter veterinary professional staff should determine needs for isolation and quarantine areas and determine the timeframe necessary for each animal’s required isolation or quarantine.
- If space is limited or the disease situation warrants, consider locating isolation and quarantine facilities off-site from the general animal congregate shelter site.
• Implement isolation and quarantine areas that are separate from one another and separate from the rest of the congregated animals; are located away from intake of new animals; and are in an area not freely accessible by the general public.
• Place animals that were exposed to infectious disease into a separate quarantine area; monitor these animals at least daily for signs that would indicate they are sick. If you see signs of illness, move that animal into isolation with the other animals showing signs of illness. Any animals with which the ill animal was housed or had contact should remain in quarantine for the full designated period following their last contact with the ill animal.
• Place signage on entrances of isolation and quarantine areas, indicating what animals are in each area.
• Do not move animals in or out of these areas unless moving an animal to isolation due to signs of illness or releasing at the end of successful quarantine.
• To prevent the spread of a known contagious disease, staff should be dedicated to work solely with either isolated or quarantined animals. Alternatively, work in these areas should be scheduled after tending to other animals to avoid carrying any disease into the general population. Staff should wear appropriate PPE upon entering these areas and staff should remove PPE upon exiting these areas and don new PPE prior to entering another isolation and quarantine area.
• Maintain a clean and sanitary environment, cleaning up feces and other wastes, ensuring not to track organic matter out of isolation and quarantine areas.
• Refer to the CDC One Health Toolkit for companion animals positive for SARS-CoV-2.
• The use of telehealth practices (telemedicine, telemonitoring, teletriage, and teleadvice, etc.) when appropriate, could extend and conserve veterinarian resources. It is important to be aware of the Veterinary Medical Board restrictions on telemedicine and the establishment of a VCPR. Limited veterinary resources may not allow veterinarians to be on-site at the shelter continuously; having access to video calls through which information and visuals can be shared could be critical and effectively expand veterinary support. These practices may also reduce the need for additional people to be onsite, potentially reducing COVID-19 risk and exposure.
Other Small and Large Animal Shelter Considerations

- Plan for extra space requirements within the shelter. Whenever possible, house animals from different households with 6 feet between cages, crates, pens, or kennels. This will both mitigate potential infectious disease exposure and help to enable effective physical distancing between shelter workers.
  - Using a “pods” concept to keep animals from the same households together, cared for by the same worker, and separate from other household pods can help avoid cross-contamination and mitigate disease spread. All animals within the pod should be treated the same, meaning if one animal from the pod is moved to quarantine, the remaining pod members should be moved into quarantine. If one animal in the pod exhibits clinical signs of infection, it would be ideal to move the infected animal to isolation. The remaining pod members should be moved to or kept in quarantine for observation.

- Practice and post signage for infectious disease mitigation, including infographics for face covering, social distancing, and hand hygiene reminders.
• Increase hygiene stations—hand-washing stations and hand sanitizer dispensers--throughout the animal shelter, at intake, near the animal examination area(s), and in other high traffic/high touch areas.
• **Wash hands** before and after interacting with animals or being in animal areas. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.

**Animal Testing**
• Routine testing for COVID-19 in animals is **not recommended** by CDC, USDA, nor AVMA.
• If a sheltered animal that has had contact with a person with COVID-19 develops illness, consult with public health and animal health officials on whether testing for SARS-CoV2 is indicated. Outline the process for animals that will be adopted or sent to a foster home; animals should be held for a period of time or tested for infectious disease(s), as determined by the shelter’s veterinarian.

**Managing Shelter Workers Exposure**
• Refer to the local county public health guidelines and the recommendations provided by the CDC.
• Implement daily health screening procedures—symptom inventory, temperature check-- with shelter volunteers and staff before entering the facility. Consider that many volunteers may serve in the shelter for just one or two days a week while others are present every day.
• Ensure each animal shelter has contingency plans in case someone working at the shelter becomes sick with symptoms of COVID-19 and in case of detection of a positive case of COVID-19 in shelter workers. Ensure the plan outlines procedures for quarantine of exposed staff.
  o Refer to AVMA guidance for Managing Veterinary Employees with Confirmed or Suspected COVID-19 Exposure.[2](https://www.avma.org/aboutavma/animal-health/animal-welfare-handbooks/managing-employees-covid-19).
  o Refer to CDPH’s guidance on Responding to COVID-19 in the Workplace for Employers.[3](https://www.cdph.ca.gov/Programs/CID/DCDC/COVID19/CDCPH%20Response%20Guidance%20for%20COVID-19%20in%20the%20Workplace%20for%20Employers%20-%20Final.pdf).

**Personal Protective Equipment**
• Wear face coverings and abide by other recommended infection prevention practices throughout the shelter.
• Wear PPE per CDC and AVMA guidance when working with quarantined and isolated animals.
  • Refer to CDC guidance Using Personal Protective Equipment (PPE).[4](https://www.cdc.gov/ occupationalhealthongoingtraining/usingppe.html).
  • Refer to CDC guidance for veterinarians.[5](https://www.cdc.gov/veterinary/veterinary-guidance-for-ppe.html).
  • Refer to AVMA guidance for PPE Use in Veterinary Facilities.[6](https://www.avma.org/avi/avi-covid-19-avi-ppe-use-in-veterinary-facilities).

**Cleaning and Disinfection**
• Clean visibly dirty surfaces before applying disinfection. This is a best practice measure for the prevention of COVID-19 and other viral respiratory illnesses.
• Implement increased and more frequent cleaning and disinfection procedures for restrooms and high touch areas.
• Clean and disinfect food and water bowls, carriers, cages, toys, vehicles, and animal handling equipment that come into contact with animals; especially between use with
animals from different households, and when possible do not share items between animals from different households.
  - Use CDC guidance for [veterinarians cleaning and disinfection](https://www.cdc.gov/vaccines/vrrpubs/index.html).
  - Refer to [EPA](https://www.epa.gov) and [CDC](https://www.cdc.gov) disinfection protocols.
  - Refer to Center for Food Security and Public Health [disinfection guidance](https://www.cdc.gov).

**Small and Large Animal Feeding and Care**

- When sharing staffing between general population and quarantined/isolated animals, schedule the feed and care for general population animals before caring for quarantined and isolated animals; wash hands frequently and in between caring for each animal population.
- Animal handling should address human health, animal health, and animal welfare needs.
- Limit the interaction of pets and large animals to immediate household members only (using matching ID collars and wristbands provided at intake, or similar system).
- Walk dogs outside in an area that can be readily sanitized; avoid direct contact with other companion animals to protect animal health. Stagger and limit exercise sessions to allow for adequate physical distancing between dog walkers.
- Clean up elimination using gloved hands and dispose of immediately; wash hands upon removing gloves.

**Resources**

- [American Veterinary Medical Association COVID-19 Resources](https://www.avma.org)
- [California Veterinary Medical Association COVID-19 Resources](https://www.cvma.org)
- [National Association of State Public Health Veterinarians Precautions for Zoonotic Disease Prevention in Veterinary Personnel](https://www.nashpv.org)
- [Louisiana Cohabitated Human / Household Pet Sheltering Toolkit](https://www.lamhs.org)
- [COVID-19 Operational Decision-Making / Shelter Facility Opening Checklist](https://www.cdc.gov)
- [Sheltering in COVID-19 Affected Areas](https://www.cdc.gov)
- [FEMA Pandemic Planning Considerations](https://www.fema.gov)

**References:**

- [University of Florida Management of Disease Outbreaks in Animal Shelters](https://www.ufl.edu)
- [CDC Guidance Animals and Coronavirus Disease](https://www.cdc.gov)
- [Evaluation for SARS-CoV-2 Testing in Animals](https://www.cdc.gov)
- [NARSC Emergency Animal Sheltering During Coronavirus Disease Pandemic](https://www.cdc.gov)