



## SPCA CERTIFIED Self-Assessment Checklist Laying Hens

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Farm name:

Person(s) conducting self-assessment:

Telephone number:

Date:

### General Farm Details:

Type of Operation:     Free-run                       Free-range                       Organic

Flock Size:

Total eggs sold annually (dozen):

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### **Member Statement**

*As part of this self-assessment, I have carefully reviewed the SPCA Certified Standards for the Raising and Handling of Egg Laying Hens, relevant records from my farm and updated the required registration forms to reflect any changes to my operation. All information submitted to the Certification Body is true and accurate to the best of my knowledge. I understand that additional unannounced visits by representatives of the SPCA Certified Labelling Program may be required, for which I hereby give my permission.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## FARM SELF-ASSESSMENT CHECKLIST: LAYING HENS

Space, Equipment, & Systems 2.1	Response	Comments
Feed & water availability checked twice daily	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Feed & water devices placed at appropriate height for bird size	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Birds travel less than 8 m to feed & water	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Type of feeder		
Feeder space (cm/bird or # of bells/pans per bird)		
Type of drinker		
Drinker space (cm/bird or # of nipples/bells/cups per bird)		

Feed Management & Nutrition 2.2	Response	Comments
Feed available at all times	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Feed meets hens nutritional needs (incl. source of calcium)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Insoluble grit provided	Y <input type="checkbox"/> / N <input type="checkbox"/>	
List of feed supplements/additives provided (incl. dosage & duration)	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Feed ingredient breakdown & analysis provided	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached

Current list of feed suppliers provided Y  / N

records viewed;  records attached

Assess and comment on feed quality, any concerns re: contamination or infestation.

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**Water Management & Hydration 2.3**      **Response**      **Comments**

Clean water available at all times Y  / N

Annual water test results available Y  / N

records viewed;  records attached

List of water supplements/additives provided (incl. dosage & duration) Y  / N

records viewed;  records attached

Water quality monitored regularly (assess and comment on quality, noting any concerns regarding colour or odour) Y  / N

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**Housing 3.1**      **Response**      **Comments**

Pullets sourced from cage-free rearing system Y  / N

Type of flooring (concrete, earth, etc.)

Are birds ever housed:

- in cages Y  / N
- on wire flooring Y  / N
- on fully slatted flooring Y  / N

Floor is flat, or with a slope < 8° Y  / N

If a multi-tiered system

- there are no more than 3 tiers above ground level Y  / N
- manure from upper tiers does not fall on those below Y  / N

- manure removal system does not interfere with or injure hens	Y <input type="checkbox"/> / N <input type="checkbox"/>
Driveways allow safe and unobstructed access to barn by transport vehicles	Y <input type="checkbox"/> / N <input type="checkbox"/>

Space Allowance 3.2	Response	Comments
Aviary tiers have 45 cm between each floor and ceiling	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	
Number of aviary levels & type (feeders, nest boxes, water nipples, perches)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Dimensions of barn (or include on map) or total area of living space incl. tiers	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Floor partially slatted? List size of slatted area to determine proportion of total area	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Is operation free range? If yes, complete section 3.7	Y <input type="checkbox"/> / N <input type="checkbox"/>	

Environmental Enrichment 3.3	Response	Comments
Enrichment provided at placement (litter, perches)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Other types of enrichment items used		
Enrichments replaced or disinfected between flocks	Y <input type="checkbox"/> / N <input type="checkbox"/>	

Foraging, Scratching & Dust Bathing Areas 3.3.1	
Birds have access to litter at all times (3 day restriction allowed after placement)	Y <input type="checkbox"/> / N <input type="checkbox"/>
Type of litter material (savings, sawdust, straw, vegetable matter, etc)	
Litter condition (wet to dry)	

Litter depth	
Litter allows dustbathing	Y <input type="checkbox"/> / N <input type="checkbox"/>
<b>Perches 3.3.2</b>	
Perches are non-slip material, no sharp edges	Y <input type="checkbox"/> / N <input type="checkbox"/>
Total perch space or perch space per bird	
Width of perches	
Perches spaced $\geq 1.5$ cm apart and $\geq 19$ cm from walls or ceilings	Y <input type="checkbox"/> / N <input type="checkbox"/>
All perches $\geq 30$ cm off floor, with 20% at least 40 cm off floor (Code requirement)	Y <input type="checkbox"/> / N <input type="checkbox"/>
Perches positioned to avoid soiling feed, water, and birds below	Y <input type="checkbox"/> / N <input type="checkbox"/>
Anti-perch wire over feed or water lines free of electricity	Y <input type="checkbox"/> / N <input type="checkbox"/>
<b>Nest Boxes 3.3.3</b>	
Nest boxes are easily accessible & designed to avoid distress or injury	Y <input type="checkbox"/> / N <input type="checkbox"/>
Total communal nest box space OR number of individual nest boxes	
Nest box flooring type – is flooring is kept clean and dry?	Y <input type="checkbox"/> / N <input type="checkbox"/>
Nest boxes provide privacy and shading	Y <input type="checkbox"/> / N <input type="checkbox"/>
Nest boxes exclude feeders, drinkers, perches (feeders $\geq 6$ inches away)	Y <input type="checkbox"/> / N <input type="checkbox"/>

<b>Lighting 3.4</b>	<b>Response</b>	<b>Comments</b>
Indoor lighting is natural or full-spectrum (if other, please describe)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Light of at least 20 lux in directly lit areas during daylight hours at bird height	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Light below 1 lux in dark periods/night	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Light program adjusts light in a gradual manner to simulate dawn/dusk	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	if natural lighting check n/a
Method of adjusting light intensity available (manual or programmable)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Light program records available and reviewed by Validator (if program used)	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Lighting control system inspected regularly	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	
8 hrs continuous light and 8 hrs continuous dark every 24 hr period	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	if natural lighting check n/a

<b>Temperature 3.5</b>	<b>Response</b>	<b>Comments</b>
Daily max/min temperature records kept (measured at bird height)	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Temperatures outside acceptable range (10°C-28°C). If yes, list # days	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Heating systems inspected regularly & maintained in working order	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Birds distributed evenly throughout barn area	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- If no, are they gathered in close proximity to heat source?	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- If no, are they gathered away from heat source?	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Ventilation &amp; Air Quality 3.6</b>	<b>Response</b>	<b>Comments</b>
Ventilation systems inspected regularly & maintained in working order	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Ventilation maintains circulation of fresh air and minimizes drafts	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Any gas-powered equipment is used away from barn air intake vents	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	
Weekly ammonia test records available from producer	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Number of ammonia tests at or above 20 ppm		
Validator ammonia test result (in ppm)		
Producer & Validator ammonia tests taken at bird height	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Free Range Production 3.7</b>	<b>Response</b>	<b>Comments</b>
Hens have outdoor access at least 6 hours a day for 120 days/year (1/3 year)	Y <input type="checkbox"/> / N <input type="checkbox"/>	n/a operation not free range
Days on range as well as pophole opening & closing times recorded	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
List reason & length of any periods of restriction to outdoor access:		
- Training after placement	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- Poor weather, heat/cold	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- Threat to hen welfare	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- Ordered by government	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Number of popholes		
Popholes distributed along access side(s) of barn	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Length of popholes (cm)		

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Height of popholes (cm)

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**Range Management 3.7.1**

Range free of poisonous plants, chemicals, & debris Y  / N

Range is well drained and maintained Y  / N

Range provides shade and overhead cover (describe type & distribution) Y  / N

Height of perimeter fence  
Fence is tight to ground/buried Y  / N

Describe range coverage & list proportion of seeded/vegetated area:

Hens with no barn access (i.e. mobile pens) have shade & shelter sufficient for entire flock Y  / N  / n/a

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**Health Management 4.1-4.6**      **Response**      **Comments**

**Vet Client/Patient Relationship 4.1**

Farm owner has VCPR with licensed vet Y  / N

**Flock Health Plans 4.2**

Flock health plan in place Y  / N

Health Plan reviewed annually at minimum Y  / N

Stockpeople are familiar with flock health plan Y  / N

**Monitoring Flock Health 4.3**

Flock inspected minimum of twice daily Y  / N

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Dead birds removed immediately	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Disease diagnostic performed when needed and records kept on file	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> append copy of records & vet report
Instances (or suspicion) of reportable disease in flock? If yes, describe.	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> append copy of records & vet report
<b>Managing Sick &amp; Injured Birds 4.4</b>		
Sick or injured birds treated or euthanized immediately	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Hospital area provided for birds undergoing treatment	Y <input type="checkbox"/> / N <input type="checkbox"/> / n/a <input type="checkbox"/>	
Birds in hospital area monitored a minimum of 3 times/day	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Medication and treatment records kept up to date, include reason for treatment	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed; <input type="checkbox"/> records attached
Flock lameness must be scored by Validator (see attached scoring form)	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> completed lameness scoring form attached
<b>Medications &amp; Vaccines 4.5</b>		
Flocks are vaccinated (if yes, describe)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Antibiotics are added to feed or water? If yes, include supporting vet prescription.	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Are homeopathics alone used to treat flock? If yes, list type and reason used	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Date of last veterinary visit and reason:		
<b>Culls &amp; Mortalities 4.6</b>		
Culls and mortalities recorded daily and indicate cause/reason (if known)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Calculate total mortality (including culls) per production cycle		

Did mortality ever exceed 0.5% of the flock in 24-hour period?	Y <input type="checkbox"/> / N <input type="checkbox"/>
<ul style="list-style-type: none"> <li>If yes, was a vet investigation conducted? Explain:</li> </ul>	Y <input type="checkbox"/> / N <input type="checkbox"/>

<b>Biosecurity 4.7-4.8</b>	<b>Response</b>	<b>Comments</b>
Stockpeople are familiar with the Biosecurity Plan	Y <input type="checkbox"/> / N <input type="checkbox"/>	
All-in/all-out system used for restocking (each flock is same age and species)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Between flocks and before restocking:		
<ul style="list-style-type: none"> <li>Feed &amp; water equipment flushed</li> </ul>	Y <input type="checkbox"/> / N <input type="checkbox"/>	
<ul style="list-style-type: none"> <li>Barns and permanent fixtures cleaned/disinfected</li> </ul>	Y <input type="checkbox"/> / N <input type="checkbox"/>	
<ul style="list-style-type: none"> <li>Litter and disposable enrichment objects replaced</li> </ul>	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Mortalities disposed of in a way that prevents access by other animals	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Written record kept of all farm visitors (vets and Validators included)	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed
<ul style="list-style-type: none"> <li>If yes, describe how record is kept</li> </ul>	n/a <input type="checkbox"/>	
Visitors & staff required to wear appropriate footwear & clothing on site	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Foot dips/sanitation stations & hand sanitizer/hand wash stations available at each barn	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Nuisance Animal Control 4.9</b>	<b>Response</b>	<b>Comments</b>
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Facilities monitored weekly for signs of rodent/bird/insect infestation	Y <input type="checkbox"/> / N <input type="checkbox"/>
Fly & insect population control used • Describe: (fly paper, zap traps, etc.)	Y <input type="checkbox"/> / N <input type="checkbox"/>
Feed storage is rodent proof	Y <input type="checkbox"/> / N <input type="checkbox"/>
Rodent control used? Describe method (& list frequency traps are checked, if applicable)	Y <input type="checkbox"/> / N <input type="checkbox"/>
Wild bird control used? Describe method (& list frequency traps are checked, if applicable)	Y <input type="checkbox"/> / N <input type="checkbox"/>
Rodents & birds found injured in traps are euthanized immediately	Y <input type="checkbox"/> / N <input type="checkbox"/>
Guardian animals used • List species, breed and number used	Y <input type="checkbox"/> / N <input type="checkbox"/>
Guardian animals appear in good health and form	Y <input type="checkbox"/> / N <input type="checkbox"/>

<b>General Management</b>	<b>Response</b>	<b>Comments</b>
<b>Record Keeping 5.1</b>		
Farm records (per Appendix A of Standard) up to date and available	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Records kept between assessments (the past 3 years, minimum)	Y <input type="checkbox"/> / N <input type="checkbox"/> n/a <input type="checkbox"/>	
<b>Staff Knowledge and Training 5.2</b>		
Staff can access & are familiar with <i>BC SPCA Standards for Egg-Laying Hens</i>	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Staff can access & are familiar with <i>Code of Practice for Egg-Laying Hens</i>	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Written Code of Conduct developed & communicated to staff	Y <input type="checkbox"/> / N <input type="checkbox"/>	

Staff are provided with on-farm training on chicken behaviour, husbandry, and health Y  / N

**Poultry Management 5.3-5.6 Response Comments**

**Physical Alterations & Identification 5.3-5.5**

Are any of the following performed:

- Beak trimming (describe method) Y  / N
- Caponization Y  / N
- Toe trimming Y  / N
- Comb/wattle trimming; dubbing Y  / N
- Hole punching (for ID) Y  / N
- Pinioning/de-winging Y  / N

Are spectacles/goggles/blinkers, etc ever used to prevent beak trimming? Y  / N

Describe type of identification used for individual birds, if applicable n/a

Are hens ever forced to moult? Y  / N

**Purchase & Sale of Hens 5.6**

Are birds purchased at auctions or markets? Y  / N

• If yes: origin & history documentation for each bird is available Y  / N  n/a   records viewed

Breed & population of flocks recorded Y  / N   records viewed

Source of all purchases & sales recorded Y  / N   records viewed

Inventories of # birds placed & # shipped at end of cycle available Y  / N   records viewed

<b>Emergency Preparedness 5.6</b>	<b>Response</b>	<b>Comments</b>
Written emergency plan that covers flock care in event of a natural disaster, power outage, or mechanical failure is in place and reviewed with staff	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Emergency back-up generator or similar in place in case of power outage	Y <input type="checkbox"/> / N <input type="checkbox"/>	
• System tested regularly (list frequency)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Emergency supply of water sufficient for one day is available	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Facility/equipment maintenance & alarms inspected regularly to ensure working order (list frequency)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Waste storage facilities maintained to prevent contamination of streams / groundwater	Y <input type="checkbox"/> / N <input type="checkbox"/>	
A responsible employee is available to contact at all times in case of emergency	Y <input type="checkbox"/> / N <input type="checkbox"/>	
• Contact info readily available on site	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Pre-Transport</b>	<b>Response</b>	<b>Comments</b>
<b>Training &amp; Preparation 6.1</b>		
Hauler has SOP & Emergency Protocol	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> Viewed and verified
Transport personnel have read & understand:		
• Health of Animals Act	Y <input type="checkbox"/> / N <input type="checkbox"/>	
• Codes of Practice re: Transport	Y <input type="checkbox"/> / N <input type="checkbox"/>	
• SPCA Certified Layer Standard	Y <input type="checkbox"/> / N <input type="checkbox"/>	
• Hauler SOP & Emergency Protocol	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Stockpeople briefed on trip details & related care requirements before transport	Y <input type="checkbox"/> / N <input type="checkbox"/>	
<b>Fitness of Chickens for Transport 6.2</b>		

Birds too sick/injured to be transported are euthanized on site	Y <input type="checkbox"/> / N <input type="checkbox"/>
Birds still in withdrawal period from medication are held back from transport	Y <input type="checkbox"/> / N <input type="checkbox"/>
Avoids loading wet birds in cold weather	Y <input type="checkbox"/> / N <input type="checkbox"/>

<b>Catching 6.3</b>	<b>Response</b>	<b>Comments</b>
Feed & water available until catching? If not, describe:	Y <input type="checkbox"/> / N <input type="checkbox"/>	
<ul style="list-style-type: none"> <li>• Number of hours water is withdrawn prior to catching</li> <li>• Number of hours feed is withdrawn prior to catching</li> </ul>	n/a <input type="checkbox"/>	
Catching contracted out If yes, name company:	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Automated (mechanical) chicken catchers are used	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Feeders & waterers removed/lifted before catching	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Lights dimmed at time of catching	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Describe how chickens are carried/held and put down:		
Farm representative present during catching to observe protocols	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Death and injuries resulting from catching and loading are recorded	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed

<b>Loading 6.4</b>	<b>Response</b>	<b>Comments</b>
Transport containers used?	Y <input type="checkbox"/> / N <input type="checkbox"/>	
If yes, are they loaded inside the barn?	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Once loaded, all chickens are upright, able to rest simultaneously, & have no parts protruding from container	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Conveyors (if used) avoid tilting containers of birds	Y <input type="checkbox"/> / N <input type="checkbox"/> n/a <input type="checkbox"/>	
Vehicle & area checked for loose birds prior to departure	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Transport Conditions 6.5</b>	<b>Response</b>	<b>Comments</b>
Transport contracted out (if yes, list company)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Transport time under 12 hours	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Transport density in containers (kg/m <sup>2</sup> ) or birds/crate		
Birds sheltered from wind & weather extremes while on trucks	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Deaths and injuries resulting from transport recorded	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> records viewed
Calculate and list average % of DOA's over all shipments in last year		

<b>Unloading &amp; Placement of Birds 6.6</b>	<b>Response</b>	<b>Comments</b>
Pullet supplier name & address		
Farm staff on site at time of pullet delivery to assess birds' condition	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Unloading process ensures pullets do not become chilled or overheated	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Euthanasia 7.1-7.4</b>	<b>Response</b>	<b>Comments</b>
Written euthanasia plan in place & reviewed annually	Y <input type="checkbox"/> / N <input type="checkbox"/>	<input type="checkbox"/> viewed
Staff trained to recognize when euthanasia is appropriate & how to do it	Y <input type="checkbox"/> / N <input type="checkbox"/>	
List methods of euthanasia used (including size of birds for each type)		
Birds checked for consciousness after euthanasia is attempted	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Euthanized birds removed immediately	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Equipment kept clean & maintained (list frequency)	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Mass depopulation plan in place (Code of Practice requirement)	Y <input type="checkbox"/> / N <input type="checkbox"/>	

<b>Slaughter &amp; Processing</b>	<b>Response</b>	<b>Comments</b>
Slaughter age, approximate:		
Where are birds slaughtered / processed? Provide name and contact information.		
Producer has access to slaughter records	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Egg processing facility follows a HACCP program	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Egg processing facility classification (federal, provincial, other)		
Meat (spent hen) processing facility follows a HACCP program	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Meat (spent hen) processing facility classification (federal, provincial, other)		



Sources of Stock	Response	Comments
Flock records available	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Stock purchase receipts available	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Each flock of single type	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Pullets reared in a system similar to that used for adults	Y <input type="checkbox"/> / N <input type="checkbox"/>	
- If no, does producer have related issues (i.e. behaviour problems)?		

Product Traceability	Response	Comments
Product labelled with SPCA Certified label	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Eggs labelled free-range	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Copies of product logo attached to checklist / report	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Producer keeps grading receipts on farm	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Members undertake on-farm paperwork audits	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Required farm records available during assessment	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Please describe outcome of on-farm paperwork audit:		

Other Animals On Site (if applicable)	Response	Comments
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**Note: this section applies to farm animals raised for their products, but which are not to be SPCA Certified**

Species and Number of Animal(s)		
Reason(s) for keeping the animal(s) – e.g. personal use, commercial use, etc.		
Adequate food and water	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Well-maintained environment	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Animal(s) appear healthy	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Validator observations consistent with Member's Standard Operating Procedures	Y <input type="checkbox"/> / N <input type="checkbox"/>	

**Other Audits / Inspections**

Since the previous SPCA Certified Assessment, have there been any audits / inspections from government or regulatory agencies (e.g. CFIA, provincial marketing board, Department of Fisheries and Oceans, etc.)? Y  / N

If yes, list the name of the agency(ies), the date and the purpose of the visit:

Other Information	Response	Comments
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Information contained in registration forms was accurate	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Barn / room diagrams are accurate	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Farm map represents an accurate picture of the farm	Y <input type="checkbox"/> / N <input type="checkbox"/>	
Since the previous SPCA Certified Assessment, have non-compliance issues	Y <input type="checkbox"/> / N <input type="checkbox"/>	

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been verified as completed?

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Since the previous SPCA Certified Assessment, have complaints been received? Y  / N

- If yes, please explain how they were rectified: Y  / N

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## NOTE

Documents to append:

- Water quality tests
- Feed and water ingredients and additives
- Standard Operating Procedure and Emergency Protocol from hauler (if other than BCEMB)
- Product labels
- Mortality records
- DOA and condemnations report from processor
- Other documentation, as requested above

**Expanded Comments:**

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**Notes / changes since last assessment:**