Canine Rabies Blueprint

5.3. Who do we need to train and in what?

Provision of professional training for a canine rabies control programme should include the personnel described in this section. Click [here](#) for a list of agencies that can provide this training.

Click [here](#) to find out more about GARC’s rabies educational platform which has free online courses to help in training several types of personnel connected with rabies control activities.

- 5.3.1. Rabies surveillance
- 5.3.2. Dog component
- 5.3.3. Human component
- 5.3.4. Others

### 5.3.1. Rabies surveillance

A rabies surveillance and reporting system needs to be developed and implemented, so that data is gathered and reported regularly to evaluate progress. Further details on how to develop a surveillance system and how to design a reporting system are listed in the [Rabies Surveillance Blueprint](#).

**Rabies surveillance personnel and investigation officers**

e.g. veterinary officers, paraveterinary workers, livestock field officers, extension officers, field assistants, game wardens and medical personnel working closely with field investigation personnel should be trained in:
- Basic collection of epidemiological data such as animal rabies cases, human bite exposures and human rabies cases, described [here](#).
- Reporting of surveillance data to epidemiologists.
- Collection of animal diagnostic samples, packaging and submission to diagnostic laboratories for testing, described [here](#).
- Epidemiological investigation of human and canine rabies.

**Epidemiologists**

Epidemiologists should be working on the following tasks:
- Gathering of essential epidemiological data (e.g. vaccination coverage, animal rabies incidence, human bite exposures and rabies deaths, human vaccine doses delivered), database management, data analysis and interpretation to monitor the progress of an intervention.
- Reporting and dissemination of information.
- Epidemiological investigation of human and canine rabies.
Technical staff in rabies diagnostic laboratories
Rabies technicians should be trained in:
- General laboratory protocols and procedures.
- Maintenance/servicing of equipment (fridges/freezers, microscopes, etc.).
- Preparation/handling/storage of reagents.
- Basic rabies diagnostic techniques, described here and here.
- Data recording and reporting of laboratory findings.

5.3.2. Dog component

National rabies project coordinator
The project coordinator may be designated within the Ministry of Agriculture or Health, and will need training in:
- Project/people management/coordination (including training of key personnel)
- All aspects of rabies epidemiology and control programmes
- Collection/analysis of basic epidemiological data
- Budgeting and accounting
- Procurement of vaccines, consumables and capital equipment
- Preparation, analysis and interpretation of reports
- Epidemiological investigation of human and canine rabies
- Exchange of information and coordination of rabies control activities between human and animal health sectors

Veterinary staff
Veterinarians require training in:
- Diagnosis of clinical signs of rabies and appropriate response, as described here
- Evaluation, examination and disposal of animals (e.g. observation of biting behaviors in suspected rabid animals or immediate euthanasia as described here and here)
- Collection of animal diagnostic samples, packaging and submission to diagnostic laboratory for testing, as described here
- Delivery of key messages to dog owners on responsible ownership
- Vaccination (see animal vaccinators below)
- Justification for population management and humane methods of dog capture, euthanasia (e.g. suspect rabid animals based on bite history and clinical signs) and reproductive control (surgical sterilization) including anaesthesia, analgesia and post-operative care, as described here and here
- Accurate recording of veterinary data
- Veterinary legislation (including notification) and zoo-sanitary requirements for animal movements, as described in the legislation section
- Their role in related public health issues to reinforce exchange of information between human and animal health sector (monitoring of biting animals, timely testing of samples and reporting of results to
medical officials)

- Epidemiological investigation of human and canine rabies

**Animal vaccinators**

Vaccinators (e.g. veterinarians, paravets, livestock officers, agricultural extension officers, animal health workers, veterinary assistants, veterinary students, community assistants and volunteers) will need to be trained in:

- Advertising techniques including information/motivation of local communities, as described [here](#).
- Standardized data collection methods (e.g. owner/dog information registration) and completion of certificates
- Handling and care of veterinary equipment
- Humane methods of dog capture/restraint for vaccination. Click [here](#) to access the protocol.
- Knowledge of current vaccine protocols and the OIE’s currently recommended animal vaccines for parenteral (click [here](#) for more information) and oral (click [here](#) for more information) use. This is critical since in some areas outdated and ineffective vaccines are still being used, which will jeopardize programmes and demotivate personnel.
- Vaccine storage and administration. Click [here](#) to access the protocol, and consider using the Animal Handling and Vaccinators Course, part of the [Rabies Education Platform](#).

![Photo courtesy of Serengeti Carnivore Disease Project](image)

- Dog vaccination protocols for any given strategy (i.e. fixed vaccination posts, mobile clinics or house-to-house) and delivery method (i.e. parenteral and oral vaccination) used, as described [here](#).
- Animal marking methods, described [here](#).
- Follow-up data collection (e.g. for estimation of vaccination coverage)
**Community Coordinators**  Community coordinators can be rabies reference points for their community and help the community work together with rabies control programmes to ensure vaccination programmes are successful. They should receive training in:

- Basic rabies awareness
- How to support rabies vaccination campaign efforts. See the [GARC rabies education](GARC_rabies_education) platform for more details on the Community Coordinator for Rabies Certificate (CCC) course

**Managers and staff of animal shelters (including volunteers)**  
Animal shelter staff should be trained in:

- Procedures for dog care and husbandry
- Handling of dogs
- Monitoring of health and provision of required veterinary treatments
- Procedures for rehoming, sterilization and humane euthanasia
- Record keeping and reporting to authorities

**Vaccination support personnel and drivers, animal welfare inspectors (e.g. wardens and animal control officers)**  
Support personnel must be trained in:

- Education of the public and enforcement of relevant animal health and welfare legislation/regulations
- Handling and care of veterinary equipment
- Animal marking methods
- Information/motivation of local communities

**Dog traders and meat handlers**  
Meat handlers such as slaughterhouse workers, meat packers and processors (for countries where applicable), should be trained in:

- Safe handling of dogs
- Risks involved when catching, transporting and slaughtering dogs, described [here](here)

**Technical staff in rabies vaccine laboratories**  
If vaccine production has to be carried out locally, staff should be trained in:

- Published guidelines on vaccine testing provided [here](here)
Ecological survey personnel
Survey personnel should be trained in:
- Dog census techniques, described here

Administrative and clerical staff
Administrative staff should be trained in:
- Procurement of equipment and consumables
- Data entry and database management

5.3.3. Human component

Health-care personnel (medical and nursing staff)
Health care personnel should be trained in:
- Correct assessment of what constitutes a rabies exposure (in relation to the clinical history of animal exposure). This will be important to ensure that unnecessary use of costly vaccine does not occur.
- When administration of anti-rabies serum/rabies immunoglobulin (RIG) and anti-rabies vaccine (ARV) is appropriate, as described here and here.
- Provide appropriate medical advice to affected individuals.
- Importance and correct methods of management of animal-bite injuries, as described here and here.
- Current WHO recommended human vaccines listed here.
- Storage (including duration of vaccine storage after reconstitution) and transportation of vaccine.
- Administration of RIGs and intramuscular and less expensive intradermal regimens for administration of vaccine.
- Treatment of adverse reactions to vaccination.
- Patient care.
- Accurate recording of hospital data (e.g. animal-bite injury data, human rabies deaths, vaccine doses delivered) and reporting to relevant government bodies (these may vary between countries).
- Collection of human diagnostic samples, described here.
- Legislation, including notification. Read also here to learn about legislative frameworks.
- Need for exchange of information between human and animal health sector (e.g. monitoring of biting animals).

5 5.3.4. Others

All workers at increased risk of rabies infection
All workers including groups who work with pets, livestock, and wildlife, laboratory staff medical staff at risk of exposure to humans infected with rabies should be trained in:
The disease, its characteristics and the nature of the risk.
- Preventive measures (precautions, equipment for dealing with rabid animals, and pre-/post-exposure immunization needs).
- Workplace hygiene (e.g. appropriate infrastructure, biohazard control in laboratories, etc.).

Click [here](#) for international guidelines on biosafety and biosecurity.

**Those in a position to raise community awareness**
In order for a control program to be successful, community awareness and understanding of the rabies problem and solutions needs to be high. Consider using resources such as the Rabies Educator Certificate, part of the [GARC Education Platform](#), to train people who can then spread rabies control messages to their communities.