

## Service Animals, Pet Visitation and Therapy Dogs

### **POLICY:**

Pembroke Regional Hospital (PRH) is committed to meeting the accessibility needs of all persons with disabilities in accordance with the Integrated Accessibility Standards O.Reg. 191/11 under the Accessibility for Ontarians with Disabilities Act 2005.

PRH recognizes the value and therapeutic benefit of pet visitation, service animals and pet therapy. Objectives of these visits include:

- To alleviate loneliness and stress for patient by providing opportunities to maintain meaningful relationships with their pets,
- To provide stimulus for the withdrawn or anxious patient through contact with their pet on a reasonably regular basis
- To alleviate a patient's concern for a pet's well being by providing contact through visiting arrangements.
- To fulfill legal obligation to allow service animals.

If you are in contact with someone who has an animal, use the Decision Tree and the policy to help understand both parties obligations (see App C).

### **DEFINITIONS:**

An animal is a “**service animal**” when:

- It is readily apparent that an individual relies on the animal for the individual's disability-related needs such as:
  - Alerting individuals who are deaf, deafened or hard of hearing to sounds;
  - Pulling a wheelchair;
  - Alerting to seizures;
  - Opening/closing doors;
  - Providing mental health support
  - Retrieving dropped items;
  - Guiding individuals with impaired vision;
- The animal has documentation (e.g. identification card, jacket or harness) showing that it has been trained through an accredited service animal training school; OR
- The individual provides a letter from their treating physician or nurse confirming that the individual requires the animal for reasons relating to that individual's disability (NOTE: the letter need only explain that the animal is required because of a disability. The letter does not need to identify the disability, why the animal is needed, or how it is used).

**NOTE:** while most service animals are dogs, there are other types of service animals that assist persons with disabilities in their day-to-day activities.

An animal is a “**therapy animal**” when the animal:

- Is clearly identified/recognized as a registered visitor (e.g. Volunteer vest, volunteer identification);
- Is accompanied by a volunteer from volunteer services with either a volunteer identification badge or vest;

- Has been screened, oriented and registered through volunteer services;
- Has been screened from a registered organization (e.g. Therapeutic Paws, St. John's Ambulance) to provide psychological/emotional support to patients;
- Is a cat or dog; and
- Is over the age of one year.

An animal is a “**patient pet**” when the animal:

- Is NOT a service animal or a therapy animal;
- Is a cat or a dog;
- Is over the age of 1 year.

## SECTION A – Service Animals

### PROCEDURE/GUIDELINES:

1. The owner (or designate) will:

- Where possible, make reasonable efforts to provide the Manager/delegate with advance notice of the use of a service animal;
- If the animal is not clearly identified/recognizable as a service animal,
  - Ensure that the service animal is clearly identified/recognizable as a service animal (e.g. harness or jacket with markings of the training school, identification card); OR
  - Upon request, produce
    - Documentation (e.g. identification card, certification, jacket or harness) showing that the animal has been trained through an accredited service animal training school, or
    - A supporting letter from their regulated health professional (see Appendix C \*) confirming that the individual requires the animal for reasons relating to that individual's disability
- Upon request, provide up to date records of the pets immunizations to the Manager/delegate;
- Ensure that the service animal remains in the owner's care and control at all times;
- Where there is animal contact, wash hands with soap and water and maintain proper hand hygiene; and
- Provide the Manager/delegate with the name and animal in the event that the owner must be separated from their service animal (e.g. due to infection control, owner is unable to manage service animal).

2. Staff members, including physicians, will:

- Make all reasonable efforts to accommodate patients, visitors, employees or medical staff with a service animal;
- **Not** touch, pet, speak to, distract, deliberately startle, feed, or provide care for (e.g. toileting, exercising) the service animal;
- Where there is inadvertent animal contact, wash hands with soap and water (note: alcohol gel will not penetrate protein and could leave viable bacteria present on hands);
- **Not**, under any circumstances, ask about the nature of the owner's disability;
- Ensure service animals that accompany patients, visitors, employees or medical staff are granted access to all areas of the Hospital except those listed in **Removal or Exclusion (Section 2)** of this Policy;

- Notify support departments (e.g. Diagnostic Imaging) in advance when a patient will be accompanied by a service animal;
  - If the staff member is unable to provide care to a patient with a service animal (e.g. allergies) notify the Supervisor (or delegate) and ensure that an alternate health care professional is available to provide care;
  - If any staff, visitor, or patient sustains an injury from a service animal, complete an Incident Report and notify Supervisor/delegate.
3. In addition, the Supervisor (or delegate) will also:
- Attempt to assign a patient with a service animal to a large private room or, if a large private room is not available, assign the patient to a large semi-private room with the advance notification of the other patient(s);
  - Record the name and contact information for a support person that will assume responsibility and provide care for the animal in the event that the owner must be separated from their service animal (e.g. due to infection control, owner is unable to manage service animal); and
  - Effectively communicate the presence of the service animal to staff and patients who may be exposed to the animal (see links to view “Animal Notification Sign” –and to address any concerns (e.g. allergies).

### **Removal or Exclusion:**

1. Where a service animal requires entry to an area of the Hospital listed in the section below, PRH staff members are directed to contact Infection Control for consultation.
2. A service animal may be excluded from the Operating Room (OR), Surgical Day Care (SDC), Intensive Care Unit (ICU), Emergency Department (ED) Resuscitation, Procedure Room and Multi-Function Room (MFR) as the area may be a “restricted area” or have “restricted access” and “environmental controls” that need to be maintained. For the purposes of this Policy,
  - A “Procedure Room” is a room designated for the performance of procedures that are invasive;
    - that may require the use of sterile instruments or supplies;
    - and in which moderate sedation,
    - minimal sedation and local anesthesia may be administered.
  - “Restricted area” refers to a designated space in which surgical or other invasive procedures are performed; only authorized personnel and patients accompanied by authorized personnel are permitted; and personnel are required to wear surgical attire, cover their head and/or facial hair and wear a mask when in the presence of open sterile supplies or persons who are completing or have completed a surgical hand scrub. A Restricted area is contained within and only accessible through a semi-restricted area.
  - “Restricted access” refers to additional controls instituted in units with high acuity patients. Restrictions may include: the number of visitors, jewelry and adornments on hands and wrists, clothing worn (e.g. no street clothing, jackets), items brought into the unit (e.g. back packs, bags, food, drink).
  - “Environmental controls” refers to additional controls instituted in units with high acuity patients. Controls may include: increased cleaning/disinfection of physical environment, increased air changes through HVAC system, and direction of air flow through HVAC system (positive vs. negative air pressure).

3. Where a patient with a service animal, after being informed of risks related to having the service animal present, wishes to assume the risk(s) in order to ensure that they are not separated from their service animal, the Supervisor (or delegate) will ensure that this is documented in the patient's health record (note: a patient may only assume health and/or safety risks that will not adversely affect others or put others at risk);
4. A service animal may also be removed, excluded or separated from its owner where it is demonstrated that:
  - The service animal poses a significant risk to the health/safety of others that cannot be mitigated otherwise (e.g. the animal displays vicious, aggressive, threatening behaviour) – determination must be based on an individualized assessment of the situation and consider the nature, duration, probability and severity of the risk;
  - The owner is unable to provide care to the service animal;
  - The animal's continued presence is contraindicated by the attending physician for sound medical reasons; or
  - The animal must be removed; excluded or separated for reasons of infection control (e.g. the animal is visibly unhealthy).
5. Where a patient must be separated from their service animal, the Supervisor (or delegate) will:
  - Document in the patient's health record the circumstances and rationale for removal or exclusion;
  - Communicate to the owner the reasons and rationale for removal and exclusion;
  - Contact someone to assume responsibility for the animal (e.g. support person, the organization that trained the animal);
  - Make appropriate arrangements to address the patient's needs in the absence of the service animal; and
  - Where possible, ensure that the service animal is permitted to return to its owner and resume its duties as soon as possible;
6. If another patient brings forth concerns about the presence of a service animal (e.g. allergies, fear, or other reasons not related to the animal's demeanor or health), the patient with objections to the animal should be separated and/or removed from the area where the animal is located, provided this does not interfere with the patient's care.
7. Each situation is to be considered individually and in consultation with the owner and other appropriate staff.

## **SECTION B – Therapy Dogs**

Therapy Dog Programs bring comfort, joy and companionship for patients requiring hospitalization. Therapy dogs are able to visit on the Acute Mental Health Unit and the Rehabilitation unit.

All dogs must have been tested for temperament and therapeutic qualities and must be annually certified by their veterinarians as being up –to-date on all required vaccination and in good general health. Proof of vaccination records is required showing evidence of the following:

- Rabies
- Parvovirus
- Parainfluenza

- Distemper
- Hepatitis

### **PROCEDURE/GUIDELINES:**

1. The request for therapy dog visitation must be directed to the volunteer coordinator.
2. The manager of the rehabilitation program and Acute Mental Health Program will be advised of the request by the volunteer coordinator.
3. Each dog will be accompanied by a volunteer.
4. Therapy Dog Program will not
  - Interfere with any treatments;
  - Take place in areas of additional precaution (e.g. isolation rooms, ICU, OR, Procedure Room, Systemic Therapy, ED resuscitation rooms);
  - take place in areas of outbreak;
  - Occur where any staff, patient, or other person has an allergy to the therapy animal.
5. Volunteer service will:
  - Ensure that the therapy pet and volunteer handler have been screened, oriented and registered through volunteer services;
  - Ensure the dog has been screened from a recognized organization (e.g. Therapeutic Paws, St. John`s Ambulance) to provide psychological and emotional support to patients;
  - Is a dog;
  - Is over the age of one and have updated immunizations;
  - Ensure the dog and volunteer have appropriate and proper identification (vest) to identify them as volunteers.

#### The volunteer bringing the dog into the hospital:

- Must wear appropriate PRH volunteer ID to identify themselves and ensure the therapy dog is clearly identified/recognized as a registered therapy dog;
- If an elimination accident occurs, the volunteer escorting the dog will be given gloves, paper towels and a plastic bag to clean up the urine/feces. Housekeeping will then be contacted to mop up the floor;
- The therapy dog is in the volunteers care and control at all times;
- Pet therapy sessions will be pre-arranged with a designated time;
- Pet therapy sessions will be pre-arranged in a common area rather than patient individual rooms;

- All persons who touch/handle the animal will wash their hands following contact with the animal;
- No food for the pet should be brought into the hospital;
- Therapy dog will be kept on a short leash or at all times;
- Do not visit patients while they are eating;
- Place a towel or sheet under the dog should they be put on the patient`s bed;
- Be accountable for any actions of the therapy dog throughout the visit;
- If a bite or injury occurs, immediately terminate the visit and report it to the charge nurse on the unit;
- Follow-up by reporting any issues to volunteer services.

Staff members and physicians will:

- Not touch, pet, deliberately startle, feed or provide care to the therapy dog while it is visiting;
- Where there is inadvertent contact with the therapy dog, immediately wash hands with soap and water (note: alcohol gel will not penetrate protein and could leave viable bacteria present on the hands).

### **SECTION C – Patient Pet**

In the interest of patient safety, staff safety and infection control requirements, restrictions are necessary when bringing animals into the hospital for a visit. The purpose of this policy is to provide guidelines in bringing a pet belonging to a patient onto the hospital premises for the purpose of visiting a patient. Pets are not allowed in the following areas of the hospital:

- Food preparation and public food services area
- Medication storage/preparation areas
- Isolation rooms
- Procedure areas (operating room, labour/delivery, pre/post-op recovery areas)
- In a room where there is an immunosuppressed patient.

In order for an animal to enter the hospital the animal will be clean, healthy, well-groomed, and free of parasites and have up-to-date vaccinations. Proof of vaccination records is required showing evidence of the following:

- Rabies
- Parvovirus
- Parainfluenza
- Distemper
- Hepatitis

### **PROCEDURE/GUIDELINES:**

The request for pet visitation to a patient care unit must be directed to the Manager or delegate to determine appropriateness, time, place and length of visit. No animal younger than 1 year will visit. One animal is permitted per visit.

1. The decision to allow patient pets access to patient rooms, should be made on a case-by-case basis in consultation with the manager, most responsible physician and Infection Control.
2. Visiting pets will NOT:
  - Interfere with any treatments (e.g. diagnostic tests, therapy or nursing care);
  - Take place where additional precautions must be maintained; and
  - Take place during an outbreak.

**NOTE:** If staff, patient or others have known allergies to pets, accommodation to separate location will be made.

3. The following criteria must be met in order for a patient pet visitation to occur:
  - Patient is an inpatient;
  - There is no outbreak on the patient's unit;
  - The treatment team had discussed and has decided that such visit may be beneficial to the patient;
  - The patient has only one animal visit at a time;
  - The animal visit does not negatively impact the patient, other patients, staff (e.g. allergies) or the patient care area;
  - The visiting animal does not display any aggressive tendencies;
  - The visiting animal is visibly healthy, adequately groomed/clean, and housebroken;
4. The person bringing the animal to the unit is responsible for the animal's actions at all times and will:
  - Upon request, provide up to date records of the pet's immunization to the manager or delegate;
  - Complete a Patient Pet Authorization Form (See appendix B) with the manager or delegate;
  - Check in at the nursing station prior to each patient visit to determine if the visit is still appropriate;
  - Ensure that the pet is in their care and control at all times for example;
    - Travel with the pet must be direct from the Hospital entrance to the nursing station to the patient room;
    - The animal must remain in the patient's room with the door closed;
    - Cats must be transported in carriers but can be leashed within the patient's room;
    - Dogs must be leashed at all times while in the Hospital
  - Ensure that the visit occurs only in the location and with the patient identified on the Patient Pet Authorization Form (Appendix B)
5. No reptiles, birds or rodents are allowed.



6. If the pet is small enough to sit on the bed, a towel must be placed under the animal. The towel will then be placed directly into the laundry.
7. If the patient is in a private room the visitor and pet may go directly into the room.
8. If the patient is not in a private room the patient should be brought to a private area and the visitor and pet may visit there.
9. All persons who touch/handle the animal will wash their hands following contact with the animal.
10. If an elimination accident should occur, the individual who has escorted the pet will be given gloves, paper towels and a plastic bag to clean up the urine/feces. Housekeeping will then be contacted to mop up the floor.
11. No food for the pet should be brought into the hospital.

#### **RECORDING AND REPORTING:**

1. Manager or delegate will make arrangements for the pet visit and will record this on the Kardex.
2. Manager or delegate will effectively communicate the presence of the patient pet to staff and patient's who may be exposed to the animal.
3. Prior to the visit Manager/delegate will ensure the Patient Pet Authorization Form is completed and placed in the front of the patient's health record (see links to view "Patient Pet Authorization" form).
4. Results of the visit are to be recorded in the patients chart in the interdisciplinary notes.
5. Adverse incidents related to the patient or visitor should be reported through the Risk Incident Management System (RIMS).
6. Adverse incidents involving staff should be documented through the Employee Incident reporting system.
7. Any noted concerns about pet behaviour, grooming/general health or control of pet by the escort will be reported to the unit manager or delegate.
8. Special accommodations may be made on weekends and after hours if required.



**REFERENCES:**

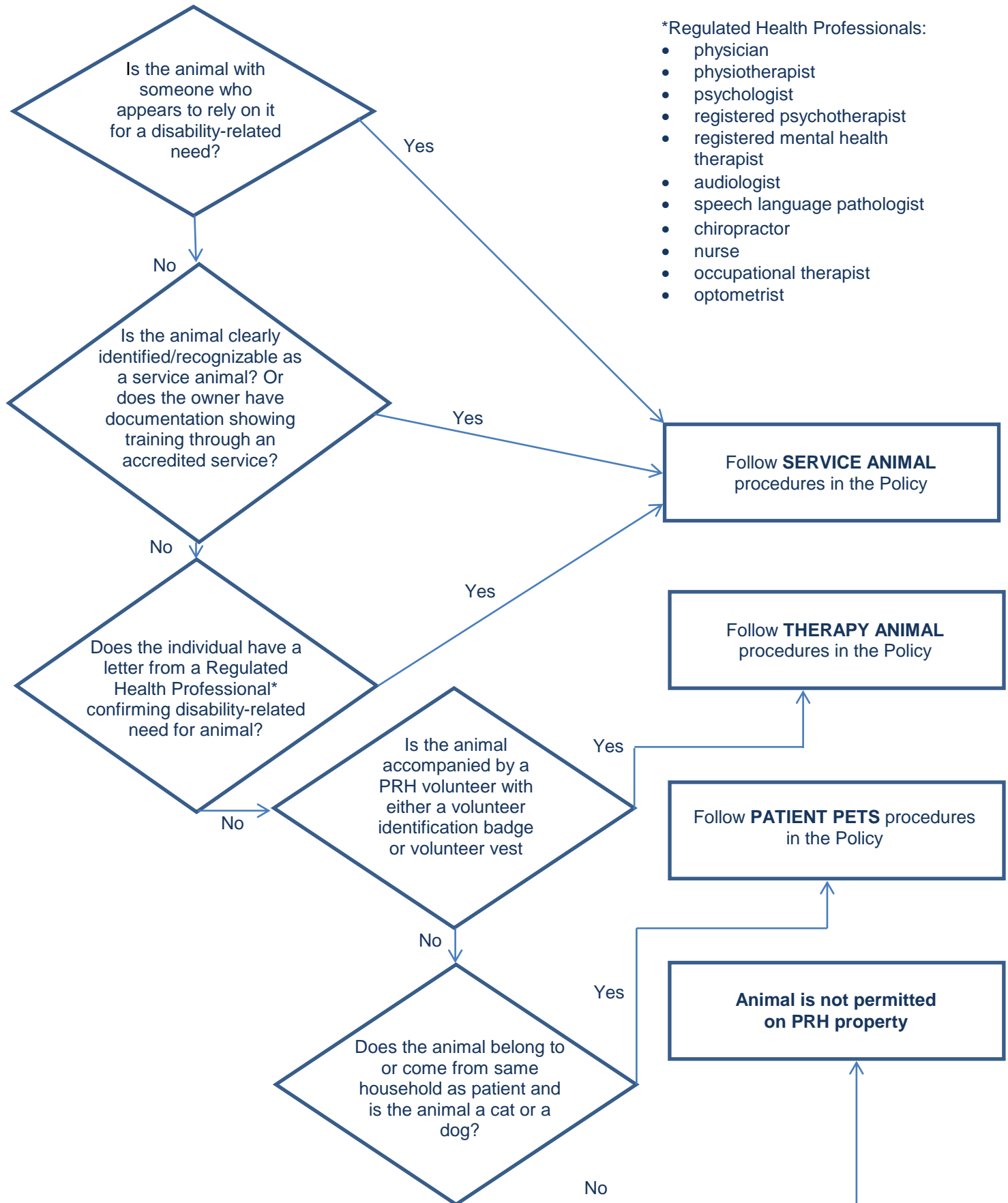
Mount Sinai Hospital, Policy/Procedure , Service Animals, Therapy Animals, and Patient Pets, December 2016

St. John Ambulance Therapy Dogs, Pembroke

Accessibility in Ontario: what you need to know, January 2019, <https://www.ontario.ca/page/accessibility-ontario-what-you-need-to-know>

**\*Regulated Health Professionals:**

- physician
- physiotherapist
- psychologist
- registered psychotherapist
- registered mental health therapist
- audiologist
- speech language pathologist
- chiropractor
- nurse
- occupational therapist
- optometrist



## Document Metadata

Document Name: Service Animals, Pet Visitation and Therapy Dogs.doc

Original Location: /Pembroke Regional Hospital/Patient Care Manual/Rehabilitation

Created on: 12/01/2016

Published on: 03/30/2023

Last Review on: 03/30/2023

Next Review on: 03/30/2026

Effective on: 12/15/2016

Creator: hollahan, katie  
*PolicyManager Administrator*

Committee / Policy Team: Pembroke Regional Hospital  
Manager: hollahan, katie  
*PolicyManager Administrator*

Author(s): silver, sonya  
*Manager*

Approver(s): johnson, kirsten  
*PolicyManager Administrator*  
bradley, lisa  
*Director*  
henderson, melanie  
*Vice President*

Publisher: hollahan, katie  
*PolicyManager Administrator*

Description: Policy

Internal Document Links:

Animal Notification Sign	/Pembroke Regional Hospital/Forms Manual
Patient Pet Authorization Form	/Pembroke Regional Hospital/Forms Manual
Risk Incident Management System	/Pembroke Regional Hospital/Organizational Manual/Risk Management

## Summary of Changes/Updates:

Reviewed and approved by S. Silver with no changes