POLICY for ASSISTANCE DOG, THERAPY AND PET ANIMALS IN HOSPITALS, RESIDENCIES & HEALTHCARE PREMISES
(Including Infection Control Measures)

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1. Aims

To inform and ensure that staff are aware of and comply with the legislation related the presence of animals in healthcare premises.

To inform staff of current legislation that supports assistance dogs in healthcare settings including NHS Forth Valley Disability Equality Scheme and Action Plan.

To increase staff knowledge on how to support assistance dog owners and therapy animal owners in healthcare settings.

To minimise restriction of access to guide dogs and resultant distress to the person, the dog, staff and other patients and where necessary to minimise the time that the guide dog and owner have to be separated.

To provide guidance on keeping a pet animal in healthcare settings.

2. Objectives

To prevent or minimise transmission of disease from animals to humans i.e. zoonotic infections.

To ensure that staff are fully aware of the policy content and control measures required to minimise cross-infection from animals to humans.

To ensure that staff are fully aware of legislation and operational measures required to eliminate discrimination and harassment in healthcare settings and to promote an environment which treats everyone equally.

3. Responsibilities

3.1 All Staff

- Must adhere to the policy;
- Must be aware of and comply with the legislation related to animals in healthcare premises;
- Are responsible for minimising the potential of cross infection;
- Are responsible for adhering to the Disability Discrimination Act (2005 amended) and other relative legislation.

3.2 All Managers

- Are responsible for ensuring that staff are aware of the policy and associated legislation that it is adhered to:
• Are responsible for putting in place systems of work to manage and support the presence of an assistance, therapy animal or pet animal in their facility to provide a safe environment for patients, staff and visitors.

3.3 Infection Control Team

• Must keep the policy up to date;
• Audit compliance with the policy;
• Assist with risk assessments;
• Will work closely with Human Resources and other relevant agencies e.g. RNIB to manage situations where a member of staff works with an assistance dog.

3.4 Disability Services Team

• Must keep the policy up to date and in line with current legislative requirements.

4. Background

NHS Forth Valley acknowledges the contribution that assistance dogs, therapy and pet animals may provide to the quality of life experienced by patients and residents. NHS Forth Valley is concerned that all pet animals kept by staff or residents, therapy and assistance dogs should be well treated. NHS Forth Valley should be satisfied that the therapy and assistance dog handlers take responsibility for the animal. Therapy animals must be sociable and suitable and able to be introduced to patients, staff and the hospital environment.

It is well documented that diseases can be acquired from a variety of animals however providing reasonable care is taken, the psychological and physical benefits of having them outweigh the risk of infection in certain situations.

The holistic benefits of animals can apply to everyone working in a hospital. It is possible that their presence can improve well being simply by making the hospital environment happier, more enjoyable and less forbidding for patients, clients and residents.
5. **Legislative Framework**

This policy informs staff of their legislative requirements relating to the Disability Discrimination Act (2005 amended).

The Act states that anyone who provides services, goods or facilities to the public cannot refuse to provide their service to a disabled person for a reason relating to that person’s disability. It also encourages services to be proactive in creating an inclusive approach and where appropriate “more favourable treatment” can be provided to a disabled person.

The policy also informs staff of their legislative requirements relating to the Health and Safety at Work Act (1974); Public Health (Infectious Diseases) Regulations (1998), Management of Health and Safety at Work Regulations (1992) and Control of Substances Hazardous to Health (2002) which requires the provision of a safe environment for service users and staff.

There is a balance to be struck in complying with all legislation and therefore each situation will require to be risk assessed by taking into consideration many and variable factors by the person in charge of each clinical area. Each clinical area should ensure that local guidelines are available to manage the presence of an assistance, therapy or pet animal.

Further advice may be obtained by contacting the Infection Control or Disability Team.

6. **Definitions**

Animals that are found in health care premises may be identified under the following categories:

1. An assistance dog is trained for the benefit of the handler (not always a patient) e.g. guide, hearing, seizure or signal dog and is the responsibility of the handler or owner;
2. A therapy animal is an animal that visits hospital wards and premises for reasons of goal directed interventions and is the responsibility of the handler or external organisation e.g. The Therapet Service managed by Canine Concern Scotland Trust;
3. A pet animal is an animal that is kept for patients and residents of NHS Forth Valley for various reasons but may include social support and motivation under the responsibility of a designated NHS Forth Valley employee(s). There requires to be full discussion and agreement with the infection control team.
7. Assistance Dogs

The Disability Discrimination Act (2005) amended encourages services to be proactive in approach in providing care to a disabled person. Boards are obliged to make all reasonable adjustments to ensure equal access to services. There are different types of assistance dogs and staff should be aware of their responsibilities, in creating an environment that improves access, mobility and independence for assistance dog users. Assistance dogs are trained to provide their owner with more independence. An owner who has their assistance dog taken away from them for any reason becomes more dependent and vulnerable.

There are five organisations that support the work of Assistance Dogs:

- Guide Dogs;
- Hearing Dogs for Deaf People;
- Dogs for the Disabled (including seizure Dogs);
- Canine Partners;
- Support Dogs.

7.1 Assistance Dogs – Key Points

All Assistance dogs:

- Are instantly recognised by the harness they wear and the identification tag on their collar.
- Handlers should carry an identification card that will display the name of the relevant assistance dog charity they are associated with.
- Undergo rigorous health checks on a regular basis, have a strict set diet and are monitored regularly to ensure they meet the criteria of an assistance dog.
- Are working animals; please therefore seek permission from their handler before touching or feeding the dog;
- Are trained to toilet on command and are therefore unlikely to foul in a public place;
- Will sit or lie quietly beside their handler;
- Will not wander freely throughout premises and its movement should be restricted by keeping it on a lead and in harness;
- Are highly trained working dogs and not pets;
- Are working whenever the harness is in place, when removed this would indicate a rest period for the dog.

Owners should regularly groom their assistance dog for pest control e.g. ticks and fleas. Vaccination and treatments should be up to date.

Consideration should be given to the type of appointment, length of visit, environment and transport services when arranging an appointment for an assistance dog handler. If there are delays staff will require considering provision of water and toilet relief for the dog. It is also important to advise the patient of any delays and keep them appraised of the situation.
It is important to give some orientation to the handler in relation to your services environment e.g. verbal explanation, description of layout in particular information regarding fire exits or toilets.

Although feeding of an assistance dog on healthcare premises is unlikely and is not encouraged, it should only be fed by the owner. Refer to Section 9.3 for guidance.

Attention to the disposal of any waste products could be required; this would only become an issue if an appointment ran over excessively or if it were an unplanned or emergency admission. For further information contact NHS Forth Valley Disability Service. Refer also to Section 9.5 for further guidance. Assistance dogs should be allowed into wards/residencies with the agreement of the Person in Charge of the area.

Consideration should be given to respect the needs of others e.g. cultural, religious and medical as well as to the assistance dog owners. This can be a sensitive aspect of access and tact should be used with all involved.

7.2 Special Precautions

There are some wards/residencies/departments where special precautions will require to be taken i.e. where there are patients or residents with suppressed or compromised immunity or who may be susceptible to zoonotic or other infections or who may be receiving invasive treatment. In some situations it may be necessary to restrict or exclude an assistance dog e.g. operating theatre. Agreement should be reached with the handler/owner of the assistance dog particularly if the handler/owner is unable to care for it during treatment or service for the facility. Handlers/owners must also be aware of the infection prevention measures contained within this policy. These issues should be discussed through line management to clarify possible liability, insurance considerations, consent, housing of the assistance dog and other related issues. Confirmation may require to be sought to ensure that the service animal is well and has had all relevant vaccinations.

7.3 Staff Member Working With an Assistance Dog

In situations where a member of staff is required to have their assistance dog at work to carry out their duties, this should be dealt with sensitively and all reasonable measures taken to facilitate this. However it is recognised that some high risk clinical areas e.g. operating theatres are not suitable for an animal to be present. In this situation the person in charge of the area should undertake a risk assessment in conjunction with the infection control team to assess the risk associated with clinical activities undertaken and the presence of an assistance dog. It may not be appropriate in all situations to endorse the presence of an assistance dog. The person in charge is responsible for producing operational guidance for the service concerned to manage the situation.
Consideration also requires to be given to whether or not the assistance dog requires to be fed whilst the member of staff is on duty. Although feeding of an assistance dog on healthcare premises is unlikely and is not encouraged, it should only be fed by the owner. Refer to Section 9.3 for guidance.

Consideration will also be required for toileting arrangements for the assistance dog. For further information contact NHS Forth Valley Disability Service. Refer also to Section 9.5 for further guidance.

Consideration may be required for Induction Training for a member of staff working with an assistance dog and also for the Team with whom they will be working.

8. Therapy Animals

A responsible relative/friend, staff member or recognised pet scheme may bring a therapy animal into the ward/residency (for the patient's/resident's benefit only) as agreed by the person in charge and the Infection Control Team.

The animal must be in good health, must not be fed on the ward/residency. The owner must be able to produce, if required evidence of regular screening activities of de-worming and vaccinations. Staff or patient allergies must be considered prior to admittance to the area.

The animals movement should be restricted (dogs must be kept on a lead). The length of visit should be adjusted to fulfil the needs of the individual(s) the therapy animal is visiting.

Any person handling or stroking therapy animals during their visit should wash their hands immediately after contact.

Where therapy animals are permitted to visit wards/residencies the person in charge should ensure that there are robust systems in place to facilitate planned visiting and that handlers are aware of NHS Forth Valley policy regarding therapy animals.

9. Pet Animals

All pet animals purchased or accepted on behalf of residents, wards or units must be agreed with the Service Manager, Care Manager, Charge Nurse and the Infection Control Team prior to their introduction to NHS Forth Valley property.

Any ward/residency considering purchasing a pet animal should be aware of potential costs associated with it e.g. vets bills, food and bedding, health insurance etc. as this is the responsibility of the service providing the pet.
The undertaking of keeping a pet animal should not be taken lightly. The effects of keeping a pet animal should take into consideration the health and well being of patients/clients and staff. Staff, patients and visitors need to be aware of infection prevention measures in relation to keeping a pet.

It is important to identify that not all locations in healthcare premises are suitable for pet animals. Caution must be taken where there are patients or residents with suppressed or compromised immunity who may be susceptible to zoonotic or other infections. The infection control team can advise.

9.1 General Guidelines

The responsibility of keeping pet animals should not be taken lightly; extra work is involved in their care as well as the cost implications. Once a decision has been made and agreed upon, one member of staff, (with named deputy) should be responsible for the welfare of the pet animal. The staff nominated to look after the pet animal, will also be responsible for ensuring where necessary that it has regular health checks and vaccinations as required. Accurate records must be kept of healthcare and vaccinations administered. In the event that the pet animal develops a disease/condition, which can be transferred to a human (seek advice from the vet), the Infection Control Team should be contacted.

In the event of a terminal illness, which causes distress to the pet animal and residents or staff of the ward or residence, advice must be sought urgently from a veterinary surgeon regarding symptom control.

It is usually not appropriate to keep sick pet animals in wards or residences and a decision must be made, in consultation between the owner, care staff and the Infection Control Team, to seek alternative accommodation and/or care arrangements.

9.2 Selecting a Pet Animal

Choosing a residential pet animal involves long-term commitment to it. It must also be remembered that not all people are pet animal lovers, and some people may have allergies to them so their wishes must also be taken into consideration.

Permission will not be given for exotic pet animals e.g. reptiles, snakes or fish that require specialist facilities and foods, which could introduce infections into NHS Forth Valley.

Some pet animals may be refused on grounds of type of behaviour, infection risk or amount of space needed for it to be treated well.

A pet animal that is clean and healthy, has all required immunisations, is temperamentally suitable and predictable (friendly, calm, under control) should be chosen.

Any pet animal selected should be registered with a recognised veterinarian (preferably local) and ideally enrolled under an insurance policy scheme.
9.3 Food and Feeding of Pet Animals

All persons involved in food preparation for pet and service animals must practise high standards of hygiene.

All animal foods must be stored in a designated area of the ward/residency/healthcare premises and not in the kitchen or fridge. Stored animal foods should be out of residents’ reach at all times.

- Pet animals must not be allowed into the kitchen area of the ward/residency.
- Feeding areas should be kept clean.
- Fresh water should be available at all times.
- Feed pet animals with commercial animal food only. Never feed raw or uncooked meat or unpasteurised milk as animals and people can acquire disease from eating these.
- Dried animal food should be kept in closed clearly identified containers stored in a separate cupboard or utility area. Containers must be pest proof and easily cleaned. Keep stocks to a minimum and rotate them regularly.
- Animal food must not be stored within the ward/residency fridge.
- Since titbits, scraps, snack and other supplementary food can interfere with an animal’s balanced diet (especially dogs), establish an identified feeding programme.
- Moist foods should be removed if not consumed within two hours. Dishes should be washed after each meal.
- A paw operated flip-top feeding dish for a cat is helpful.

The designated NHS Forth Valley employee(s) or handler/owner is required to show an understanding of Infection Control Protocols. If in need of advice, the Infection Control Team or a Veterinary Surgeon should be consulted.

9.4 Accommodation

Appropriate bedding/cages/tanks/hutches MUST be provided. These must be kept clean and fresh at all times.

Facilities for washing bedding, cleaning of litter trays etc. should be in a designated area of the ward/residency and NOT the kitchen or any other clinical area.

Tropical fish tanks must be regularly cleaned and maintained by an appropriate cleaning service. Small fish bowls should also be regularly cleaned and the dirty water disposed of into a toilet/sluice/macerator.

Heavy duty household gloves and a disposable plastic apron should be worn when cleaning duties are performed. The gloves should be washed in hot soapy water and dried prior to reuse, they should not be used for any other purpose.
9.5 Disposal of Waste/Litter

Always wear personal protective equipment (heavy duty household type gloves and a plastic apron) when cleaning or emptying cages, fish tanks/aquariums, litter trays, and when dealing with excreta. Wash the gloves at the end of the procedure. Cleaning equipment and personal protective equipment designated for these procedures must not be used for any other purpose. Odour neutraliser/stain remover should be used as required.

Patients or residents with suppressed or compromised immunity who may be susceptible to zoonotic or other infections MUST NOT undertake any of these tasks.

Litter trays can be fitted with a disposable plastic liner. This enables easy removal of soiled litter and helps keep the tray clean. The disposable plastic liner may be sealed with a knot or twist ties and disposed of in a black (household waste) bag.

Scrupulous care should be taken when disposing of excreta. Use a ‘poop-scoop’ bin or other recognised method of disposal if the pet is outside.

9.6 Disposal of Deceased Pet Animals

Where appropriate the local Veterinary Surgeon and/or Environmental Health Department must be contacted to check what regulations apply to the disposal of a deceased pet animal and what the options for disposal may be. Consultation with the named owner (if appropriate) about the preferred disposal of the deceased pet animal, explaining all the options, should be carried out.

Hygienic precautions should be taken i.e. use of heavy duty household type gloves and a plastic apron to be worn, when handling the deceased pet animal, cleaning the environment and disposing of any related materials or equipment.

Acknowledgement of the grieving process of those who were close to or cared for the pet should be recognised.

9.7 General Information

- All pet animals should be examined and screened by a veterinarian prior to taking up residence;
- Pet animals should have all vaccinations up to date;
- Pet animals should be checked annually by a vet;
- For pet animals a regular programme of screening should commence with accurate records kept of any vaccinations and treatments received i.e. programmes of disinfection, de-worming, and where applicable neutering of the pet;
- Pet animals where applicable, (e.g. dogs) should be house trained;
- Cats and dogs should be fitted with an identity collar detailing its name, place of residency and contact number;
Use caution with young pets, particularly puppies and kittens which are more likely to carry diseases. Until they have had their primary inoculations and have been wormed, kittens and puppies should not be introduced to immunocompromised people;

Pet animals should be well groomed and clean and examine regularly for fleas and ticks;

If the pet animal is sick, seek veterinary advice and give the treatment prescribed as instructed by the vet;

Keep any medicines for pet or service animals separate and away from medicines for humans. All medicines should be locked away;

Non-caged pet animals should have their own identified sleeping facilities (basket etc) and should be strongly encouraged to use them. **DO NOT** let animals sleep on patient’s beds;

The pet animal bedding and food bowl should be kept scrupulously clean to avoid the harbouring of parasites and cross contamination of possible infection/infestation;

Machine washable bedding (blankets and cushions etc) should be provided and regular laundering organised;

Facilities for the washing of food bowls, litter trays etc, should be designated to a particular area of the ward/residency. **- NOT the ward/residency kitchen or any other clinical area;**

Litter trays should not be sited near food storage, preparation or eating areas. Litter should be changed daily;

Regurgitated food or vomit should be promptly dealt with **(refer to Decontamination of Medical Devices (Care Equipment) and the Environment Including Management of Spills and Blood/Body Fluids);**

Hand hygiene should be performed by patients and staff following contact with a pet, therapy or assistance dog **(refer to Hand Hygiene Policy);**

Hard surface should be cleaned as required and when they become soiled;

Tropical fish tanks should be kept away from bedside areas;

Therapy animal visits should be carried out through an organised pet scheme e.g. Therapet, where possible;

Visiting and service animal handlers/owners should be responsible for cleaning up any soiling.

This list is not exhaustive and if staff have any concerns about a pet, therapy or service animal they should seek advice from the Infection Control Department.

### 10. Allergies

Some individuals are allergic to the fur, feathers and dander of certain animals. This often manifests itself as a rhinitis or wheeze. The ward/residency should be mindful of this and take appropriate action if this occurs.
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