

Animals - Therapy Companion in Public and Private Hospitals

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Summary These guidelines set out the appropriate steps to be taken in implementing a program of animal assisted intervention in NSW public and private health facilities. They seek to standardise practice and to encourage the adoption of animal therapies where appropriate. The guidelines cover issues involved in having a therapy companion animals program. They do not specifically consider issues associated with resident animals, nor do they apply to the use of animals that perform a specific function or task, such as guide dogs, where their management and practice is well established.

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**Guidelines for the Use of Therapy Companion Animals in
Public and Private Hospitals**

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Introduction

Each day in NSW, health facilities play host to therapeutic and companion animals. Animals visit older people in nursing homes, young people in paediatric wards, trauma victims in acute care wards, and people under care in mental health and palliative care services. They provide comfort, entertainment, distraction, solace and a unique form of interaction. The benefits of these visits are well established and comprehensively documented.

Introducing animals to health facilities is neither new nor particularly controversial. It does, however, require careful planning, management and a professional approach to ensure potential problems are avoided.

Scope

These guidelines set out the appropriate steps to be taken in implementing a program of animal assisted intervention in NSW public and private health facilities. They seek to standardise practice and to encourage the adoption of animal therapies where appropriate.

These guidelines are not a policy document. They outline a sound approach that facilities should follow if they wish to implement a program of animal visits. The decision to implement a program is entirely at each health care facility's discretion.

The guidelines cover the issues involved in having a companion animals program. They do not specifically consider issues associated with resident animals, nor do they apply to the use of animals that perform a specific function or task, such as guide dogs, where their management and practice is well established.

Private health facilities are encouraged to draw on these guidelines in the development of local policies and protocols. Existing guidelines should be reviewed to check their consistency with this document.

Terminology

There is a range of terms used in relation to companion animals which refer to the different types of activity and goals of programs.

Animal assisted activity

Animal assisted activity generally refers to casual activities of the 'meet and greet' kind. It can involve animals and handlers visiting patients and their families at the bedside or in common areas, and is delivered by specially trained volunteers or professionals with animals that meet specific criteria.

The goals of animal assisted activity include reducing anxiety, increasing tactile contact, improving self-esteem and stimulating interaction. Animal assisted

activity is often credited with improving staff morale and assisting during some procedures, especially with children, by providing a welcome distraction.

Animal assisted therapy

Animal assisted therapy is a structured mode of tailored individual therapy that is run under professional supervision, with animals trained for the role. Goals can include improving strength, range of motion, balance, memory, speech and interaction. These interventions are delivered through structured rehabilitation and recovery programs.

Animal assisted intervention

Animal assisted intervention is a term used throughout these guidelines to cover both animal assisted activity and animal assisted therapy.

Facility

Facility in these guidelines refers to a public or private hospital or health care setting. It includes the buildings and grounds that may be accessed by patients and staff.

Personal pet visitation

Often patients want to see their own animals, in much the same way as they want to see any other loved one. The goals of allowing personal pet visitation include reducing anxiety, stimulating memory, communication and interaction.

While these guidelines specifically apply to organised programs of animal assisted interventions, many of the same principles (such as hygiene, suitable animals, etc) will apply to personal pet visitation. There are also some specific considerations to be taken into account when facilitating personal pet visitations. For more information, please refer to the section on personal pet visitations.

Why consider animal assisted interventions?

The current literature reflects the experience of many in the NSW health system. Animals change the atmosphere of the health setting, usually bringing a calming, normalising experience to an institution. They can provide a simple interactive pleasure, a focus for attention that is neither threatening nor demanding, allowing patients to respond in their own way. Since most animals used in programs allow tactile interaction, don't require conversation and are responsive to humans, they add a unique character to patient settings.

Recent reviews of the literature on animal assisted interactions by Brodie (2002), Velde (2005), Stanley-Hermanns (2002) and Cole (2000) have summarised the many physiological and psychological benefits of human companion animal interactions.

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These include:

- reducing anxiety and promoting relaxation, characterised by decreased blood pressure, heart rate and peripheral skin temperature.
- increasing range of motion and better sensory modulation and interpretation with animal interactions, especially among children with disabilities.
- promoting reminiscence and alertness, especially among older patients with dementia.
- improving social interaction with staff and other patients.
- reducing loneliness and social withdrawal among older people and people experiencing mental distress.
- enhancing emotional well-being, evidenced by changes in affect, facial expression (smiling) and talking.
- improving mood and motivation in attending therapy sessions.
- increasing responsiveness among patients with acquired brain injury.

These studies tend to be descriptive in nature, focussed on social and behavioural changes rather than prolonged physiological impacts and are usually without reference to randomised control trials. Despite this, the use of animals in many aspects of health care is a growing trend.

Concerns over negative impacts from animals are a natural response to their introduction into health facilities. Potential infections, injuries and sanitation issues all require careful management. In a comprehensive review, Brodie (2002) cited concerns over animal bites, allergies and zoonoses (transmission of disease between animals and humans) as “the three issues surrounding pet therapy causing greatest concern”. She concluded:

The potential to suffer harm does exist but can be minimised by taking simple measures, including careful selection of animal and client, thorough planning and allocation of responsibility, rigorous health care of animal and informed practices by all involved. (Brodie et al, 2002)

Planning a program

There are practical issues that need to be addressed by any facility wishing to introduce a program to ensure it is safe and effective.

In most instances, it is easier to appoint a Therapy Animal Organisation to manage the process of screening, selecting, training and monitoring the animals

and their health (for infection control purposes) than to do it in-house. NSW Health and/or private health facilities could not easily duplicate the entire process and its management. A list of Therapy Animal Organisation currently operating in NSW is attached at Appendix 1.

Identifying a coordinator for the program

While the Therapy Animal Organisation will manage the recruitment, assessment and training of animals and their handlers, it is important that any facility implementing a program designate a person or department as the internal point of coordination for the program.

This person or department will act as the liaison point between the facility and the Therapy Animal Organisation, and will be responsible for ensuring that the program runs effectively. The development of a small committee to oversee the selection of a Therapy Animal Organisation and initial implementation of the program may be useful. Numerous professions are involved in animal assisted intervention programs including nurses, occupational and diversional therapists, physiologists and psychologists and a committee may draw from these groups.

The program coordinator and/or committee will need to:

- In consultation with staff, identify patient populations where animal-assisted interventions might be beneficial and appropriate.
- Investigate and select a suitable provider from available Therapy Animal Organisations.
- Develop policies and procedures relevant to the particular setting considering existing policies and procedures for infection control, volunteer management and so on.
- Review applications and health screening details for therapy animal handlers, volunteers and animals (for example, rejecting a dog that has ever bitten anyone, coordinating background checks for volunteers etc).
- Organise orientation and familiarisation sessions for handlers and volunteers.
- Deliver any required in-house training to teach staff about referrals, infection control, indications for therapy animal use, and patient safety.
- Conduct an annual evaluation of the animal-assisted intervention program.
- Determine how frequently they wish to have animals visit the facility and for how long (most facilities schedule an hour once a week).
- Identify who will be responsible for volunteers and their animals while they are on-site.

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Clear procedures need to be established at the outset to ensure the highest professional and ethical standards are applied to animal assisted interventions, as in any other therapeutic intervention. Information required for the program and how referrals are to be made to it should be specified.

The facility should also keep records of visits and interventions, logs of any internal training conducted of personnel, and records of volunteer time allocated to the program if hospital volunteers work on the program. Generally, the Therapy Animal Organisation will maintain animal records.

Facilities implementing a program of animal assisted intervention need to consider their responsibilities under the *Companion Animals Act 1998* and *Companion Animals regulation 1999*.

The Act sets out responsibilities for the control of dogs. These include provisions for leashes, collars, identification and effective control in public places. It is likely that many of the facilities hosting visits would be considered to be public places for the purposes of the Act. It is essential that all animals used in any program and their handlers comply with provisions of the Act.

Dogs are prohibited from children's play areas, and from food preparation and consumption areas. The Act also sets out special control requirements for restricted dogs and dangerous dogs. In order to minimise the risk of injury or damage, it is recommended that no dangerous or restricted animals be permitted to visit patients in health facilities. An up-to-date list of these animals can be found at http://www.rnswcc.org.au/restricted_breeds.html

Therapy Animal Organisations would not accept these breeds of dog into their programs, but individual patients who have these breeds as personal pets would not be eligible to have their pets visit them.

The facility should also ensure that other patients, visitors and staff are aware that there is an animal assisted intervention program in place. Signage should be placed at the entrances to each ward or area where animals are in use clearly outlining the days and times when animals may be on the ward, and providing the contact details of the program coordinator.

Selecting a Therapy Animal Organisation

Most Therapy Animal Organisations draw on a workforce of volunteers, though at least one operating in NSW has professional staff and veterinary expertise. People and their pets volunteer to become part of an organisation's program. Not all organisations operate the same way, and assessing them is the first stage in beginning a program.

Therapy Animal Organisations usually charge facilities on a fee-per-visit or annual basis, which covers some of the cost of their service. This needs to be negotiated as part of any program agreement. Internal costs associated with staff time also need to be taken into consideration.

Any program exposes a facility to a liability risk, but the types of strategies recommended in these guidelines along with a risk management assessment of the proposed activity should provide substantial risk minimisation.

Therapy Animal Organisations usually provide public liability cover for their animals and volunteers. Health facilities engaging their services need to ensure that the type and level of cover the organisation holds is commensurate with the type of risk generated by the program. This should be clarified as part of an agreement with the organisation prior to any visits. The facility also needs to ensure that it has insurance or indemnity cover in respect of any potential claims.

An agreement between the facility and the organisation should be reached prior to the implementation of the program to establish the respective roles and responsibilities of each party, clarify insurance and liability issues and any fees involved in their service.

In choosing an organisation to work with it is important to consider four criteria.

1. The organisation's animal testing and screening process.

Before an organisation accepts an animal into its program, it undertakes a screening program. The minimum screening process should include evaluation of the animal's temperament and aptitude, certification of its vaccination status, and veterinary screening.

Animal evaluation is a specialised skill, and evaluators are trained to identify stress responses in animals. Displays of aggression (growling for instance), distractedness and nervousness will disqualify an animal for therapy or visiting purposes. An animal/volunteer team is generally assessed on the temperament of both the animal and their handler and the quality of the interaction between them. This can include:

- an evaluation of the animal's ability to obey basic commands;
- the demonstration of a confident and gentle relationship; and
- the ability of an animal to cope with unexpected or stressful situations such as the animal being grabbed from behind, being in the presence of many strangers and dealing with the many distractions (eg noises and smells) of a health facility.

2. The volunteer training and veterinary management processes

The key to a safe animal assisted intervention is to have consistent evaluation and training guidelines for the handlers and animals. It is also necessary that facility staff be involved in the program from the outset, be familiar with the issues and understand the procedures to be followed when hosting animals in their facilities. This requires close and regular liaison between the coordinator and the organisation.

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Therapy Animal Organisations will undertake the recruitment and training of animals and their handlers, and will certify that the animal has had the required vaccinations and veterinary checks.

Detailed protocols have been prepared by Veterinary Associations and are implemented by Therapy Animal Organisations. These should be reviewed by the facility prior to any program being implemented.

3. The organisation's level of professionalism

Therapy Animal Organisations have extensive experience in the conduct of animal assisted activity. A suitable Therapy Animal Organisation should be expected to have policies and procedures in place to guide the recruitment and training of animals and volunteers; comprehensive policies about (and requirements for) veterinary and animal health checks; a solid and professionally implemented program for the assessment of animals; and the requisite public liability insurance covers.

The Therapy Animal Organisation will work with a facility to develop a written agreement outlining roles and responsibilities.

You should also expect the organisation to be able to provide you with references from other facilities with which it has visiting arrangements, and a clear (and appropriate) fee structure.

4. Their experience and track record of visiting other facilities

At the time of preparing these guidelines, the following NSW Health facilities indicated that they had implemented programs with Therapy Animal Organisations in NSW:

- The Children's Hospital at Westmead
- The Sydney Children's Hospital
- Nepean Hospital
- Gosford Hospital
- John Hunter Hospital
- Royal North Shore Hospital
- Prince of Wales Hospital
- Hornsby Hospital

The list is not exhaustive as the use of animal assisted interventions to enhance patients' wellbeing is growing in popularity. If your facility is considering implementing a program, you may wish to speak with a NSW Health facility that is already operating a similar program.

Identifying suitable types of animals

The types of animals that will be used for animal assisted interventions will depend on the animals recruited by the Therapy Animal Organisation. You may

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need to consult with infection disease specialists to ensure that the animals selected are appropriate for your facility.

Both dogs and cats have been studied and found to be predictable in both behaviour and susceptibility to disease. The most commonly used intervention animals are dogs, due to their ease of training and generally even temperament.

Cats must be trained and meet the same criteria as dogs, though obviously are not required to follow commands. They are usually caged or trained to remain in baskets while being petted. Cats are usually deemed unsuitable for oncology patients, due to infection risks. For the same reason, puppies should be excluded if they have not completed the required vaccination regime.

In some facilities, a more integrated approach to animals has been adopted, with farm animals forming part of the setting of the facility (often known as the Eden Alternative). In these cases, the animals are resident and interact with the patients in the same way as they would in a normal domestic or rural setting.

The Children's Hospital at Westmead regularly hosts a visiting Kindifarm, but excludes chicks and ducks from the program because of the potential risk of avian flu. Additionally, they have arranged visitations from NSW Police Dog Squad, Fisheries, NSW Parks and Wildlife and zoos where children can interact with animals in an outdoor setting (for example a ward courtyard). Pony rides and visits from puppies owned by reputable breeders (where all vaccinations have been completed) have also been arranged.

Reptiles are not considered appropriate for facility visits as salmonella is often found in the mouths of lizards.

Identifying wards or units where animals will be allowed

Areas where animals might be used include:

- medical-surgical units
- paediatrics
- oncology
- hospice/palliative care services
- rehabilitation
- psychiatric units
- long-term acute care units.

This list is neither prescriptive nor exhaustive, and in each situation the facility will need to consider those patient groups who could most benefit from the intervention, and for whom risk is low. Decisions should be made in consultation with the Infection Control Team and the attending physician.

While some studies suggest that in-patient mental health facilities (particularly acute units) are not appropriate for animal assisted interventions due to the

often rapidly changing nature of the setting, a number of facilities in NSW (including The Children's Hospital at Westmead and the Mandala Unit in Gosford) have had extremely positive experiences in using animal assisted interventions in sub-acute mental health facilities.

Of course, animals may also be used in outdoor settings appropriate for patients and in many facilities a courtyard or garden area may be the preferred location for visitations.

Identifying areas where animals will not be allowed

Animals should not be allowed in sterile areas, or in any isolation rooms without consultation with the Infection Control Team.

Animals should not be allowed in kitchens, food preparation or dining areas.

Animals should also be excluded from intensive care and high-dependency areas because of safety issues.

There may be additional site-specific areas that should be identified as out-of-bounds for the program for safety, infection control or hygiene reasons.

Considering animal welfare

Facilities hosting animal visits should ensure that amenities provided for animals include the food, drink and shelter necessary to maintain the animal's health and well-being. It is important that animals are transported to and from facilities in a safe and lawful manner.

Consider access to the hospital, and the most appropriate place for handlers to park their vehicles. You may wish to provide a covered parking space with under-cover access to the facility to avoid animals becoming muddy or dirty in wet weather. Wet dogs should not be allowed in wards.

Any potential hazards such as drugs and dangerous objects should be removed from areas where animals will be spending time.

The facility will need to identify a designated animal toilet area. The handler should be responsible for cleaning up after their animal.

Animals working with Therapy Animal Organisations are highly trained and predictable. However, as accidents can happen particularly if an animal is nervous, each facility will also need to decide its own level of tolerance for an animal that accidentally goes to the toilet in the facility and whether or not the animal will be allowed to continue to volunteer.

Implementing a program

Once you are ready to implement a program, you will need to liaise closely with the Therapy Animal Organisation to initiate the visits. There are a number of elements that must be in place to ensure the effective implementation of a visitation program.

Communication

It is important that patients, staff and visitors in a facility are made aware that an animal visitation program is operating. Consider placing signs in the areas where animal assisted interventions are being implemented so that people know what to expect.

Signage might include details on the days and times when animals might be in the ward/area; how to request a visit; and the need for any patient, staff member or visitor who is in contact with an animal to wash their hands or use anti-bacterial gel. The contact details for the program coordinator should also be provided so that patients or visitors can discuss any concerns with the coordinator.

Screening and selection

Veterinary screening for animals

Most reputable Therapy Animal Organisations have already determined a protocol about the vaccinations their animals must have to participate in visitation programs. If there is any concern, seek advice from the local veterinary association and Public Health Unit about which vaccinations are required for the animals that are going to be used in the program. When you are drawing up your agreement with your Therapy Animal Organisation, you should include both vaccination requirements and requirements for regular laboratory evaluations for the animals. Therapy Animal Organisations undertake these processes for animals they provide to facilities.

If your facility plans to allow personal pet visitations, you should draw up guidelines for visitors to help ensure that personal pets comply with the guidelines relating to cleanliness and vaccinations. For more information, see the section on Personal Pet Visitations.

Health screening and vaccinations for human volunteers

Volunteers should be of good health, and the same standards that apply to hospital volunteers should be applied to volunteers from the Therapy Animal Organisation.

Employment Screening

For the safety of patients, their families and employees, facilities need to undertake screening of volunteers participating in a program.

The standard form used for background checks on hospital volunteers or workers should be completed by the Therapy Animal Organisation's volunteers. No volunteer should be permitted to start visiting a facility before the police record check and (if appropriate) a Working With Children check is complete.

Training and orientation

Therapy Animal Organisations train their volunteers prior to assigning them to facilities. However, it is important that each facility familiarise their volunteers with information about the facility they are visiting explaining the use of anti-bacterial hand gels, using towels on beds, turning mobile phones off, and any emergency procedures volunteers should be aware of. Facilities are strongly encouraged to develop a ward protocol to be followed by volunteers visiting with their animals. A sample protocol is provided at appendix B.

Facilities should also conduct an orientation and familiarisation session for the volunteers before they visit with their animals. It is strongly recommended that this session include a well-delivered and comprehensive infection control orientation.

Patient consent

Patient consent is required prior to initiating an animal assisted intervention. Patients and staff need to be asked if they are comfortable to participate (as in any other therapy or activity) and – as a general rule – any patients with phobias or past trauma such as dog bites, or with animal allergies should not be exposed to the program.

In some cases, however, facilities operating animal assisted interventions have had good results from arranging visits between a trained animal and a patient who has had a negative experience with a dog. Care must be taken to discuss the suitability of a visit with the patient themselves, their parents or carers (if appropriate), and nursing staff on the ward. The Therapy Animal Organisation will also be able to provide assistance on any planned interventions for patients with phobias or past traumas

If a patient with a phobia, past trauma or allergy does not wish to participate in the program, the animal should not be allowed into the room even if other patients within that room wish to have the animal visit.

In certain cultures and religions, particular animals are considered unclean or offensive. These beliefs should be respected.

Infection and injury control

These issues often cause apprehension when an organisation is seeking to establish an animal assisted intervention program. However, all have the potential to be controlled in a supervised health care setting.

Animal selection, training and management is undertaken by Therapy Animal Organisations. Thorough procedures ensure that bites or injuries are a very low risk from well-behaved animals. This is also why untrained animals should not be used in programs.

Careful selection of animals, obtaining an accurate history from patients, and careful and regular grooming of the animal reduces the risk of allergic reaction. It is important to ascertain any allergic reactions among patients prior to commencing a program and ensure patients who have had traumatic experiences, such as children bitten by dogs, are not exposed.

Veterinary screening of all animals before they enter any facility and participate in a program is essential to maintain infection control and minimise risk of transmission of common zoonoses. Detailed protocols have been prepared by Veterinary Associations and are implemented by Therapy Animal Organisations. These should be reviewed by the facility prior to any program being implemented.

If an animal is unwell or is shedding a lot of hair, visits by that animal should be postponed until the animal is well again.

In the event of an incident occurring while an animal is visiting (for example a bite), facilities are required to record the incident in accordance with the Incident Information Management System Policy (PD2006_030).

Patients who are immune-suppressed should not be in contact with animals unless approved by their physician.

Hygiene

Hygiene is essential for all participants:

- Handlers must wash their hands between patients.
- Animals must be cleaned and checked for parasites and general health prior to each visit.
- Animals should not be allowed near patients with open wounds or burns.
- Tracheostomies must be covered.
- Patients and visitors must wash their hands or use anti-bacterial gel after handling an animal.
- If an animal is to be placed on a bed to interact with a patient, a towel must be placed under the animal.

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Detailed protocols for animal assisted interventions, including detailed veterinary guidelines, are available from Therapy Animal Organisations.

Facilitating personal pet visitations

Visits from much-loved pets offer patients similar health and wellbeing benefits as other animal assisted interventions. In addition, these visits can reduce the distress felt by some patients at being away from home and loved ones.

It is recommended that all procedures suggested in these guidelines relating to ward protocols, hygiene, animal welfare, infection and injury control and suitable areas for animal access be followed when implementing a program of personal pet visitations.

However, there are some differences between implementing a program in partnership with a Therapy Animal Organisation and implementing a personal pet visitation program.

Whereas a Therapy Animal Organisation will ensure that animals participating in the program are vaccinated and thoroughly assessed for suitability, personal pets will not have had such rigorous vetting. It is therefore important to have some additional procedures in place if you wish to implement personal pet visitations.

A single point of coordination

As with a program implemented through a Therapy Animal Organisation, facilities should identify a single point of coordination for the program. This will enable visits to be conducted in a safe and positive manner, with clear communication about the arrangements to be put in place for visits.

Animals that will be allowed to visit

In the case of personal pet visits, some facilities may restrict the types of animal allowed; others may be able to accommodate visits by larger and more unusual pets. Restricted or dangerous animals or animals subject to special safety precautions should not be allowed into facilities. Any requests for pets other than cats or dogs must be considered on a case-by-case basis. You should risk assess the visit, and consult with the Infection Control Team about the suitability of the animal for visitations.

Pre-booking visits

Visits from personal pets should be booked in advance, with a time and date allocated by the program coordinator. As for Therapy Animal Programs, ward signage might include details on the days and times when animals might be in the ward/area; how to request a visit; and the need for any patient, staff member or visitor who is in contact with an animal to wash their hands or use anti-bacterial gel.

Vaccination and health standards

Personal pets visiting their owner must meet vaccination and health standards. It is suggested that the handler who will be bringing the pet provide a vaccination certificate ahead of the planned visit (at the time of booking or the day before the intended visit would be appropriate).

The pet should have received all required vaccinations – as a guide, the same vaccinations as required by a Therapy Animal Organisation. It may be most appropriate for personal pet visits to occur outdoors as it would take a significant length of time for personal pets to pass all the tests and swabs that Therapy Animal Organisations apply to their animals. It is, however, recognised that outdoor visitation will not be possible for patients receiving acute care.

Animal cleanliness

For one-off visits, it is recommended that pets be bathed in the 24-hour period preceding the visit, and checked for fleas and ticks. If a facility decides, for therapeutic reasons, that a patient's pet should visit more frequently the program coordinator should discuss with the animal's handler how frequently the animal should be bathed. Advice should be sought from Infection Control and, if needed, from the local veterinary association.

Animal welfare

Hospitals and health care facilities can have smells and noises that animals have not encountered before. This can potentially make them nervous, so it is important that the handler is confident in his or her ability to manage the animal. If possible, visits should be held outdoors in courtyards or in areas suitable for both the patient and their pet. Inside a ward or facility, pets should always remain on a lead or in a cage or basket and never left alone with a patient, even if the pet is the patient's own.

Consent

If the patient is in a shared room, consent for the visit will need to be obtained from the other patients present. Because the pet's behaviour and temperament have not been professionally assessed, it is important that the pet visit only with their owner – even if other patients request a visit. Again, it is important to be respectful of other patient's wishes. If another patient in the room does not wish to have the animal visit, an alternative location for the visit might be sought (for example a courtyard) if the patient is mobile.

Additional information for handlers

A ward protocol for personal pet visitations should be implemented.

It is important to remember that handlers bringing personal pets to visit a patient will not have the same level of training or experience as those who work with a

Therapy Animal Organisation. Some additional information may need to be provided to handlers who are bringing pets to the facility for personal pet visitations. This might include information on:

- How to “book” a visit through the program coordinator.
- Animal cleanliness and vaccination requirements.
- Toileting and welfare arrangements (you should specify that animals are to have been toileted before entering the facility, but you should also require handlers to bring plastic bags to dispose of waste).
- Animal control and safety requirements (reminding that animals are to remain leashed or caged at all times).
- Visit length and locations (and reminding that occasionally, for patient care reasons or in an emergency, a visit may need to be cut short).
- Where to obtain a towel if the animal is to be placed on a bed.
- The requirement for pets to interact only with the patient they are visiting, and not with any other patient or visitor.
- The importance of handlers and patients washing their hands or using anti-bacterial gel (eg Aqium) once the visit is over.
- The need to notify nursing staff of any accident or injury that occurs during a personal pet visitation.

Evaluating a program

It is important to regularly review any program to ensure that it is meeting the needs of patients and staff. It is recommended that facilities continuously monitor and evaluate the program, adjusting it where needed. For example, new patient groups may be identified who could benefit from animal assisted intervention; the need for more animal/handler teams might be identified; or a facility may opt to increase the frequency of visits by volunteers and animals.

In evaluating the program, the coordinator should gather feedback from patients, their parents and carers, nurses, doctors and health professionals who have seen the program in action, volunteers working on the ward, and the volunteers who attend the facility with their animal. The Therapy Animal Organisation should also be able to assist you with identifying aspects of the program that are working well, or need improvement.

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APPENDIX 1 – THERAPY ANIMAL ORGANISATIONS OPERATING IN NSW

The Delta Society

The Delta Society is the largest organisation in NSW catering for the therapeutic use of animals (dogs), with over 50,000 visits in the last eight years since becoming registered in 1997. The Society operates as a registered charity in NSW, Victoria, SA, Queensland, and Tasmania.

There are currently 220 Pet Partners teams in operation in NSW, across Sydney, the Hunter, New England, the Mid-North Coast, the Central Coast and the Central West. It is currently the major provider of therapy animals to health facilities in NSW, visiting children's and adult hospitals, children with special needs, aged care facilities, rehabilitation units, mental health facilities and community group homes.

The teams are matched to an appropriate facility and introduced under supervision, with volunteer co-ordinators monitoring the work of teams in each region. They are covered by the Society's Public Risk and Accident Insurance policies

<http://www.deltasocietyaustralia.com.au>

Companion Animals Services (CAS), Age Concern – Albury Wodonga Inc.

The objective of CAS is the promotion of visiting pets for older people and people with a disability in nursing homes, hostels or their own homes. Volunteers also visit special schools for children with disabilities in Albury and Wodonga. The service currently has approximately 30 volunteers who cover 18 establishments in the twin cities and surrounding areas. This also includes people without pets who help with walking dogs where their owners are no longer able to do so.

<http://www.anthrozoology.com.au/therapy/cas.htm>

Velma's Pets as Therapy Program

Provides trained, accredited volunteers and their pets to visit people in nursing homes, retirement villages, aged care or health care facilities, with the prime purpose of bringing fun, joy and physical, social and mental stimulation. Trainers are available in Sydney, Central Coast, Newcastle, Dubbo, Wollongong and the Southern Highlands.

<http://www.velmaspetsastherapy.com.au>

These services are listed as operating in NSW in the Australian Directory of Human Animal Interaction Programs. For more information, visit <http://www.anthrozoology.com.au>.

APPENDIX 2 – SAMPLE WARD PROTOCOL

(Adapted from a protocol used by The Children’s Hospital at Westmead)

DOG VISITING PROTOCOL

Date:

Dogs and owners:

WARD PROTOCOL

Please check the following with nursing staff upon arrival on the ward:

- Are there any patients in isolation or who can't be seen?
- Have any patients been admitted due to a dog bite?
- Are any patients known to be fearful of dogs? We will not enter the patient's room irrespective of the requests by other children or families in that room.
- Are any patients known to be allergic to dog hair?

Guidelines:

- Always ask a patient if they would like a visit before entering their room.
- If a procedure is taking place, or a doctor is with a patient please return later.
- If the patient wishes to have the dog sit on the bed, please place a towel on the bed. Towels can be found in linen cupboards on the wards.
- Anti-bacterial hand gel (eg Aqium) must be provided to all patients and their visitors/guests for use after patting the dog.
- Some cultures and religions believe dogs to be unclear or may find them offensive. Please be respectful of an individual's wishes.
- Please stay with your dog at all times.
- Report any incidents (eg accidents, bites, scratches) immediately.

If you have any questions or problems, please contact:

APPENDIX 3 – CHECKLIST

PROGRAM CHECKLIST – A STEP-BY-STEP GUIDE

The Guidelines for the Use of Therapy Companion Animals in Public and Private Hospitals provides a comprehensive list of the issues and factors you will need to consider and work through if you wish to implement an animal visitation program.

This checklist will help you set up your program.

- Identify a program coordinator.
- Decide the patient groups you are going to introduce the program for and those patient groups that the program is not appropriate for.
- Consult different areas within the hospital: clinical, nursing, allied health, psychologists, infection control – and any others that may have an interest in the program.
- Read the NSW Health Guidelines for the Use of Therapy Companion Animals in Public and Private Hospitals and use them to inform the development of your program.
- Contact some Therapy Animal Organisations to discuss your ideas for the program.
- Discuss with the Therapy Animal Organisation the options they offer, and the standards (health, hygiene, training etc) they will ensure for animals and handlers visiting the hospital.
- Discuss with the Therapy Animal Organisation their fees and seek necessary internal approvals to contract the Therapy Animal Organisation.
- Select the Therapy Animal Organisation that best suits your needs and whose standards meet your requirements.
- Develop a written agreement with the Therapy Animal Organisation about the responsibilities and the practicalities of the program (visit numbers and durations etc).
- Develop a protocol that outlines the measures you will implement to minimise risk (infection, injury etc).
- Undertake employment screening for volunteers who will be bringing animals into the hospital.
- Conduct a volunteer orientation, including a session on infection control and hygiene.
- Publicise the program and communicate its operation to staff, visitors and patients.