

1. Introduction and who the guideline applies to

- 1.1. This guideline applies to patients, staff, visitors, volunteers with PAT (pets as therapy) dogs, patient trained assistance dogs, patients pets, and ward / department fish tanks. This applies to all areas within the Trust.
- 1.2. The value of pet therapy is widely accepted as a powerful aid to stimulation and communication and is accepted as an aid to those with chronic disease.
- 1.3. Disease and infection can be acquired from a variety of animals and this has been extensively documented. Animals in health care premises may be hazardous for patients who are immunocompromised, allergic, pregnant, or who are accident-prone.
- 1.4. This guidance is to help reduce the risks associated with infections that could be passed on by animals.
- 1.5. The owner / handler of the animal are responsible for the animal at all times for the duration of the visit onto healthcare premises.
- 1.6. Some patients will not want contact with animals.
- 1.7. Visits from the patient's own pet may take place in exceptional circumstances, when there is a limited risk and the visit would be of benefit to the patient. There must be arrangements made with the clinical area manager and the infection prevention team before the visit can take place. All elements in section 2 must be adhered to and a visit plan completed (appendix1)

2. Animals in hospital settings

- 2.1. Generally animals are discouraged from healthcare facilities. However animals may visit the Hospital only if prior arrangements have been made with the ward / department.
- 2.2. All animal visits are to be approved by ward Sister / Charge Nurse / Departmental Manager, after consultation with ward staff and the Infection Prevention Team.
- 2.3. Pets are only permitted under exceptional circumstances. They are only to have contact with its owner / handler and the patient visited. A visit plan must be completed (appendix1).
- 2.4. No animal will be permitted without their owner/handlers, who are responsible for the animals and must remain with their animals at alltimes.
- 2.5. It is the responsibility of each animal owner / handler, to check and assess the health and suitability of their animal to visit on the day in question.
- 2.6. Owners/ Handlers and the animal must be in good health. Owners must comply with the infection prevention guidance, in place at the time of the visit. This might change from time to time so must be checked before attending.
- 2.7. Anyone who has contact with an animal must wash their hands immediately

after they have had contact with the animal.

- 2.8. The animal's routine vaccinations must be up to date and a certificate must be available to confirm this. If the animal shows signs of being unwell then it should be removed from the premises.
- 2.9. Animals must be exercised prior to entry to the ward or hospital grounds to reduce the risk of excretion on site
- 2.10. The visit should not take place in a ward bay; it should be in a designated area agreed by the ward manager and infection prevention team.
- 2.11. The animal must be kept on a leash. Or if a small pet in a cage.
- 2.12. Animals must be excluded from kitchen areas at all times and from wards/departments during meal times.
- 2.13. Animals must not be fed on the premises.
- 2.14. Appendix 2 has useful contacts and service providers for assistance and therapy dogs.

3. Trained assistance dogs

- 3.1. Assistance dogs are allowed on the hospital premises but must meet the criteria for assistance dogs. Be registered with Assistance dogs UK. These dogs will;
 - a. be highly trained,
 - b. not wander freely on the premise,
 - c. sit or lie quietly on the floor next to their owner,
 - d. not display reactive behaviours, such as growling snarling or biting.
 - e. not show signs of continuous fear
 - f. trained to go to the toilet on command and will not foul in a public place
 - g. be vaccinated in line with international standards of best practice (titre testing is no substitute for vaccinations)
 - h. have received comprehensive routine parasite prevention against fleas, worms and other transferable organisms
 - i. be covered by specific assistance dog insurance for public liability
 - j. must not be fed on the premises
- 3.2. If the dog is not a registered assistance dog with assistance dogs UK. Then the healthcare provider should ask for evidence of the following
 - a. Training and temperament / behaviour testing the dog has been through
 - b. Vaccinations. The owner should be able to show certificates for, distemper, parvovirus, hepatitis, leptospirosis (titre testing is no substitute for vaccinations)
 - c. Parasite prevention. The owner should treat to prevent fleas, tick, and worms on a regular cycle. The dog must not visit if treated with a topical ectoparasite treatment (to the back of the neck) for 48 hours after treatment
 - d. Owners must not feed the dog raw food and the dog should not be fed on site.

e. Public liability insurance suitable for healthcare settings

- 3.3. Where possible the ward/department should be informed of the visit before it occurs so that provision for the visit can be made.
- 3.4. Healthcare workers need to be aware of the individual's needs and the role that the dog undertakes. If the dog cannot be present talk to the patient about how their needs will be met.
- 3.5. The healthcare professional should satisfy themselves that the hospital environment and activities undertaken by the dog do not pose an unacceptable risk to the person, others present or the dog.
- 3.6. The healthcare professional should understand who has responsibility for the dog when it is in the hospital environment. In all cases healthcare staff are not expected to care for the assistance dog. It is the responsibility of the person or their nominated representative to ensure the dog is fed and toileted and cared for.
- 3.7. There are some areas where it would not be appropriate for a dog to be present these include: high radiation areas such as X-ray and operating theatres.

4. Pat Dogs (Pets As Therapy)

- 4.1. PAT dogs are permitted to visit the hospital, as long as they are part of a recognised scheme.
- 4.2. All other PAT animals such as cats, rabbits and birds are not permitted.
- 4.3. In all cases the dog and owner / handler must have clear identification for both the owner / handler e.g. a photo ID card and dog jacket
- 4.4. The dogs will have had appropriate training in their role including temperament / behaviour they will be vaccinated and parasite checked as part of the organisation that they represent.
- 4.5. The PAT dogs owners will have undergone an induction as part of the volunteer role to the organization and have a DBS check
- 4.6. All visits by PAT dogs must have permission from either Ward Sister or Nurse-in-Charge. Patients, in the ward who may come into contact with the animal, should be consulted about the pet visit to prevent anxiety for patients with phobias and allergies.

5. Patients who are not permitted to have contact with animals

- 5.1. Anyone known to be immunosuppressed.
- 5.2. Anyone with known allergies to specific animals.

6. Incidents involving animals

- 6.1. Should an incident or near miss occur, an Incident Report Form must be submitted via datix
- 6.2. Animal bites can occasionally cause serious infections.
- 6.3. If a bite or scratch from an animal occurs, it should be washed with soap and water, dried and covered with a dressing.
- 6.4. Medical advice should be sought if in doubt and treatment advice can be obtained from the UHL antimicrobial website <http://insite.xuhl-tr.nhs.uk/antibiotic>

7. Cleaning Up After The Animals

- 7.1. The animal owner/handler must undertake cleaning up of faeces or urine or vomit from the animal.
- 7.2. The clinical staff must then clean the area with chlorclean. All waste material must be put into an orange clinical waste bag and sealed as per Waste Management Policy and Guidance (Trust reference: A15/2002).

8. Fish Tanks

- 8.1. A fish tank may be beneficial in certain settings as watching fish has been purported to have a calming effect and reduce stress. However, immunocompromised patients should avoid direct contact with fish tanks and the aerosols that these produce.
- 8.2. The general infection prevention principles for fish tanks in acute hospitals are;
 - a. The fish tank must be maintained to minimise risks to patients and for the fish to be in a well maintained environment to enable the fish to thrive.
 - b. The fish tanks should be located in an area that allows the ease of maintenance.
 - c. The fish tank must be covered with a secure lid.
 - d. Patients must not have direct access to the fish.
 - e. The aerator must be switched off before all tank and fish maintenance. The aerosols generated by the aerator are a potential hazard to some patients.
 - f. The fish tank should be maintained weekly by a designated person this includes regular cleaning, water refresh, cleaning of filters, aerators' and gravel beds.
 - g. The equipment used to clean the fish tank should be designated for that task only.
 - h. Water emptied from the fish tank should be disposed of in the dirty utility room, down a slop-hopper or designated dirty sink. The wash hand basin must not be used.
 - i. When cleaning the tank person should wear gloves and aprons and hands must be decontaminated following the procedure.
 - j. The cleaning should be recorded in a maintenance log book.

9. Monitoring and Audit Criteria

| Key Performance Indicator | Method of Assessment | Frequency | Lead |
|--|-----------------------------|-----------|---------------------------------|
| Where fish tanks are kept an audit should be undertaken of the maintenance logs by the Ward/Department Manager | Audit of maintenance logs | 6 monthly | Ward Manager |
| Number of incidents relating to animals in hospital | Analysis of Datix incidents | Yearly | Lead Nurse Infection Prevention |

10. Supporting Documents and Key References

Guidelines for Environmental Infection Control in Health-Care Facilities (2003)

<https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/animals.html>

Murthy R (2015) et al Infection Control Experts Outline Guidance for Animal Visitations in Hospitals. Infection Control and Hospital Epidemiology

Pets as Therapy website www.petsastherapy.org Accessed Nov 2021.

RCN (2019) Working with Dogs in Health Care Settings. RCN Clinical Professional Resource

Royal Devon and Exeter NHS Foundation Trust (2010) Guidance on Animals and Pets in Healthcare Facilities

The Newcastle upon Tyne Hospitals NHS Foundation Trust (2009) Animals on Hospitals Premises Policy

11. Key Words

Animal, PAT animal, PAT dog, Fish, Fish tanks, Pets

| CONTACT AND REVIEW DETAILS | |
|---|--------------------------------------|
| Guideline Lead (Name and Title) Dawn Westmoreland Senior Nurse IP | Executive Lead Chief Nurse |
| Details of Changes made during review: Reviewed, slight changes to include COVID-19 and update of a reference | |

Appendix 1

Pet visiting the hospital: Visit plan

| | |
|-------------------|----------------------------------|
| Patient name: | S number: |
| Date of visit: | Hospital / Ward : |
| Reason for visit: | Where will the visit take place: |

| Approval obtained | Name and signature | Date |
|------------------------------------|--------------------|------|
| Consultant: | | |
| Nurse in charge: | | |
| Infection prevention team: | | |
| Patient family agreement | | |
| Patient (if relevant and possible) | | |
| Person responsible for the animal | | |

Checklist

| Instructions | Name and signature | Date |
|---|--------------------|------|
| You take full responsibility for your animal | | |
| You will ensure the animal is bathed and brushed (if appropriate) | | |
| You will prevent interaction with anyone other than the patient you are visiting | | |
| You will go directly to place agreed and leave the premises immediately after the visit. The visit will last for a maximum of | | |
| Your animal will be on a lead and under control or in a pet carrier | | |
| If the animal becomes distressed, disruptive or causes a nuisance you will leave with the animal immediately. | | |
| If your pet urinates, defecates or vomits you must let the staff know and you will be responsible for cleaning it up. | | |

Appendix 2

Appendix 2: Service providers and useful contacts

I. Assistance Dogs

Accredited members of Assistance Dogs (UK) are:



Canine Partners



Dog A.I.D.



Dogs for Good

Guide Dogs



Hearing Dogs for Deaf People



Medical Detection Dogs



Support Dogs

The Seeing Dogs Alliance

Full details of all AD(UK) members available at:
www.assisteddogs.org.uk

II. Animal Assisted Intervention Dogs

Animal Assisted Activity

The key national organisations working in this field include:



Pets as Therapy
www.petsastherapy.org

Therapy Dogs Nationwide

<http://therapydogsnationwide.org>

This organisation does not currently preclude dogs fed on raw food and does not insist on routine vaccination. Organisations need to be aware of this if they accept volunteers and dogs from this organisation.

Animal Assisted Therapy

The key organisations working in this field include:



Dogs for Good
www.dogsforgood.org



Pets as Therapy
www.petsastherapy.org



Hearing Dogs for Deaf People
www.hearingdogs.org.uk

III. Other useful contacts:

Assistance Dogs International (ADI)
www.assisteddogsinternational.org

International Guide Dog Federation (IGDF)
www.igdf.org.uk

Animal Assisted Intervention International (AAII)
<https://aai-int.org>