


Name of Policy: <u>Animals in Health Care Facilities</u> Policy Number: 3364-109-GEN-105 Department: Infection Control University Health Services Hospital Administration Approving Officer: Chair, Infection Control Committee Chief Medical Officer Chief of Staff Responsible Agent: Infection Preventionist Scope: The University of Toledo Medical Center and its Medical Staff	 Effective Date: 12/01/2021 Initial Effective Date: 10/20/2003
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Major revision of existing policy	
<input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

Animal access to all University of Toledo Medical Center health care facilities will be restricted in accordance with local, state, and federal laws, CDC (Centers for Disease Control and Prevention) guidelines and the Joint Commission guidelines.

(B) Purpose of Policy

To provide a healthy environment for all patients, employees, students, and visitors, all animal activities in the University of Toledo Medical Center patient care areas will be restricted.

(C) Procedure

(1) Service Animals

A service animal, according to the Americans with Disabilities Act (ADA), means any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. While Emotional Support Animals or Comfort Animals are often used as part of a medical treatment plan as therapy animals, they are not considered service animals under the ADA.

(2) Per Hospital Administrative Policy #[3364-100-85-2](#) (Visitors Accompanied by an Assistance Animal), animals which provide direct human services will be permitted in all facilities in accordance with the Americans with Disabilities Act (1990) unless:

(a) The animal creates a direct threat to the health or safety others.

(b) The presence of the animal requires a fundamental alteration in services.

(c) A significant risk of harm exists due to the presence of the animal and no reasonable modifications or alterations in policies or procedures will mitigate this risk.

(3) Animal-Assisted Activities and Resident Animal Programs (Therapy Programs)

(a) Rights of all patients and staff will be recognized and steps taken to accommodate those who desire to avoid pets.

- (b) Only dogs are to be used for animal-assisted activities.
- (c) Only animals that are fully vaccinated for rabies and that are healthy, clean, well-groomed, and negative for enteric parasites or otherwise have completed recent anti-helminthic treatment under the regular care of a veterinarian will be allowed on site. The therapy program handler will provide proof of veterinary clearance for the animal, as well as certification, immunization records, and credentialing. These documents will be provided and are to remain with the department sponsoring the animal. These areas are responsible for maintaining their own paperwork for the therapy animal and the handler.
- (d) The handler of the therapy animal must also go through the same immunization and illness screening as required by hospital volunteers and provide proof of clearance to Volunteer Services before visiting the hospital. Animal assisted activities and therapy program handlers will be processed through Volunteer Services. An exception to this is the Behavioral Health Service areas (e.g., Kobacker) and the Dana Cancer Center.
- (e) The handler must be educated on the Hand Hygiene Policy. ([3364-109-GEN-102](#))
- (f) For Therapy Programs, only animals that are trained and are under the direction of persons who are experienced in this field will be permitted.
- (g) Animals must be controlled by persons trained in providing activities or therapies safely.
- (h) Animals must wear a form of identification while in the health system facilities. This may be in the form of a vest, collar, or badge.
- (i) Once the handler arrives on site, they are to advise Security of their presence by dialing 419-383-2600.
- (j) Prompt action must be taken when an incident of biting or scratching by an animal occurs during an animal-assisted activity or therapy which includes the following:
 - (i) If the individual is a patient or visitor, enter a patient safety report and report the incident to Risk Management and the Legal Department.
 - (ii) If the individual is an employee, complete the [EHRS injury report](#) and report the incident to Risk Management and the Legal Department.
 - (iii) Remove the animal permanently from these programs.
 - (iv) Report the incident promptly to appropriate authorities (e.g., infection prevention staff, animal program coordinator or local animal control personnel)
 - (v) Promptly clean and treat scratches, bites, or other breaks in the skin
- (k) Any injury that occurs to the therapy animal must be reported to Risk Management and the Legal Department.

- (l) All therapy animals will be restricted from the following areas:
 - (i) Intensive Care Units.
 - (ii) Operating Rooms and Procedure Areas.
 - (iii) Isolation rooms.
 - (iv) Rooms with solid organ transplant patients or protective isolation patients (see Infection Control Precautions policy [3364-109-ISO-404](#)).
 - (v) Rooms during times of procedures.
 - (vi) Clean and dirty utility rooms.
 - (vii) Medication rooms.
 - (viii) Food prep and storage area.
- (m) Precautions must be taken to mitigate allergic responses to animals.
 - (i) Minimize shedding of animal dander by assuring the animal is cleaned and groomed before visiting.
 - (ii) Use routine cleaning protocols for housekeeping surfaces after therapy sessions.
 - (iii) Staff must perform hand hygiene before and after interactions with the animal.

(3) Personal Patient Pet Visitation

Patients who wish to have their personal pet (limited to one pet) visit must adhere to the following guidelines:

- (a) In general, only dogs will be permitted to visit (no birds, primates, or reptiles will be permitted)
- (b) Visitations with a pet will only be considered for the following circumstances:
 - (i) When the patient is terminally ill
 - (ii) If a patient has been hospitalized for an extended period (greater than one month) and the healthcare team believes that the pet visitation will improve the patient's physical or mental health
- (c) Visiting pets must provide proof of current license and immunizations. A copy of this documentation must be placed into the patient's medical record.
- (d) Approval must be obtained from Infection Prevention, as well as the Unit Director, Chief Nursing Officer, and the patient's attending physician. The approval must be documented in the patient's medical record by the medical team.

- (e) Pets must be freshly bathed, leashed, and/or under the control of the handler bringing in the pet. A recent letter must be provided from a licensed veterinarian certifying good health and absence of disease for the pet in question.
- (f) Once the pet arrives on the site, the area is to notify Hospital Security of their presence by dialing 419-383-2600.
- (g) Any elimination from the animal must be managed by the handler and disposed of properly and in a timely manner.
- (h) A private visiting room will be made available, when possible. If private visitation is not possible, and there is another patient in the same hospital room, the roommate must give consent for the visit.
- (i) At no time will the pet be allowed to touch any other patient or staff without their permission.
- (j) Animals will not be allowed in other patient rooms, food preparation areas, or medication rooms.
- (k) The visit will be confined to the department where the patient is admitted and the animal may not remain in the hospital overnight.
- (l) The visit will be limited to 1 hour or less.

(4) Non-Research Animals as Patients in the Health-Care Facilities

If all veterinary facilities and interventional avenues have been exhausted, non-research animals (e.g., animals from zoo facilities) may be treated with the following restrictions:

- (a) No animal care will be provided in patient care areas where invasive procedures are performed.
- (b) Care must be always supervised by a licensed veterinarian.
- (c) If needed, only disposable medical and surgical instruments can be used.
- (d) A care plan for each use of human health care facilities on a non-research animal must be submitted in writing and approved by an appropriate member of the Infection Control Committee, Environmental Health and Radiation Safety, Division of Laboratory Animal Research (DLAR) and the planned treatment department (e.g., radiology for an MRI) and must include the following:
 - (i) Medical treatment requested.
 - (ii) Why no other options are available in the veterinary community.
 - (iii) Date services needed.
- (e) It is the responsibility of the appropriate department manager or designee to ensure that the following criteria are met:

- (i) Treatment or testing to be scheduled to occur as the last procedure of the day at a time when human patients are not expected in the area.
 - (ii) Clean and disinfect all environmental surfaces and equipment thoroughly in the room using hospital approved, EPA-registered products after removal of the animal.
 - (iii) Allow sufficient air exchanges per hour (ACH) to remove airborne dander, microorganisms, and allergens at an efficiency of 99.9%.
- (f) Approval will be given on a case-by-case basis only.

(5) Research Animals as Patients at the University of Toledo Medical Center

- (a) Access is limited to rodents and rabbits bred for research that are procured as pathogen-free animals.
 - (i) Animals are quarantined upon arrival to the research animal facility prior to entry into the hospital to detect any zoonotic pathogens.
- (b) Invasive Procedures
 - (i) No animal care will be provided in the following patient care areas:
 - a. Intensive Care Units.
 - b. Operating Rooms.
 - c. Isolation rooms.
 - d. Rooms with solid organ transplant patients or protective isolation patients (see Infection Control Precautions policy [3364-109-ISO-404](#)).
 - e. Patient care rooms during times of procedures.
 - (ii) If needed, only disposable medical and surgical instruments can be used.
 - (iii) A request form for the use of human health care facilities or a research animal must be submitted in writing to the Department of Infection Control and Prevention. This request will be reviewed by an appropriate member of the Infection Control Committee, Environmental Health and Radiation Safety, DLAR and the planned treatment department (ie: radiology for an MRI). Approval will be granted in writing by the Medical Director of Infection Control and Prevention.
- (c) It is the responsibility of the appropriate department manager or designee to ensure that the following criteria are met:
 - (i) Treatment or testing to be scheduled to occur as the last procedure of the day at a time when human patients are not expected in the area.
 - (ii) Clean and disinfect all environmental surfaces and equipment thoroughly in the room using hospital approved, EPA-registered products after removal of the animal.

(iii) Allow sufficient air exchanges per hour (ACH) remove airborne dander, microorganisms, and allergens at efficiency of 99.9%.

(d) Approval will be given on a case-by-case basis only.

(e) Use of equipment or facilities for research species not previously mentioned will be determined on a case-by-case basis.

References:

Americans with Disabilities Act: Service Animals and Emotional Support Animals. Retrieved 10/26/2021 from: <https://adata.org/guide/service-animals-and-emotional-support-animals>

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The Society for Healthcare Epidemiology of America (2015, Mar 2, p.1-22). Expert Guidance: Animals in Healthcare Facilities: Recommendations to Minimize Potential Risks. Retrieved on 10/28/21 from: <https://www.shea-online.org/index.php/practice-resources/41-current-guidelines/421-expert-guidance-animals-in-healthcare-facilities-recommendations-to-minimize-potential-risks>

<p>Approved by:</p> <p>/s/ _____ Date _____ Michael Ellis, MD Chair, Infection Control Committee</p> <p>/s/ _____ Date _____ Andrew Casabianca, MD Chief of Staff</p> <p>/s/ _____ Date _____ Michael Ellis, MD Chief Medical Officer</p> <p><i>Review/Revision Completed By: Infection Control Committee</i></p>	<p>Review/Revision Date:</p> <p>10/16/2006 12/21/2009 07/16/2014 09/17/2015 12/01/2015 11/16/2018 10/28/2021</p>
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