

RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER

Occupational Therapy and Recreation Therapy Department



RANCHO LOS AMIGOS
NATIONAL REHABILITATION CENTER

POLICY AND PROCEDURE

SUBJECT: ANIMAL-ASSISTED THERAPY (AAT)	Policy No.: Revised: Supersedes: Page:	307.3 April 2022 February 2019 1 of 5
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PURPOSE:

To provide Animal-Assisted Therapy in a safe and effective manner for individuals on a Recreation Therapy rehabilitation program-

POLICY:

The Animal-Assisted Therapy (ATT) is a treatment modality using interactions between a trained animal and a patient to promote positive and beneficial changes in the patient's social, physical and emotional well-being. Animal-Assisted Therapy (AAT) is also known as pet-assisted therapy or pet therapy. For the purposes of this policy, the primary animals to be used will be trained, healthy certified dogs of any breed and size and/or domesticated parrots /cockatoo that are deemed healthy, socially appropriate, and non-aggressive and cleared through an Avian Veterinarian.

PROCEDURE:

SCREENING AND CERTIFICATION OF ANIMAL(S) AND/OR HANDLER(S)

1. The handler(s) and animal(s) will initially visit a Recreational Therapist (RT) at Rancho Los Amigos National Rehabilitation Center (RLANRC) who will interview the handlers and observe how the handler and animal team interact with one another and how the animal responds to other staff members. Patients are not involved during this screening. Some handlers may wish to visit initially without their animal to orient themselves with the staff and facility. RLANRC will implement the use of a trained facility dog handled by a certified therapist/ handler in both facility and public settings.
2. The dog(s) must have:
 - a. Certification for good health; appropriate and current immunizations by a licensed veterinarian. Annual examinations by a veterinarian should include heartworm and other internal worms, external parasites (mites, fleas, and ticks), any communicable disease, pain, and an assessment of temperament and behavior.
 - b. Certification of training and proper behavior, temperament, and aptitude by a recognized AAT organization such as Pet Partners, the Delta Society or Canine Companions for independence.
3. The parrot(s)/cockatoo(s) must have:
 - a. Clearance from an Avian Veterinarian with a report indicating a thorough comprehensive exam of eyes, ears, nares, back, oral cavity, pectoral musculing, plumage and feet. The heart, lungs and air sacs will be assessed by auscultation. The veterinarian may suggest diagnostics test based on exam findings.
 - b. The parrot must be vetted in the same manner as therapy dogs according to the CDC guidelines and participation of supervised parrot / cockatoo interactions in therapy is at the discretion of the organization.
 - c. The parrot/cockatoo must be handled by a handler and/or a therapist with experience in avian care handling and have access to International Association of Animal Behavior Consultants (IAABC) when inquiries are needed.

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- d. Only parrots/cockatoos who display an even-tempered and passive disposition will be allowed to interact with participants. Any parrot with a history of biting and/or a display of aggressive behavior will not be permitted on grounds.
4. The handler(s) must have:
 - a. Certification from a recognized AAT organization indicating successful training and evaluation for AAT.
 - b. Volunteer status at RLANRC which includes completing the hospital orientation, taking a tuberculin skin test and taking identification-badge pictures (of both handler and dog).
5. The Recreation Therapy Supervisor will:
 - a. Maintain files on the animal's annual health records including examination and immunizations for dogs and clearance report for parrot/ cockatoo signed by a licensed veterinarian/avian veterinarian and certification from a recognized AAT organization.
 - b. Have copies of handler(s) certification from a recognized AAT organization, volunteer status, liability insurance coverage documents, and annual veterinarian visit.
(See department P&P 218 - Volunteer)
6. Participating handler(s) and animal(s) will be covered by RLANRC/County of Los Angeles insurance and by their organization's liability insurance coverage for both people and animals.

ANIMAL-ASSISTED THERAPY VISITATIONS

1. Protocol for Participating Dog(s)/Animal(s)
 - a. The handler will assure that the approved animal will be in good health and bathed and groomed within 24 hours of the scheduled visit. It will be thoroughly brushed to remove loose hair. Nails will be trimmed and filed smooth. Ears, eyes, and nose will be clean and free of any matter. The animal(s) will be free of external parasites and no flea collars will be worn within the hospital. The animal(s) will not be permitted in the hospital if it is ill, has diarrhea or vomiting, has open wounds or sores, and/or is in season.
 - b. The animal(s) will be able to eliminate prior to entry to the hospital and throughout the day as needed in designated areas. Handlers are responsible for disposing of feces in a plastic bag in outdoor trash containers as directed by staff.
 - c. The handler(s) will always be responsible for and attentive to the animal, considering the animal's needs and humane care. The animal will remain on a leash, harness or in a proper carrier always, except when confined to a room for interaction with a patient or group of patients.
 - d. The animal/handler team may use the hallways, stairs, or elevators. When entering an elevator already occupied by others, the handler should ask permission to use the elevator with them in order to avoid encounters with people who may be allergic or fearful of the animal.
 - e. Recreation Therapy will designate an appropriate non-patient location in the hospital for the animal to rest when it is not in designated AAT areas.

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SCHEDULING

1. Visitations will be scheduled during reasonable times and days of the week, preferably on a regular schedule but also as needed. Staff can request participation for their patients through Recreation Therapy. Participation will be based on factors such as specific patient needs, the intensity of patient activity level, staff involvement and facility activity.
2. All patient participants must have AAT indicated in the initial RT treatment plan that has been reviewed and signed by the treating physician. If AAT is not indicated in the initial RT treatment plan, the RT must obtain a written order from the treating physician.
3. The primary recreation therapist will be responsible for assessing the appropriateness of each patient while adhering to the guidelines set-forth prior to approving scheduled sessions.
4. Recreation Therapy will coordinate visitations with interdisciplinary staff requesting AAT in designated areas throughout the facility.
5. Recreation Therapy will provide training of the facility staff so that they are aware of the goals of the AAT program, which patients should not participate in AAT, responsibilities of the staff before, during and after an AAT visit, role of the handler and how to assist the animal/handler team.
6. Patients will be assessed for participation in an AAT session prior to attending an AAT group.
7. No visitations will be scheduled during meals or snacks, and the animal will be removed from the patient care area when food arrives. In addition, feeding the animal is not permitted in the hospital (exception: reward for animal's good behavior). The animal may be given fresh water or crushed ice in clean containers.

INTERACTIONS

1. The handler and staff will always be alert to patient and staff restrictions, attitudes and responses, and will exercise caution and good judgment in evaluating and addressing each situation. The handler will observe hospital rules of privacy and confidentiality.
2. The handler must wash hands thoroughly with soap and water or alcohol based hand washing gel (best hand washing agent and recommended by CDC over soap and water if not visibly soiled) whenever there is physical contact with the patient, using universal precautions in all situations.
3. AAT visit will be held in designated therapy areas.
4. Patients and staff will be instructed to wash their hands thoroughly with soap and water if hands are visibly dirty; otherwise use alcohol-based hand washing gel after contact with therapy animals.
5. The animals will be strongly discouraged from pawing patients and staff, or from any behavior with which an individual patient is not comfortable.
6. The RT staff accompanying the handler and animal in the patient areas will document patients' responses and other noteworthy occurrences related to the AAT session that is on RT treatment program.

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7. The animal will be immediately secured and/or removed when any of the following occur: improper behavior of the animal or patient; request by patient, staff, or visitor; allergic response; medical emergency; animal fatigue or irritation.
8. The handler is responsible for cleaning up after the animal if it defecates, urinates, or vomits on linoleum floor or on a patient. This includes CDC disinfection procedures and use of disposal gloves and leak resistant plastic bags as directed by nursing staff or environmental services that should be called for assistance. Environmental Services will be called if an incident occurs on carpeting or if additional assistance is needed.
9. Events or unusual occurrences which may result in injury or unsafe condition will be reported according to hospital policy.
10. Recreation therapists and handlers must take precautions to prevent animal bites.
11. All animal bites to people are legally reportable in Los Angeles County except for rodent and rabbit bites. All people with the knowledge from the bite must report the incident. Locally most reports come from animal control agencies, physicians and veterinarians, but anyone may report a bite. In the event of an animal bite to an employee/volunteer, Employee Health Services and the employee's or volunteer immediate supervisor should be notified immediately.
12. An event report should be documented through UHC Safety Intelligence. When documenting incident, staff should get basic information about the animal's owner and the animal if able so a thorough investigation can be implemented. In addition, an animal bite reporting form for medical organizations should be completed and sent by the manager/supervisor to the Veterinary Public Health-Rabies Control Program (**See attachment A**) and the online link below:
<https://admin.publichealth.lacounty.gov/phcommon/public/bite/biteaddform.cfm?ou=ph&unit=vet&prog=dcpl>
13. In the event of injury to an employee or volunteer, Administrative Policy and Procedure A123, Emergency Medical Care, will be followed.

CONTRAINDICATIONS/ INAPPROPRIATE CONDITIONS FOR AAT

1. Patients should not be asked, nor will they be allowed to participate in an AAT session under the following conditions:
 - a. Patients with allergies to animals. Patients will be screened for animal allergies prior to participation in AAT by asking patients or family members about known allergies and by reviewing records for known allergies.
 - b. Patients who have had a splenectomy or have immunosuppressive conditions disorders. Although the risk of disease transmission to humans is very low, animals may be a source of infection for these patients and they should not participate in AAT.
 - c. Patients known to be actively infected with Tuberculosis; Salmonella; Campylobacter; Shigella, group A Streptococcus; Staphylococcus Aureus; Viral Hepatitis; Ringworm; Giardia; Amebiasis; Methicillin-resistance Staphylococcus Aureus; or Vancomycin-resistant Escherichia coli. These patients may be a source of infection for animals.

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- d. Patients with phobias, fears, agitated behaviors, or hallucinations that relate to animals or who have a history of animal abuse will not be permitted to participate in AAT.
- e. Animals will not be permitted in isolation rooms/units, intensive care or post-operative recovery units, medication storage/preparation areas, clean/sterile supply storage, and food preparation areas.

ATTACHMENTS/FORMS:

RTD-OT_RT 307.3 Attachment A: Bite Form Vet

REFERENCE(S)/AUTHORITY:

Standards of Practice for Animal-Assisted Activities and Therapy (AAT-251). Delta Society.

Guidelines for Environmental Infection Control in Health-Care Facilities, U.S. Department of Health and Human Services Centers for Disease Control and Prevention (CCD), 2003.

RLANRC Occupational Therapy and Recreation Therapy Department Policies:

106, Confidentiality of Records

218, Volunteers

307.3, Animal-Assisted Therapy (AAT)

RLANRC Administrative Policies:

A123, Emergency Medical Care

A126, Patient Safety Plan Program

B704, Event Report 2018

RLANRC Infection Prevention and Control Policy:

IC101, Safety of Personnel (Hand Hygiene)