


TRUST POLICY FOR ANIMALS IN HOSPITAL

Reference Number POL-CL/2183/17	Version: 1.1		Status: Final	Author: Jayne Bateman-Hicks Job: Infection Prevention and Control Nurse Specialist
Version / Amendment History	Version	Date	Author	Reason
	1	2019	Jayne Bateman-Hicks	Update of policy. Development of UHDB policy
	1.1	2023	Jayne Bateman-Hicks	Policy Review
Intended Recipients: All Trust staff, including contracted services and volunteers				
Training and Dissemination: Dissemination will be via the Intranet.				
To be read in conjunction with: Trust policy for Infection Prevention and Control Trust Policy for Hand Hygiene Trust Cleaning Policy				
In consultation with and Date: Infection Control Operational Group. 19.04.2023 Infection Prevention and Control Committee. 27.04.2023				
EIRA stage One Completed No				
stage Two Completed No				
Approving Body and Date Approved			Infection Prevention and Control Committee (IPCC) 27.04.2023	
Date of Issue			June 2023	
Review Date and Frequency			January 2026 and every three years	
Contact for Review			Jayne Bateman-Hicks Infection Prevention & Control Nurse Specialist	
Executive Lead Signature			 Garry Marsh, Executive Chief Nurse	

Policy for Animals in Hospital

1. Introduction

Traditionally, the presence of animals in healthcare facilities has been discouraged based on Infection Control and Health and Safety issues. Although infections acquired from animals (zoonoses) are well described there is very little evidence to suggest the risk is significant in a controlled setting.

Evidence shows that patients benefit from contact with specially trained animals, the use of these animals has beneficial outcome to the patient's emotional, physical, and social well-being.

Pets as therapy visits must be coordinated through the Patient Experience Team.

Animals owned by members of staff that are not registered as part of a PAT scheme must not be bought onto hospital premises.

2. Animals on Hospital Premises

2.1 Purpose Trained Assistance Dogs (Guide dogs, hearing dogs etc.)

Assistance dogs are usually allowed on hospital premises with their owner, for short visits, for example outpatients or when the owner is visiting other in-patients, except for the restricted areas listed in section 5.

The Equality act 2010 includes a duty to make reasonable adjustments to ensure that disabled people can access services.

Reasonable adjustments may include:

- Providing a sighted guide and assistance around the premises
- Being aware that additional time, effort, and skills are sometimes needed when providing services to blind and partially sighted people.
- Reading out information that may change regularly.

2.1.1 Reasonable adjustments.

It is recommended to ask individual guide dog owners what assistance they would require to be able to use the medical centre or facility. The best place for a guide dog is with its owner, who will have both the skills and the relationship with their dog that ensures a high level of control. However, while they may still need their guide dog to accompany them to a health facility, there may be areas within the health facility which a guide dog may not be permitted due to infection prevention and control or health and safety issues. Management practices should be in place to provide sighted guide assistance if required to areas where the dog is not able to accompany the owner e.g., into treatment areas, in this instance a suitable location should be identified where the guide dog can be safely left. This should be a room away from general patients with a member of staff in or near the room to ensure the safety of the guide dog. This should be agreed in conjunction with the guide dog owner. Guide Dogs staff may be able to assist in identifying a suitable location.

If, on assessment by the clinical team, the assistance dogs is required to stay with their owner, the following are required:

- Single room occupancy for the patient
- Needs of the other patients are considered (allergies and frightened of dogs)
- The assistance dogs are not distracted or harassed the dog. Check with the owner before any contact is to be made.
- Never feed the dog. Guide dogs are working dogs and are fed a strict diet at regular times; any additional food may cause the dog to be sick or adversely affect its health and behaviour in other ways.
- If water is required for the dog, it must be provided in a single use container.
- All dogs are wearing their designated harnesses or lead slip, which makes them easily identifiable as a working dog.
- All staff must ensure good hand hygiene with soap and water prior and after contact with an assistance dog.
- Other patients should be deterred from approaching the dog as this is a working dog and not a pet.
- Assistance dogs are permitted in waiting areas such as x-ray and changing areas.

Assistance dog owners who visit hospitals or medical facilities with their guide dog should not be refused because they have their guide dog with them.

2.2 Ward Pets (caged birds, rodents etc.)

These types of animals are inappropriate in healthcare settings, owing to the potential risks associated with microbiological contamination from bedding etc.

2.3 Pets as Therapy (Animals)

All animals used by the pets as therapy (PAT) organisation will have a record detailing their vaccinations, visits to the vet and state of health. This helps to minimise the risk of the animals harbouring an infection which could be transmitted to patients.

Organised visits from agencies such as PAT dogs should be discussed with the patient experience team and if further advice is required through Infection prevention and control team in advance of any visit.

PAT animals are temperament assessed, fully wormed, and covered by a PAT insurance scheme. Any PAT animal visiting a clinical area must be always accompanied by its registered owner.

All visits must be pre-arranged. The nurse in charge / clinical lead of the area will determine whether it is appropriate for the animal to be allowed into the area and whether any additional conditions or restrictions are necessary.

When a PAT animal visits Trust premises the following procedures MUST be adhered to:

- All patients and staff who meet the PAT animal must undertake thorough hand washing with soap and water immediately after contact.
- Any PAT animal must be kept away from any patients and / or staff with known allergies or phobias to animals.

- Staff must identify whether there are immuno-suppressed or otherwise vulnerable patients who would potentially be put at risk from contact with the PAT animal. If such a risk is identified staff must take precautions to ensure the PAT animal is kept away from the patient.
- The PAT animal must be kept on a lead or otherwise suitably restrained and must not be allowed to wander freely around clinical areas or elsewhere on Trust premises.
- The PAT animal visit should be pre-arranged. A member of staff must remain in the room when there is a PAT animal in attendance in case patients become distressed or anxious. The PAT animal must be removed immediately if this occurs.
- Even well-trained PAT animals can suffer from stress and anxiety when put into an unfamiliar environment. Should a PAT animal show signs of stress or anxiety it should be removed from the environment and taken outside to calm down and relax.
- If patients who may meet the PAT animal have any wounds, areas of broken skin, or peripheral devices, staff must take the relevant precautions to ensure these have been covered with an appropriately selected dressing. Similarly, if a patient has an indwelling urethral catheter, a leg bag must be connected and placed under the patients clothing, ensuring the bag and tap are covered.
- The animal must be discouraged from licking patients/staff.
- If the PAT animal defecates or urinates during the visit, it must be removed immediately, and the area cleaned with detergent. It is the responsibility of the owner to bring in the waste bags. If in the clinical area this must be disposed of on the offensive waste stream.
- When assistance dogs and PAT animals are allowed onto hospital premises, the animals' owner and healthcare workers must ensure that the dog is not a nuisance to patients and that they do not interfere with patient care. If any patients object to the animals' presence, then arrangements must be made to ensure the animal is kept away from them.

2.4 Fish

Fish may be kept in reception areas; however, infection risks are posed by aquarium water, and therefore a standard operating procedure must be in place and agreed by the Trust Water Management Group. The fish tank must be cleaned and maintained as identified in the standard operating procedure. Hands must be washed after any activities involving the aquarium.

Any requests for new installation of aquariums must be raised with and agreed by the Trust Water Management Group.

2.5 Long Stay / Terminally Ill Patients Own Pets

There may be occasions when a long stay or terminally ill patient would benefit from a visit from their own pet. If appropriate, the visit should take place outside. If this is not possible, arrangements should be made to ensure the patient is either in the day room or in the side room located closest to the ward entrance to minimise the animals contact with other patients. All such visits should be agreed by the Nurse in Charge and the Infection Prevention and Control Team and consider the safety of other patients.

2.6 Animals Visiting for Charity / Organised Events

Animals can visit for charity events and organised events, such as reindeers at Christmas, providing the animals is organised through an official company, who can provide the required risk assessments. Such visits should be agreed by Infection Prevention and Control and Facilities Management.

2.7 Reptiles, Rodents, Amphibians and Arachnids

It is not recommended that reptiles, rodents, amphibians, or arachnids are bought onto hospital premises due to the interests of their welfare, infection risks and individual patient, staff, and visitor phobia.

Exception may be as part of an organised event. In this instance a risk assessment must be provided by the company providing the animal. The risk assessments must be agreed by Infection Prevention and Control and Facilities Management.

2.8 Restricted Areas

There are specific areas where an animal visit is not appropriate based on the risk of infection and / or immuno-suppressed patients, these are as follows:

- Anaesthetic / Theatre rooms
- Clinical Procedure Rooms – maybe allowed under special arrangements following risk assessment, agreed with infection prevention and control.
- High Dependency Units / Intensive Care unit (adult, neonatal and paediatric) - **maybe allowed under special arrangements on an individual patient basis. The decision to allow will be made by the Lead Consultant, Matron and Senior Sister.**
- CT Scanners, MRI Scanners, Fluoroscopy rooms, Interventional Radiology rooms and Ultrasound rooms used for interventional procedures.
- Renal Dialysis Unit - - **maybe allowed under special arrangements on an individual patient basis. The decision to allow will be made by the Lead Consultant, Matron and Senior Sister.**
- Combined Day Unit
- Source or protective isolation rooms
- Areas where patients are co-horted or if a ward is closed for infection prevention and control reasons.
- Areas where neutropenic or immune-suppressed patients are cared for.
- Any area used for cooking, preparing, or eating food.
- Catering and eating environments.

3. Purpose and Outcomes

The aim of this policy is to provide guidance on the suitability of animal visiting the clinical environment and the infection prevention and control measures necessary to maintain patient safety.

This policy should be reviewed whenever there is a need to adapt to the changing regulatory environment or in response to ongoing risk assessment to ensure a safe environment exists for all patients, visitors, and staff.

The guidance applies to staff and patients. It ensures that staff are fully aware of the content and the measures required for promoting access for the benefit of patients and reducing the risk of cross infection. ‘

'In the event of an infection outbreak, flu pandemic or major incident, UHDB Trust recognises that it may not be possible to adhere to all aspects of this document. In such circumstances, staff should take advice from their manager and all possible action must be taken to maintain ongoing patient and staff safety'.

4. Definitions Used

Pets as Therapy (PAT): Specifically trained and screened animals that make therapeutic visits to hospitals / health care environments.

Zoonotic Infection: Infections that are carried by even apparently healthy animals which can easily be transmitted to humans (*Ringworm, Salmonella, Toxoplasmosis*)

5. Monitoring compliance and effectiveness

Any incident or event involving a visiting animal should be reported using the Trust incident reporting system Datix and investigated accordingly.

6. References

Access to Medical Facilities: for guide dog owners and blind and partially sighted people

The Guide Dogs for the Blind Association (Guide Dogs). Website www.guidedogs.org.uk

Khan M.A and Farrag N. (2000) Animal assisted activity and infection control implications in a healthcare setting. *Journal of Hospital Infection* 46: 4-11

Lefebvre S.L Walltners-Toew.D Peregrine A.S Reid-Smith R Hodge. L Arroyo and Weese J.S. (2006) Prevalence of zoonotic agents in dogs visiting hospitalised people in Ontario: Implications for infection control. *Journal of Hospital Infection* 62: 458-466

Pets as Therapy Charity available at: <http://petsastherapy.org>