

Pets

1. Introduction

1.1. Purpose

This policy addresses the management of all animals brought as personal visiting pets, pet therapy animals, and residing pets to Providence Health Care (“PHC”) premises in a manner that balances the therapeutic effects of pet visits with the potential risks related to safety and infection control.

1.2. Scope

This policy applies to all requests for visiting and live-in pets in all PHC owned and operated facilities. This policy does not apply to the offices at 1190 Hornby Street.

2. Policy

While PHC recognizes the therapeutic value of pet visits for patients in acute care, due to concerns regarding hygiene and infection control and safety, [Personal Pet Visitation](#) in the acute care setting will emphasize restriction to [Compassionate Visits](#).

PHC recognizes that pets are a source of comfort, friendship and joy for many individuals who live in our long-term care homes. It is in keeping with the Mission of PHC and the Eden Philosophy that [Residing Pets](#) are welcomed in our long-term care homes.

Pets that are permitted to live in or visit our facilities are:

- Dogs
- Cats
- Fish
- Birds

Pets that are not permitted to live in or visit our facilities under any circumstances are:

- Rodents such as mice, hamsters, guinea pigs, and hedgehogs
- Reptiles and amphibians
- Wild, farm or stray animals

[Staff](#) are not permitted under any circumstances to bring pets onto the PHC premises at any time unless these are recognized [Service Animals](#) and have gone through the screening process.

Prior to entering a PHC facility, all pets coming into the facility as [Pet Therapy Animals](#) should be screened and registered with the Volunteer Resources Department. Pets coming in for other reasons should be screened through site administration or Program Directors/Patient Care Managers or designate.



2.1. Personal Pet Visitation and Pet Therapy: General Considerations

Family members bringing pets in for visitation must obtain prior approval from the health care team. Pets should be taken directly to the site of visitation and leave directly thereafter. Visiting personal pets must not interact with other patients, residents, visitors, or staff.

Staff must respect the concerns about pet visitations expressed by others, particularly patients or residents, and work collaboratively to assist in prompt and respectful resolution of concerns and disputes.

Anyone handling the pet **must perform hand hygiene** prior to and after contact with the pet.

Pets should be transported in a carrier whenever possible or on a leash that is <2m (6ft) in length and under the control of the handler at all times.

All visiting pets will be:

- well-behaved and under the control of their handler at all times;
- in good health (pets are not allowed to visit if ill, and in particular if the pet has diarrhea);
- clean and well groomed; and
- housetrained.

Visiting pets should have evidence of recent health examinations and immunizations when requested by any member of the health care team.

Any member of the health care team allowing animal visitation has the authority to remove animals from the units if they deem the animal to be a risk to any patient.

Visitation should not occur when a patient or resident is eating or undergoing a medical procedure.

Pets should be prevented from coming into contact with or licking open or dressed wounds, surgical incisions, burns, and sites of invasive medical devices (e.g., intravenous catheters).

2.2. Personal Pet Visitation: Acute Care Specific

Visitation of a pet should be determined as a benefit to the patient (patients' physical and mental health).

Visiting pets are not to be fed by patients or ward staff, including treats.

Any member of staff handling the pet must wear a gown. The gown must be removed and hand hygiene performed immediately after contact.



Visitation should occur in a private room whenever possible. Should the visit occur in a multi-bed room, permission of the patient's roommate(s) must be obtained prior to arrival of the pet.

Pets must be taken directly to the site of visitation and leave directly thereafter.

Visits should not occur when a patient is on Additional Precautions (e.g., Contact, Droplet, or Airborne) or in specific clinical areas (see 2.4 for list of units; except for special circumstances after consultation with the health care team).

2.3. Pet Therapy Animals

Participation in Pet Therapy programs must have prior written approval of the health care team and screened and registered with Volunteer Services. Pet therapy animals must have evidence of a recent health examination and immunizations from a veterinarian.

Visiting pets with volunteers must be certified by a recognized pet visiting program (e.g. Pets and Friends, St. John's Ambulance, or Pet Partners) and must remain in good standing with those organizations.

The pet therapy animal will be registered with the local Volunteer Resources Department ([Appendix A](#)) and be identified with an ID badge for owner and pet.

Pet therapy animals are prohibited from entering food preparation and serving areas and will be restricted from shared dining room space or patient/resident rooms while patients and residents are eating.

Visitation should not occur when a patient or resident undergoing a medical procedure.

Visits should not occur when a patient is on Additional Precautions (e.g., Contact, Droplet, or Airborne) or in specific clinical areas (see 2.4 for list of units; except for special circumstances after consultation with the health care team).

Staff members, visitors, patients, and residents will perform hand hygiene both prior to and after interacting with pet therapy animal activities. Handlers will perform hand hygiene per PHC policy.

Any member of staff handling the pet must wear a gown. The gown must be removed and hand hygiene performed immediately after contact.

When possible, place a barrier such as a sheet or towel placed between the animal and the patient or resident, either on top of the bedding, on a chair or on a lap and dispose linen into laundry hamper immediately after visit is complete.



Pets should be prevented from coming into contact with or licking open or dressed wounds, surgical incisions, burns, and sites of invasive medical devices (e.g., intravenous catheters).

The animal handler (Volunteer) will be responsible for cleaning up any potential spills or environmental contamination during a pet therapy visit.

2.4. Restrictions on Pets and Service Animals

Service animals are only permitted access to clinical areas when working.

Pets and service animals are **prohibited** in the following areas:

- Surgical suites;
- Areas in which food is prepared;
- Special care nurseries;
- Sterile supply and medication areas; and
- Patient and resident bathrooms.

Pets are not permitted into PHC facilities if they have been fed a raw food diet (e.g., raw meat, dehydrated animal products, pig ears) in the past 90 days. Exceptions may be made in consultation with IPAC for compassionate visits.

It is recognized that patients in the Critical Care areas including the Intensive Care Unit (ICU) and the Cardiac Intensive Care Unit (CICU) may benefit from a pet visit. Assessment of the benefit to the patient is made by nursing and if the visit is to proceed, nursing will ensure the location of the visit will support infection control standards.

Patients and residents should be excluded from interacting with pets if they are known to be infected or colonized with a microorganism requiring Additional Precautions or have a gastrointestinal pathogen (including but not limited to *C. difficile*, *Salmonella*, *Shigella*, *Campylobacter*, or *Giardia*). Exceptions may be made in special circumstances after consultation with the health care team/IPAC.

Visiting pets are not permitted on units closed for an outbreak.

Patients and residents who have known allergies to animals, fear of animals, open wounds or burns should be discouraged and protected from contact with animals.

2.5. Acquiring a Neighbourhood Pet in Long-Term Care

Neighborhoods are encouraged to have pets living among them. Consideration of the following is paramount:

- Ensuring that there is neighborhood support for a pet;
- Determining accountability for purchase of the pet and ongoing supplies needed for its care and transport;
- Identifying individuals with responsibility for caring for the pet – for example exercise, feeding, cleaning up, grooming;



- Determining the source of funding for food, medical care and other expenses; and
- Succession planning if the pet is no longer able to live in the neighborhood.

2.6. Clean Up

The animal owner/handler will be responsible for cleaning up after any potential spills or environmental contamination during a pet visit – whether personal or therapy visit

If the pet urinates, defecates or vomits while visiting, the owner will notify a staff member who will notify environmental services immediately to coordinate cleaning and disinfection of area.

Solid particles should be disposed into regular garbage receptacles.

Hand hygiene must be performed after cleaning up any spills or environmental contamination.

2.7. Miscellaneous

Injuries caused by a pet must be evaluated and treated rapidly by medical personnel or a First Aid Attendant. First Aid Attendants are available at St. Paul's, Mount Saint Joseph's, and Holy Family Hospitals.

Any incident involving pets (whether the animal caused the incident or was affected by the incident) must be documented in the Patient Safety and Learning System. If a patient or resident was impacted, the event must also be documented in the health record.

Education may be required for staff, roommates and visitors regarding their interactions with pets.

3. Responsibilities

Patient Care Managers and Site Leaders have the authority to set conditions in addition to those set out in this policy for visiting pets.

Patient Care Managers have the authority to amend this policy for Outpatient/Ambulatory Care clinics only, as long as such amendments are in accordance with existing infection control principles and practices.

4. Compliance

All staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. Staff members may warn others if they observe a violation of this policy. Failure by staff to comply with this policy may result in disciplinary action up to and including termination of employment, services or privileges.

5. Supporting Documents

5.1 Related Policies

- [Hand Hygiene](#)

6. Definitions

“Compassionate visits” are for those patients who have extended acute care stays or are nearing the end of life and who will not be discharged home.

“Personal pet visitation” occurs when the personal pet of a patient/resident is brought into a Providence Health Care facility to interact with that individual patient/resident.

“Pet Therapy Animals” are pets who are trained to provide affection and comfort for patients/residents and patients in Providence Health Care facilities.

“Residing Pets” are pets that live within a Providence Health Care facility.

“Service animal” is an animal such as a guide dog, signal dog or other animal individually trained to provide assistance to an individual with a disability.

“Staff” means all employees (including management and leadership), Medical Staff Members (including physicians, midwives, dentists and Nurse Practitioners), residents, fellows and trainees, health care professionals, students, volunteers, contractors and other service providers.

7. References

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8. Appendices

- [Appendix A: Volunteer Position Description - St. Paul's Hospital](#)

Appendix A: Volunteer Position Description - St. Paul's Hospital

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| Position Title: | <ul style="list-style-type: none"> Pet Therapy Volunteer |
| Objectives: | <ul style="list-style-type: none"> To provide support and companionship to patients and families through pet visiting and interaction |
| Supervisor(s): | <ul style="list-style-type: none"> SPH Coordinator Volunteer Resources Unit Staff |
| Time commitment: | <ul style="list-style-type: none"> 6 Months One 2 hour weekly shift |
| Skills required: | <ul style="list-style-type: none"> Able to assist patients who have physical and/or cognitive challenges Able to assist and interact with patients active in addictions Physically capable of assisting patients in wheelchairs and carrying out the physical duties of the position Able to communicate well in verbal and written English Friendly, self motivated and outgoing Reliable, punctual and able to work independently or in a team Able to follow detailed directions and procedures Respectful and understanding of illness and infection Strong boundaries Courteous, mature and non-judgmental Approved Pet Therapy screening by Pets & Friends www.petsandfriends.org or St. John Ambulance www.sja.ca or Pet Partners https://petpartners.org/ Must maintain active Pet Therapy Membership with 3rd Party Liability |
| Duties: | <ul style="list-style-type: none"> Your pet should be clean, odor free and well groomed. You and your pet must always wear your identification. You must keep your pet leashed at all times (retractable leashes are not recommended). Report to the nursing station at the unit assigned, and refer to any list you are given with the names of patients who may have requested a visit. Alternatively, ask each patient if they would like to visit with your pet. Approach patients with care and respect; ask if they are open to a visit before entering a room or presenting your pet to the person. Avoid any residents who are sleeping, not interested, or presently being looked after by hospital staff. Introduce yourself and your pet to each patient. Be in control of your pet at all times, and hold or position your pet so they can be easily touched. Use discretion before allowing your pet to lick a patient. Always ask before putting your pet on any chairs, beds or other furniture. Ensure the safety of your pet at all times, never leave your pet alone with a patient. Do not allow your pet to enter the hospital cafeteria |

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| | <ul style="list-style-type: none">• Do not allow your pet to eat food off the floor• Make sure animals are toileted prior to the volunteer visit.• You are responsible for all care of your pet whilst visiting i.e. feeding, exercising and hygiene, including clean-up of any “accidents”• Please let staff know about planned absences when possible• Feel free to visit other patient/units when requested (Please check with on duty Volunteer Coordinator and Clinical Nurse Leader CNL for approval)• DO NOT ENTER ANY PRECAUTION ROOMS INCLUDING YELLOW/CONTACT |
| Training: | <ul style="list-style-type: none">• General Volunteer Orientation: SPH Volunteer Resources and learning Hub Modules (Violence Prevention, Hand Hygiene and Privacy and Confidentiality (3hrs)• Assignment specific training with experienced volunteer (1 x 2-3hrs) |
| Benefits: | <ul style="list-style-type: none">• Gain valuable experience in a fast paced community healthcare environment• Make a difference in the lives of clients and families• Access to educational opportunities, references, scholarships and monthly draw prizes |
| ROUTE | <ul style="list-style-type: none">• Burrard Building – Mental Health Program 2 North, Mental Health 4 Northwest• Providence Tower – Cardiac 5A, Cardiac 5B, Medicine 7A, 7C, 7D, Urban Health 8A, Mental Health 8C, Mental Health 9A, Acute Care for the Elderly 9/CD, Medicine 10A/B/C, Palliative Care 10D |



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