





Public – To be published on the Trust external website

# Pets and Animals in Healthcare

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**Status: Approved** 

**Document type: Procedure** 

**Overarching policy: Infection Prevention Control** 



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### 1 Introduction

Traditionally animals in healthcare facilities have been prohibited due to the infection control/health and safety risk posed. Animals may carry microbes and parasites in their normal flora that pose no risk to them but can be transmitted to humans, leading to infectious diseases (zoonotic diseases) particularly in those vulnerable to infection (Di salvo et al, 2006). However, there is growing evidence and acceptance there is great value in animals/pets as therapy (Coakley and Mahoney, 2009, Moretti et al, 2010). It is with this in mind that this procedure will help to protect our patients and staff by balancing the risks posed from exposure to animals in healthcare with that of the benefits.

This procedure supports our Journey to Change as set out in the Infection Prevention and Control Policy.

# 2 Purpose

Following this procedure will help the Trust to protect patients from the risk of infection from animals. This procedure offers guidance for staff to ensure patient safety when in contact with animals for therapeutic purposes.

# 3 Who this procedure applies to

This procedure applies to all areas where animals/pets are being considered for therapeutic use with patients.

# 4 Related documents

This procedure describes what you need to do to implement the Pets and Animals in Healthcare section of the <u>Infection prevention and control policy</u>

The <u>standard precautions for infection prevention and control</u> defines the universal standards for IPC which you **must** read, understand and be trained in before carrying out the procedures described in this document.

This document also refers to:

- Hand Hygiene
- Decontamination of equipment
- Waste management





### 5 Pets and animals in healthcare

There are predominantly three main categories of pets and animals in healthcare.

### Patients own Pets (see 5.1)

Pets as Therapy (see 5.2) – commonly include the following:

- Dogs
- Cats

### Assistance animals (see 5.3) such as:

- Guide dogs
- Hearing dogs
- Assistance dogs
- Sniffer dogs

Staff **must** contact the Infection Prevention and Control Team (IPCT) and Health Safety/Security Department for advice before purchasing or allowing pets and animals in their department. Advice also to be sought from TEWV volunteers services who keep a record of approved registered pet organisations. If approved, the ward manager must ensure a general risk assessment is formulated prior to allowing the animal on the ward. This should include the following:

- The care and maintenance of the animal.
- Identify who is responsible for the animal.
- Contingency plan in the event of an untoward incident occurring; consideration must also be given in relation to safeguarding the animal where incidents of violence and aggression could take place.
- Allergy status of any patients/staff/visitors who may be exposed to the animal.
- Pets / Animals must not be allowed on the furniture or beds.
- Consider whether some patients/staff/visitors have a phobia of the animal prior to making any arrangements.

# 5.1 Visits from the patient's own pet

In special circumstances a personal pet may be permitted to visit if it is beneficial to the emotional and physical needs of the patient. Any patient safety issues of the individual, and other patients within the area, should be taken into consideration prior to permitting the visit.

### Do:

- ✓ Only allow the owner/patient to have contact with pet but the visit must be supervised
- ✓ Exercise and toilet the pet prior to entry to the ward / hospital grounds
- ✓ Promote hand hygiene before and after petting the animal
- ✓ Consider if the visit can take place away from other patients where possible

### Don't:

- \* Allow a visit if the animal is ill, especially if it has diarrhoea (must be 48 hours symptom free)
- \* Allow animals in kitchens, dining rooms, clinic rooms, and patient-sleeping areas.
- \* Allow the animal to wander freely around the ward or Trust premises.





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# 5.2 Pets as Therapy (PAT) and other therapeutic animal schemes

Various organisations can arrange to bring pets into hospital and other healthcare premises for the benefit of clients e.g., Pets as Therapy (PAT) scheme. All animals used by these schemes will have a record detailing their vaccination status, visits to the vet, and state of health. They are usually temperament assessed, and fully wormed. This helps to minimise the risk of the animal harbouring an infection which could be transmitted to patients.

Any volunteers **must** ensure that the pets used are registered with the appropriate scheme. Please liaise with volunteer services for guidance when choosing an appropriate pets therapy organisation. For all visiting animals, the following applies:

- ✓ Any staff or patient who is likely to handle the animal and have a wound, sore, or broken skin, they must keep this always covered.
- ✓ Hands must be washed prior to and after handling the animal.
- ✓ The animal must be up to date with relevant Vaccinations.
- ✓ You must keep the animal away from any clients and/or staff with phobias or allergies.
- ✓ The animal must always be supervised by its owner.
- ✓ The animal must be suitably restrained and not allowed to wander freely around the ward
  or Trust premises.
- ✓ The animal **must** be kept out of the kitchen, all food preparation areas and dining rooms.
- ✓ The animal must not interfere with patient care.
- ✓ If the animal urinates or defecates during the visit on the ward or on Trust premises, it is the responsibility of the owner to ensure it is cleaned appropriately. Clinical staff should ensure the cleaning undertaken is in line with Trust standards (Decontamination of equipment)
- **✗** Visits **must not** take place if the animal is unwell.
- Immunosuppressed patients are at an increased risk of infection and **must** not meet the animal.

### **5.3 Trained Assistance Animals**

Trained assistant animals such as a guide dog to assist someone who is blind or a dog that has been trained to find illegal substances are specially trained animals. They are taught specific skills, including how to behave in public places.

Where appropriate, the following applies:

- ✓ Assistance animals are permitted into the clinical environments for short visits such as outpatient appointments.
- ✓ For any patient requiring an admission: where possible, the animal must be accommodated during the inpatient stay. However, this will be assessed on a case-by-case basis. Staff must





ensure appropriate measures are taken to help support the patient during their inpatient stay, with consideration given to the potential negative impact the removal of their assistance animal will have on the individual if deemed not appropriate. This must be agreed in conjunction with the patient, and their care team. Advise to be sought from the IPC team.

\* An assistance animal is **not permitted onto Trust premises if it is unwell**. When visiting a ward, the animal handler must confirm the health status of the animal.

Please note: Some wards use sniffer dogs for planned or random searches of illegal substances on wards (if this is felt to be required). In conjunction with this policy please also refer to <a href="Managing Substance Misuse">Managing Substance Misuse on Trust premises procedure</a>.

### 5.4 Selecting an animal checklist

Selecting an animal Checklist	Yes (✓)	No (x)
Is the dog trained and capable of obeying commands?		
<ul> <li>Is the risk of accident or injury to patients or visits minimal if the animal is free roaming?</li> </ul>		
<ul> <li>Is the pet capable of confinement to designated areas of the healthcare environment?</li> </ul>		
Is the animal healthy?		
Can the pet be excluded from kitchens, dining rooms, clinical environments, and patient-sleeping areas at all times?		
<b>NB.</b> These questions <b>must</b> be answered with <b>Yes</b> $(\checkmark)$ for a Pet in Healthcare.		

### 5.5 Unsuitable Animals

Certain animals have an increased risk of infection and are unsuitable for health care environments. The following animals are not suitable as pets or for visits to Trust premises:

- Young animals e.g. kittens or puppies (**do not** introduce to patients before primary inoculations, worming and infestation treatments).
- Non 'house-trained' cats and dogs.
- \* A pet that is old, frail, stressed or unreliable is more prone to infectious illness.
- Longhaired cats (can be particularly susceptible to ringworm).
- \* Animals which hunt and eat wild prey.
- Sick caged birds.
- \* Stray or sick animals, exotic pets or reptiles, some tropical fish.





### 5.6 Birds

Birds may be kept on the ward but there is a small risk of Chlamydia infection. The cage must be cleaned out in the sluice/dirty utility at least twice a week, more frequently if required. Gloves and aprons must be worn while cleaning, and hands washed afterwards. A disposable face mask must be worn for cleaning a bird cage or removal of dried bird excreta.

- Consideration must be given to any patients/staff who disagree and may be distressed by keeping caged animals
- ✓ Birdcages **must** be of a design that prevents patients from being able to touch the bird, the bottom litter tray or water supply
- ✓ Birdcages must be positioned in a well-ventilated area of the ward and away from the main seating area for patients
- Caged birds must not be accommodated in patient's sleeping areas

### 5.7 Fish

Fish may be kept on the ward. However, <u>careful consideration needs to be given to the type of fish being stocked in the tank.</u> Some types of fish can be toxic if ingested.

Before purchase of any fish or equipment, please discuss with the IPC team as aquatic care is complex and requires fixed cleaning regimes. The tank must be cleaned in line with the manufacturer's instructions, and hands must be decontaminated afterwards.

All precautions must be undertaken to contain and minimise any contamination of the surrounding environments from dirty water. Plastic sheeting, specialist siphons and cleaning implements should also be confined to the area, bagged for cleaning before being taken to a separate area to clean – i.e., the sluice/dirty utility.

- ✓ Aquariums **must** be of a design that prevents patients touching the water
- ✓ Aquarium water changing and cleaning equipment must be kept separate from all other ward use items
- ✓ Aquarium fittings and plastic decorations must be cleaned at frequent intervals in the sluice area
- ✓ Aquarium water must be disposed of into sluice bedpan macerator or slop hopper
- ✓ Cleaning regimes **must** be well documented in order to provide assurance the cleaning regime is being undertaken.
- \* Aquarium water **must not** be disposed of in hand washing basins or kitchen sinks.

# 5.8 Feeding pets

- **Do not** feed pets in the kitchen, dining rooms or patient areas
- ✓ Pets **must** have their own feeding dishes and utensils, these **must not** be cleaned or stored in the kitchen (sluice area is acceptable)
- ✓ Only use recognised commercial brands of pet food
- Do not feed raw meat or fish, scraps, or meal leftovers to the pet
- ✓ Store pet food away from patient's food and not in the kitchen





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- ✓ Dried pet foods must be stored in covered vermin proof containers and separate from patient's food
- ✓ After feeding, pet food that has not been consumed after 20 minutes must be disposed of

# 5.9 Dealing with pet waste

- ✓ Must be disposed into clinical waste bag
- ✓ Litter trays must be fitted with disposable plastic liners
- ✓ Litter trays **must** be emptied daily (or more frequently if there is an odour problem)
- ✓ Litter trays **must** be washed out with hot water and detergent at least weekly, followed by disinfection with chlorine releasing agent
- ✓ Birdcages **must** have disposable litter sheets on the bottom, and ideally have a sliding tray mechanism for ease or removal of litter sheets
- ✓ Daily changing of birdcage disposable litter sheets **must** take place unless there is a need for more frequent changing dependent upon the size of the bird
- ✓ If pets vomit undigested food this **must** be handled with the same care as if it were excreta
- ✓ Aquarium water must have faecal matter and surplus food removed daily
- ✓ Staff must take care to not contaminate their skin or surrounding environment

# 5.10 Deceased animals

Make all arrangements with the veterinary practitioner who is responsible, and they will advise the correct course of action.

### 5.11 Wild animals

This refers to animals that live in the wild e.g., cats and pigeons

- ✓ Care must be exercised when dealing with a stray or wild animal, as they may have contracted disease from another wild animal
- Stray or wild animals must not be fed or attracted to TEWV premises as they could become a nuisance or risk to health

### 5.12 Farm visits

Visiting farms can be fun, therapeutic activity for patients but sensible precautions are recommended and include:





- ✓ You must wash and dry hands thoroughly after touching the animal(s)
- ✓ You must clean shoes when leaving the farm.
- You **must** thoroughly wash hands on arriving home
- You **must not** eat or drink whilst going round the farm
- You **must not** put your face against the animal(s)
- You **must not** put your hands in your mouth after touching the animal(s)
- You **must not** touch any animal droppings.

# 5.13 General principles

- ✓ All animal visits must be approved by prior arrangement with the ward manager, who will liaise with the infection prevention and control team, and health safety/security department. Advice may also be sought from TEWV volunteers services who keep a record of approved registered pet organisations (see appendix 1 for contact details).
- ✓ If approved, the ward manager **must** ensure a general risk assessment is formulated prior to allowing the animal on the ward.
- ✓ Staff and patients **must** thoroughly wash and dry their hands before and after handling pets staff must support and encourage patients to do this.
- ✓ Staff and patients **must** ensure any skin lesions/cuts/abrasions are covered with a dressing prior to handling pets staff must support patients to do this where appropriate.
- ✓ Other patients who may encounter the animal **must** be consulted about the animal visit to prevent anxiety for patients with phobias and allergies.
- \* Patients undergoing isolation precautions are **not suitable** candidates for pet visits as animals may act as a source of infection or carry pathogens from areas of source isolation.
- ✓ Bites and/or scratches **must** be reported via Datix. Should this unlikely event occur, the patient must be reviewed by a ward doctor as a matter of urgency, the staff member or member of the public must refer to the <u>accidental inoculation policy</u>.

# 6 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.

# **6.1 Training needs analysis**

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff	Online IPC training	Online training 1 hour	yearly





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# 7 How the implementation of this procedure will be monitored

Auditable Standard/Key Performance Indicators		Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	IPC quarterly report	IPC	IPCC

### 8 References

Coakley and Mahoney (2009) Creating a therapeutic and healing environment with a pet therapy program. *Complementary Therapies in Clinical Practice*. 15 (3) 141-146

Cumbria, Northumberland, Tyne and Wear (2021) Infection Prevention and Control Guidance note: Animals in Healthcare environment – V02 available from <u>guidance note</u> (Accessed 18/07/2022)

Di salvo et al (2006) Who let the dogs out? Infection control did: utility of dogs in health care settings and infection control aspects available from who let the dogs out? (Accessed 18/07/22)

Doncaster and Bassetlaw Teaching Hospitals (2019) Animals on Trust premises (including Pets as Therapy) available from <u>animals on Trust premises</u> (Accessed 18/07/22)

Moretti et al (2010) Pet therapy in elderly patients with mental illness available from Pet Therapy (Accessed 18/07/22)

Royal College of Nursing (2018) Working with Dogs in Health Care Settings: A protocol to support organisations considering working with dogs in healthcare settings and allied health environments. Published by RCN, London.

# 9 Document control (external)

To be recorded on the policy register by Policy Coordinator

Date of approval	25 July 2022
Next review date	25 July 2025
This document replaces	Pets and Animals in Healthcare Ref IPC-0001-013 v2.1
This document was approved by	IPCC





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This document was approved	25 July 2022
This document was ratified by	n/a
This document was ratified	n/a
An equality analysis was completed on this policy on	24 August 2022
Document type	Public
FOI Clause (Private documents only)	n/a

# Change record

Version	Date	Amendment details	Status
v2.2	25 July 2022	Full review with minor changes. Transferred to new template. Hyperlinks updated. OJTC text added.	Approved





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# **Appendix 1 - Useful Contact and Telephone Numbers**

Contact	Telephone Number / email
Infection prevention and control team	<u>0191 333 3584</u>
	email: tewv.ipc@nhs.net
TEWV Volunteer Service	Tel: 0191 333 6328 email: tewv.volunteer@nhs.net.
Health, Safety and Security	tewv.hss@nhs.net
People Asset Management (PAM) Occupational Health	<u>01254 311300</u>
Accident and Emergency	0191 333 2134
University Hospital of North Durham	0131 333 2134
Minor Injuries	01207 594 657
Shotley Bridge Hospital	<u> </u>
Accident & Emergency	01325 743 481
Darlington Memorial Hospital (DMH)	<u> </u>
Bishop Auckland General Hospital (BAGH)	<u>01388 455000</u>
Accident & Emergency	01642 282482
James Cook University Hospital (JCUH)	
Accident & Emergency	<u>01642 617 617</u>
North Tees and Hartlepool	
Accident & Emergency	<u>01904 631 313</u>
York Teaching Hospital	
Accident & Emergency	01723 368 111
Scarborough	
Infectious Diseases Physician	<u>01642 850850</u>
James Cook University Hospital	
Infection prevention and control team	tewv.ipc@nhs.net



# **Appendix 2 - Equality Analysis Screening Form**

### Please note: The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Infection Prevention and Control
Title	Pets and Animals in Healthcare Ref IPC-0001-013-v3
Туре	Procedure
Geographical area covered	Trustwide
Aims and objectives	To set standards in practice to ensure the delivery of patient care is carried out safely and effectively by the trust staff. To comply with the HCAI Code of Practice of the Health and Social Care Act 2008.
Start date of Equality Analysis Screening	19 July 2022
End date of Equality Analysis Screening	24 August 2022

Section 2	Impacts
Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	Trust Staff, patients and visitors
Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups?	<ul> <li>Race (including Gypsy and Traveller) NO</li> <li>Disability (includes physical, learning, mental health, sensory and medical disabilities) NO</li> </ul>
protected characteristic groups?	Sex (Men, women and gender neutral etc.) NO

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	Gender reassignment (Transgender and gender identity) NO
	Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO
	Age (includes, young people, older people – people of all ages) NO
	Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO
	Pregnancy and Maternity (includes pregnancy, women who are breastfeeding and women on maternity leave) NO
	Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO
	Veterans (includes serving armed forces personnel, reservists, veterans and their families) NO
Describe any negative impacts	Staff will always ensure appropriate measures are taken to help support the patient during their inpatient stay, with consideration given to the potential negative impact the removal of their assistance animal will have on the individual if deemed not appropriate. It is however acknowledged that if the assistance animal is not able to accompany the patient, this could have a potential negative impact on the patient.
Describe any positive impacts	there is growing evidence and acceptance there is great value in the patient experience using animals/pets as therapy.

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Yes – see References section
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes

If you answered Yes above, describe the engagement and involvement that has taken place	This procedure was taken for consultation to the Infection Prevention and Control Committee on 25/07/2022 and was agreed by the committee.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	Future engagement plans will include consultation with service users who access therapy pets.

Section 4	Training needs
As part of this equality analysis have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	No
Describe any training needs for patients	No
Describe any training needs for contractors or other outside agencies	No

Check the information you have provided and ensure additional evidence can be provided if asked



# Appendix 3 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
6.	Training		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	yes	

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	Title of document being reviewed:	Yes/No/ Not applicable	Comments
7.	Implementation and monitoring		
	Does the document identify how it will be implemented and monitored?	Yes	
8.	Equality analysis		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
10.	Publication		
	Has the document been reviewed for harm?	Yes	
	Does the document identify whether it is private or public?	Yes	
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	

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