

Administrative

Access for People with Disabilities – Use of Service Animals

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1.0 Policy Statement:

Women's College Hospital's (WCH) equity vision underscores the hospital's strategic commitment to healthcare as a human right, identifying and addressing gaps in health outcomes and healthcare access.

WCH is committed to providing inclusive and responsive goods, services and employment in a manner that respects the dignity and independence of all persons with disabilities to our staff, clients, families, volunteers, learners, community partners and all stakeholders.

Duty to Accommodate:

Through the **Women's Accessibility and EquiTY Committee for AODA Hospital compliance (WATCH)**, the hospital oversees the development of a formal process of identification, elimination, and prevention of barriers in the service, work and learning environment for staff, clients, families, volunteers, learners, community partners and all WCH stakeholders, in compliance with the Accessibility for Ontarians with Disabilities Act (AODA)

Pursuant to its duty to accommodate, WCH is committed to ensuring access to assistive devices, use of service animals as well as support persons to facilitate best quality of care standards.

2.0 Definitions:

Barrier:

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According to the AODA, a barrier means anything that prevents a person with a disability from fully participating in all aspects of society because of their disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy or practice.

Service Animals are not pets but animals trained to provide assistance to a person with disability. They are individually trained to assist people with disabilities in the activities of normal daily living, to enhance quality of life and mitigate their disabilities. They provide a variety of services, including but not limited to, guiding individuals with impaired vision; alerting individuals who are hearing impaired to intruders or sounds; providing companionship; pulling a wheelchair; alerting to seizures; opening/closing doors, or retrieving dropped items. A service animal is afforded access to all places the public is invited when accompanying their human partner.

An Animal is a “service animal” when it is readily apparent that an individual relies on the animal for that individual’s disability-related needs such as

- i. Alerting individuals who are deaf, deafened, or hard of hearing to sounds
- ii. Pulling a wheelchair
- iii. Alerting to seizures
- iv. Opening or closing doors
- v. Providing mental health support
- vi. Retrieving dropped items guiding individuals with impaired vision
- vii. The animal has documentation (e.g. ID card, jacket or harness) showing that it has been trained through an accredited service animal training school; OR
- viii. The individual provides a letter from an audiologist, speech-language pathologist, chiropractor, nurse, occupational therapist, optometrist, physician, physiotherapist, psychologist, psychotherapist, or Registered Mental Health Therapist, confirming that the individual requires the animal for reasons relating to that individual’s disability (Note: The letter need only explain that the animal is required because of a disability. The letter does not need to identify the disability, why the animal is needed, or how it is used).

NOTE: While most service animals are dogs, there are other types of service animals that assist persons with disabilities in their day-to-day activities.

An animal is a “therapy animal” when the animal

- a. is clearly identified/recognized as a registered therapy animal (e.g. jacket with markings);
- b. is accompanied by a volunteer from Volunteer Services with either a volunteer ID badge or jacket;
- c. has been screened, oriented and registered through Volunteer Services;
- d. has been screened from a recognized organization (e.g. Therapeutic Paws, St. Johns Ambulance) to provide psychological/emotional support to patients;
- e. is a cat or dog; and
- f. is over the age of one year.

All other animals, including pets belonging to employees, health care professionals, volunteers, researchers, interns, suppliers, contractors, and business partners, are not permitted on the

Hospital premises. Employee requests to foster a service animal in training are typically not encouraged. Queries should be directed to Human Resources and/or Occupational Health Wellness and Safety.

3.0 Procedure:

3.1 Procedure for Welcoming Service Animals and Guide Dogs:

All reasonable efforts will be made to welcome a patient with a service or therapy animal.

If, after having reviewed the definitions provided above, a staff member is unsure of whether an animal is a service animal, therapy animal, or patient pet, the staff member shall:

- a. refer to the patient's health record;
- b. respectfully ask the individual whom the animal is accompanying, the reason for the animal's presence in the Hospital and ask for supporting documentation:
 - "Can you please tell me why you are being accompanied by an animal today?"
 - For a service animal, "Do you have supporting documentation, such as an identification card from a training school or a letter from a health professional, showing you require a service animal for a disability?"
 - For a therapy animal, "Do you have a Volunteer

NOTE: Staff members should never ask individuals what type of disability the service animal is being used for or suggest that the individual does not "look like" they have a disability.

- There should be pre-planning and documentation with the owner and health care provider through the registration and pre-admission processes;
- The owner is responsible for pre-planning with their own support person if necessary;
- If the visit is to be made in a room with multiple patient occupants, staff must ensure that there are no circumstances that would adversely influence the well-being of other patients or staff. For example, allergies, cynophobia (fear of dogs), infections or some other unacceptable level of risk.
- All reasonable efforts will be made to accommodate the patient and service animal when no advanced notification has been received;
- For elective procedures which may require the patient be sedated and therefore unable to manage the service animal, their designated support person for the animal is notified to come and assume responsibility for the animal during the transition period.
- The service animal may be brought back to the patient or hospital to resume its duty as soon as possible, if:

- The attending physician is in agreement.
- There are no “infection control” reasons that would preclude the animal’s presence.
- A patient who knows they will be separated from their animal for the purpose of infection control or other purposes will be asked by staff to arrange their own support person if possible.
- Patients able to manage the animal will not be separated unless the owner gives consent or if there are Infection Control or safety issues.
- For patients who need help with their service animals due to unforeseen circumstances, who have no support person with them, the program manager, or delegate of the area will be as flexible as possible in problem solving.

Procedure for Therapy Animals:

Each therapy animal will be accompanied by one volunteer

The Pet Therapy Program (“PTP”) shall not:

- i. interfere with any treatment (e.g. diagnostics, Physiotherapy, nursing care etc.);
- ii. take place in areas where additional infection-control precautions (i.e. barrier protective measures, use of gloves, gowns, masks) must be maintained (e.g. OR, PACU, any Procedure Rooms or Recovery Rooms);
- iii. occur where any staff, patient or other person has an allergy to the therapy animal.

Therapy animals must be;

- iv. assessed, evaluated, registered and trained;
- v. over one year of age and have up-to-date immunizations;
- vi. have proper identification

3.2 Responsibilities

i) Owner

The service animal’s owner is responsible for its control and stewardship and must honour reasonable precautions taken in any public building, i.e. the animal’s behaviour, care, supervision and well-being;

- The owner is responsible for making available training school information and up to-date immunization records if requested.
- The owner is responsible for making the presence of a service animal known to WCH staff

ii) Area Manager or delegate

- Inform staff about the role of the service animal and how to interact appropriately with the patient and the animal;

- Inform, if necessary, other patients and staff of the service animal's presence and address any concerns (e.g. allergies);
- Discuss with owner and staff the responsibilities of the owner for feeding, handling and cleaning issues;
- If a health care provider is not able to provide care to a patient with a service animal, the health care provider is responsible to find an alternate professional who will provide that care and document this in the patient's health record.

iii) Staff and Physicians

- Are not to separate or attempt to separate a patient from their service animal without the owner's consent;
- Are not to touch a service animal or the person it assists, without permission;
- Are not to pet or make noise at a service animal as this may distract the animal from the task at hand;
- Are not to feed a service animal as it may have specific dietary requirements or may become ill from unusual food or food at an unexpected time;
- Are not to deliberately startle a service animal;
- Are not to provide care for the service animal while performing their professional health related responsibilities. This care includes, but is not limited to feeding, toileting, exercising and interacting.

3.3 Safety

- If any staff, visitor, or patient sustains an injury from a service animal, a safety report must be completed detailing the name of the injured, circumstances, and nature of injury. For staff, a report must be filed with Occupational Health, and for patients, incident reporting procedures must be followed, which includes:
 - documenting the incident in the Incident Reporting Service (IRIS).
 - All bites should be reported to Public Health (during business hours 8:30 a.m. – 4:30 p.m., Monday – Friday Toronto Public Health's Health Connection line at 416-338-7600; to report a public health emergency after hours and on statutory holidays: 416-392-2489)

3.4 Eviction or Exclusion

- Eviction or exclusion of a service animal can only occur for sound medical reason and/or reasons that are demonstrable, not speculative. Assumptions or speculation about how the animal is likely to behave based on past experience with other animals are not valid. If another person complains about the presence of a service animal (because of allergies, fear, or other reasons not related to the animal's demeanor or health), the person with objections to the animal should be separated and/or remove them-self from the area where the animal is located. Each situation is to be considered individually and in consultation with the owner. Discussion with Patient Safety and Patient Relations is recommended to support resolution in difficult situations
- A service animal may only be evicted, excluded, or separated from its owner if

- the animal's actual behavior poses a direct threat to the health or safety of others;
- if the animal's owner, who is responsible for its control and stewardship, is unable to control or maintain control of the animal;
- if contraindicated by the attending physician for sound medical and/or Infection Control reasons.

These circumstances and rationale must be documented in the patient's health record.

If a patient or staff must be separated from her or his service animal while in the health-care facility

- 1) identify from the patient or staff what arrangements have been made for supervision or care of the animal during this period of separation; and
- 2) make appropriate arrangements to address the patient's or staff's needs in the absence of the service animal.

4.0 References:

The Accessibility For Ontarians With Disabilities Act

<https://aoda.ca/guide-to-the-act/>

<https://www.ontario.ca/laws/statute/05a11>

Guidelines for Environmental Infection Control in Health-Care Facilities: Recommendations of CDC and the Healthcare Infection Control Practices Advisory Committee (HICPAC)

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm>

Credit to the Hospital Collaborative and Mount Sinai Hospital for sharing Policies, resources and information