

Kingston Health Sciences Centre

ADMINISTRATIVE POLICY MANUAL

Subject: Service Animals

Number: 01-215

Issued by: President and Chief Executive Officer

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Introduction

Kingston Health Sciences Centre provides integrated health care services which are sensitive, responsive and accessible to all populations. The hospital is committed to promoting, providing and maintaining an environment where respect and dignity is demonstrated at all times. The hospital supports the right of the individual to be accompanied by a service animal.

Clinical Note: Service animals are not pets but working animals. Staff will refrain from touching or petting the service animal.

The Accessibility for Ontarians with Disabilities Act was enacted in 2005 and the supplementary Ontario Regulation 191/11 Integrated Accessibility Standards came into effect July 1, 2016. This policy will support corporate compliance related to the legislation.

This policy assists in mitigating anticipated concerns regarding the presence of service animals, and aids in maintaining infection control principles.

Policy

1. The Hospital will adhere to regulations and standards as outlined in the Ontarians with Disabilities Act, 2001(ODA) and the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the Supplementary Ontario Regulation 191/11 Integrated Accessibility Standards.
2. Service animals are welcome to accompany inpatients or outpatients to the hospital.
 - 2.1 Elective surgical inpatients with a need for a service animal presence should identify the requirement through pre-surgical screening and registration.
 - 2.2 Conscious patients with a need for a service animal will not be separated from the service animal unless the owner gives consent, or there are infection control or safety issues.
 - 2.3 For unconscious patients with a service animal, Protection Services will take control and obtain appropriate care in the short term until family or alternate can assume care of the service animal.
3. The service animal requirements apply to visitors, staff, volunteers, physicians and learners.
4. The animal can be readily identified as one that is being used by the person for reasons relating to the person's disability, as a result of visual indicators such as the vest or harness worn by the animal; or the person provides documentation from one of the following regulated health professionals confirming that the person requires the animal for reasons relating to disability:
 - 4.1 A member of the College of Audiologists and Speech-Language Pathologists of Ontario.
 - 4.2 A member of the College of Chiropractors of Ontario.
 - 4.3 A member of the College of Nurses of Ontario.
 - 4.4 A member of the College of Occupational Therapists of Ontario.

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- 4.5 A member of the College of Optometrists of Ontario.
- 4.6 A member of the College of Physicians and Surgeons of Ontario.
- 4.7 A member of the College of Physiotherapists of Ontario.
- 4.8 A member of the College of Psychologists of Ontario.
- 4.9 A member of the College of Psychotherapists and Registered Mental Health Therapists of Ontario.
- 5. The owner/handler has the responsibility of ensuring the service animal is in good health, has the required vaccinations and ensures the animal care required is provided.
- 6. Exclusion of a service animal can only occur for reasons that are demonstrable, not speculative or where excluded by other legislation or bylaw.

Definitions

Service animals: an animal is a service animal for a person with a disability, a) if it is readily apparent that the animal is used by the person for reason relating to his or her disability; or b) if the person provides a letter from a legislatively approved health care provider confirming that the person requires the animal for reasons relating to the disability. Service animals are trained to provide assistance to persons with disabilities in activities of daily living to support independence, enhance quality of life, and mitigate their disabilities. They are not considered pets. Service animals 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; support for people with mental health disabilities and trauma.

Guide Dog: means an animal described in the *Blind Persons; Rights Act* which states the following: a dog trained as a guide for a blind person. The Attorney General or an officer of his or her Ministry designated by the Attorney General in writing may, upon application therefor, issue to a blind person an identification card identifying the blind person and his or her guide dog. For purposes of this policy the term service animal will be used.

Comfort Animal: A comfort animal is an animal that a person has to provide comfort and is not considered a service animal under the Act. When a staff member requests the allowance of a comfort animal the Disability Management, Return to Work and Accommodation Policy 12-760 will apply

Procedure

1. Welcoming Service Animals at Kingston Health Sciences Centre:
 - 1.1 Service animals may accompany people with disabilities in all areas of the hospital except where excluded by law or where there is a significant risk to a staff person or member of the public (e.g., identified risk of severe allergic reaction).
 - 1.2 Service animals are not permitted where sterile and like procedures occur in accordance with the Health Promotion and Protection Act.

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- 1.3 Staff will notify the person with a disability where the Service animal is not allowed and help to develop alternative arrangements.
- 1.4 If it becomes necessary to separate the Service animal from its owner staff will make all reasonable efforts to help facilitate the transfer of the animal to a designated person
- 1.5 Protection Services should be contacted whenever there is a concern regarding the safety and/or security of persons in the area.
- 1.6 Elective Patient Admissions
 - 1.6.1 There should be pre-planning and documentation with the owner and health care provider through pre-surgical screening and registration.
 - 1.6.2 The owner is responsible for pre-planning with a support person if necessary;
 - 1.6.3 All reasonable efforts will be made to accommodate the patient and service animal when no advance notification has been received;
 - 1.6.4 For elective admissions, KHSC will, if possible, assign the patient a private room. If not, a semi-private room will be assigned with the consent of the other patient(s). The service animal is to remain with the owner at all times. If the patient is 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 to the hospital to visit and to resume its duty as soon as possible.
- 1.7 Outpatient Procedures or Clinic Appointments
 - 1.7.1 All reasonable efforts will be made to welcome a patient with a service animal.
 - 1.7.2 Prior to a clinic visit (whenever possible), the person requiring the Service animal will be encouraged to discuss with staff his/her necessary support arrangements.
- 1.8 Emergency Patient Admissions
 - 1.8.1 Conscious patients able to manage the animal will not be separated unless the owner gives consent or if there are infection control or safety issues.
 - 1.8.2 For patients who need help with their service animals due to unforeseen circumstances, who have no support person with them:

The charge nurse or delegate will contact Protection Services who will take the animal. Protection Services may need to place the service animal in a cage in the interim.
 - 1.8.3 Protection Services will consult with the manager or delegate of the area to determine who will contact the next of kin or support person to come to the hospital and assume responsibility for the animal.

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2. Responsibilities

2.1 Owner

- 2.1.1 The service animal's owner is responsible for its control and stewardship i.e. the animal's behaviour, care, supervision and wellbeing.
- 2.1.2 The owner is responsible for making available training school and up to date immunization records if requested.
- 2.1.3 The service animal should be clearly identified/recognizable (e.g. identification card, harness or jacket with markings of the training school). If in doubt, consult with risk management. In the absence of identification of certification a medical authorization is required. Inform staff about the role of the service animal and how to interact appropriately with the patient and the animal.
- 2.1.4 Notify other patients of the service animal's presence and address any concerns (e.g. allergies);

2.2 Manager

- 2.2.1 Discuss with owner and staff the responsibilities for feeding, handling and cleaning issues;

2.2 Staff (including Physicians)

- 2.2.1 If a health care provider does not feel comfortable providing 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.
- 2.2.2 Obtain the consent of the owner before attempting to separate a patient from their service animal;
- 2.2.3 Obtain permission of the owner prior to touching a service animal as the animals are specially trained.
- 2.2.4 Refrain from petting a service animal or distracting from the service animal task at hand;
- 2.2.5 Refrain from providing food/treats to the service animal as only the owner or personal support person who have knowledge of the specific dietary requirements;
- 2.2.6 Refrain from deliberately startling a service animal;

Note: If hospital personnel volunteer to assist the patient to care for the service animal during their off duty hours, they do so at their own risk and liability. This excludes responsibilities that are delegated by their supervisor in emergency situations.

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2.3 Safety

2.3.1 If anyone sustains an injury from a service animal, a safe reporting event must be completed detailing the name of the injured, circumstances and nature of injury. For staff or volunteers, incidents/events must be reported to their supervisor/manager immediately. The event/ incident must be reported in the safe reporting system and follow up with Occupational Health and Safety if first aid or follow up is required. Occupational Health and Safety will assess the individual to determine need to provide prophylactic treatment and report to public health unit.

2.4 Infection Control

- 2.4.1 Any animal with diarrhea will be excluded from the hospital, until an etiology is established by a veterinarian. All service animals must have an up-to-date immunization record, especially for rabies.
- 2.4.2 Service animals will not be allowed in surgical suites or like areas.
- 2.4.3 The admittance of service animals to critical care areas will be evaluated on a case by case basis by the manager or delegate, infection control practitioner, attending physician and any other care team members.
- 2.4.4 Service animals will be allowed into patient rooms which are on additional precautions (contact, droplet, airborne), as the animal has been exposed prior to the hospital visit, and will be exposed after the hospital visit. The animal does NOT have to wear any PPE (personal protective equipment). Patients utilizing service animals must perform hand hygiene on leaving their rooms, or after providing care to their animal. The Four Moments for Hand Hygiene will be explained to the patient by their health care provider and documented.
- 2.4.5 Care can be provided only after hand hygiene practices are followed ensuring hands are cleaned before and after contact with the animal using alcohol hand sanitizer (if hands are not visibly soiled) or soap and water. This care includes, but is not limited to feeding, toileting, exercising and interacting. If the animal contaminates the area, the cleanup procedures should be performed by using appropriate PPE. Gloves are the minimum protection that should be used. The spill should be removed with paper towels, which should be placed in a plastic bag in the garbage, similar to the disposal of diapers. After removal of the organic debris, the area of the spill should be cleaned with a facility-approved disinfectant, allowing for proper contact time.

2.5 Eviction or Exclusion

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Eviction or exclusion of a service animal can only occur for 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 demeanour or health), the person with objections to the animal should be separated and/or removed from the area where the animal is located. Each situation is to be considered individually and in consultation with the owner. Discussion with your direct manager, Occupational Health and Safety and Risk Management is recommended 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 or 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.

3. If a patient must be separated from his or her service animal while in the health-care facility
 - 3.1 Discuss with the patient what arrangements have been made for supervision or care of the animal during this period of separation; and
 - 3.2 Make appropriate arrangements to address the patient's needs in the absence of the service animal.

References

<http://info2/policies/generalmanual/organization/l-d-65-73-Access-for-people-with-Disabilities.doc>

The Accessibility For Ontarians With Disabilities Act The Ontarians With Disabilities Directorate - Ontario Regulation 429/07

http://www.mcscs.gov.on.ca/mcscs/english/pillars/accessibilityOntario/what/AODA_2005.htm

Blind Persons Rights' Act - R.S.O. 1990, c. B.7, s. 1 (1).

http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90b07_e.htm

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/mmwrR/preview/mmwrhtml/rr5210a1.htm>

Related Documents

Disability Management, Return to Work and Accommodation Policy 12-760

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Authorizing Signature:

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President and Chief Executive Officer