



Purpose:	To provide Island Health staff, volunteers, students, and other persons acting on behalf of Island Health with guidance to support animal visitations while reducing the risk of transmission of bacteria, fungi or parasites.
Context:	<p>Island Health offers programs and services on the unceded and traditional territories of the Coast Salish, Nuu-chah-nulth, and Kwakwaka'wakw Peoples.</p> <p>As a signatory to the 2015 Declaration of Commitment to Cultural Safety and Cultural Humility, Island Health is committed to addressing the ongoing impacts of colonialism and Indigenous-specific racism in order to provide a culturally safe, inclusive, healthy and respectful environment.</p> <p>The organization is committed to strengthening diversity, equity and inclusion to enable excellence in health and care for everyone, everywhere, every time. Through these commitments, Island Health strives to deliver the highest possible standard of care and to promote safe workplaces.</p>
Scope:	<ul style="list-style-type: none"> ● Audience: <ul style="list-style-type: none"> ○ Staff, medical staff and volunteers of Island Health and its subsidiaries; ○ Physicians, dentists, mid-wives and other allied health professionals with an Island Health appointment and privileges or who contract with Island Health who provide care or services on behalf of Island Health; ○ Medical residents; and ○ Students, trainees and educators. ● Environment: <ul style="list-style-type: none"> ○ Island Health-wide. ○ All care settings across the continuum of care. ● Indications: Anytime there is a request for a visit of an animal visiting a care setting that complies with the Animal Visitation Policy. ● Exceptions: none
Outcomes:	Staff, volunteers, students and other persons acting on behalf of Island Health have the knowledge necessary to reduce the risk of transmission of infection to humans through parasites, fungi or bacteria during animal visitation and animal-assisted activities.

1.0 Requirements for Animal Visitation

- All animal visitation must be planned and executed following the Island Health [Animal Visitation Policy](#).

1.1 Therapy Animal Visitation

- Therapy animal visitation is coordinated through the Island Health Volunteer Resources and Engagement program.
- Therapy animal volunteer programs must be set up through the Volunteer Resources and Engagement department in conjunction with the unit manager before the visits commence.
- Therapy animal handlers must complete the Animal Screening Checklist (Appendix A) and comply with the requirements each time a therapy animal visits.

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Animal Visitation Guideline

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Guidelines are recommended actions allowing for professional judgement



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1.2 Personal Pet Visitation

- All personal pet visits must have manager approval prior to the visit.
- All pet owners must comply with the requirements in the Animal Screening Checklist (Appendix A).
- Unit manager or delegate must review the checklist when pet owner arrives.

1.3 Approval Process

- Manager/site director approval must be communicated to the Volunteer Resources and Engagement program before the visit can take place.
- Pet owners must complete the Visitation Approval Form (Appendix B) and have the manager sign prior to bringing a personal pet to the facility.

2.0 Definitions

- **Guide and Service Animals:** Animals that are certified and regulated under the [Guide Dog and Service Dog Act](#) of British Columbia They help people who require assistance to avoid hazards or to perform tasks.
- **Pet:** An animal kept for pleasure or companionship.
- **Therapy Animals:** Also referred to as Animal Therapy Teams. These are organized volunteer programs using screened and trained animals (dogs) and handlers who facilitate interactions between patients and animals to achieve specific physical, social, cognitive and emotional goals.

3.0 Related Island Health Policy Documents

- [Animal Visitation Policy](#)

4.0 References

- [Guide Dog and Service Dog Act](#)
- [Association for Professionals in Infection Control and Epidemiology](#)
- Provincial Infection Control Network of British Columbia. (2014). Infection Prevention and Control Guidelines for Providing Healthcare to Clients Living in the Community. Retrieved May 25, 2022 from: https://www.picnet.ca/wp-content/uploads/PICNet_Home_and_Community_Care_Guidelines_2014_.pdf
- SHEA. (2015) Infection Control Experts Outline Guidance for Animal Visitations in Hospitals. Retrieved May 25, 2022 from <https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/animals-in-healthcare-facilities-recommendations-to-minimize-potential-risks/7086725BAB2AAA4C1949DA5B90F06F3B>

5.0 Resources

- [Association for Professionals in Infection Control and Epidemiology](#)
- [Guide Dog and Service Dog Act](#)

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Appendix A: Animal Screen Checklist

For Animal Owners/Handlers

For the Safety of Residents/Patients and Staff, Please Ensure your Animal:

- Is free of ticks and fleas
- Has been bathed in the 24 hours prior to the visit*
- Does not have any new skin or ear problems such as itching or hair loss
- Is feeling well and does not have vomiting, diarrhea, sneezing, coughing or had discharge from the nose or eyes
- Is not receiving oral or injectable antibiotics or immunosuppressive medication
- Is fully vaccinated
- Has received a checkup from a veterinarian and deemed to be healthy in the last 12 months
- Has not been fed a raw food diet in the last 30 days

*Dogs with the Island Health Therapy Program who are making multiple visits require weekly bathing.

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Personal Pet Visitation Approval Form



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Patient/Client: _____

Unit/Room: _____

Animal type: _____ Animal handler: _____

Date(s) of visit: _____

- The patient/client scheduled for visitation is not on additional infection prevention and control precautions.
- The handler has completed the Personal Pet Visitation Checklist and confirms that the pet complies with all the requirements.
- The handler is aware of the most direct access to the unit.
- The handler is aware to go directly to the patient/client room and not go to other areas in the facility.

Comments: _____

Manager (or delegate)

Date

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