



# Animals in Medical Clinics

**IPAC Program Guidance** 

September 2022





A key principle of infection prevention and control (IPAC) is to limit the introduction of unnecessary sources of contamination, particularly in areas where patient care is provided. CPSA understands that there are situations where patients may benefit from animal interactions or where medical clinics may want to keep small animals in the clinic while patients are present. There may also be uncertainty amongst physicians and clinic staff around obligations in accommodating patients with qualified assistance animals.

#### Purpose

This guidance is intended to assist physicians and medical clinic staff in understanding obligations and mitigating risks related to animal interactions with patients and staff. The guidance describes how animal interactions can be safely facilitated in clinical settings.

For assistance or more information, contact the CPSA IPAC Program: <u>ipac@cpsa.ab.ca</u> or 780-969-5004.



# **Patients Bringing in Animals**

The clinic infection prevention and control (IPAC) lead and medical director are ultimately responsible for ensuring that applicable requirements (e.g., hand hygiene, environmental cleaning) are met when animals are brought into, or live in, the medical clinic. Staff should discuss whether animals are appropriate for their specific clinic setting. Patient population characteristics, including immune status, should be a consideration in these discussions. With the exception of patients accompanied by "qualified assistance animals" (described below), medical clinics are under no obligation to allow animals into their clinics.

Medical clinics may request to know in advance if a patient plans to bring in an animal and ask any questions necessary to assess the level of risk that an animal may present to physicians, clinic staff and other patients. If a patient brings an unqualified animal to an appointment and the clinic is unequipped to mitigate risks to staff and other patients, the clinic may offer an alternative care option such as virtual care or an in-person appointment at a later time. **Patients with qualified assistance animals must be seen–clinics cannot ask these patients to make alternate care arrangements simply because the clinic has a "no animals" policy.** 

CPSA supports clinic policies that require patients to provide attestation of current veterinary, immunization and service qualification documents for animals entering the clinic. We recommend a careful assessment of any animals brought into the clinic to determine how the animal may interact with staff and other patients. Clinics should ask about the animal's diet; there is a heightened risk of human infection from animals who are fed raw meat. Clinics may choose to prohibit unqualified animals who are fed such diets.

It should be the clinic's goal that patients and staff are clear on policies and expectations when an animal is present.

# **Keeping Animals in a Clinic**

It should never be assumed that patients and clinic staff are comfortable in the presence of animals. Patients will have varying attitudes toward and comfort with animals depending on personal history, mood and condition. We recommend displaying prominent signage to alert patients that an animal is present—patients should not be surprised to encounter an animal in the clinic. Clinic staff should determine a patient's comfort with the clinic's animal upon each new patient visit to the clinic.

Clinic staff should consider and honour any concerns (e.g., allergies, fears) raised by those who will be in close proximity to an animal. Clinics must be able isolate their animals when patient concerns arise.



Animals kept in a medical clinic must not be fed a raw meat diet. This presents a heightened and unnecessary risk of infection transmission to patients and clinic staff.

CPSA expects that policies and procedures detailing the animal's health and routine care are maintained and available at all times. Documentation should set out the following:

- Animal health and vaccination records,
- Expectations for staff hand hygiene,
- Schedules for cleaning and disinfecting areas and equipment accessed by animals,
- Areas and moments where animal access is restricted,
- Separation and storage of animal food and supplies,
- Schedules and assignments for animal feeding and waste management (e.g., outside walks, litter box maintenance), and
- Procedures undertaken when an animal becomes ill or behaves erratically including, but not limited to, isolation of the animal until veterinary care can be obtained and recording any incidents of bites or scratches.

If an animal bites or scratches a person in the clinic, staff must be quickly notified so appropriate staff may administer first-aid treatment and document the encounter. The IPAC lead and Medical Director should take any incidents of this nature seriously and critically analyze whether it is appropriate to continue keeping an animal in the clinic.

## **Qualified Assistance Animals & Emotional Support Animals**

Qualified assistance animals are specially trained and recognized by the *Service Dogs Act* (Alberta). This includes service dogs (e.g., mobility assistance, psychological support including PTSD, hearing assistance, diabetic support including low blood glucose alert), guide dogs (visual assistance), and assistance dogs from Assistance Dogs International (ADI) accredited schools.

Qualified assistance animals are essential to the health of patients. They may lawfully enter any public place (including medical clinics) and accompany their assigned patient during care.

Clinic staff may request to see an assistance animal's identification card from the handler/patient. Care must not be refused to a patient with a qualified assistance animal. **Medical clinics cannot ask patients with qualified assistance animals to make alternate care arrangements simply because the clinic has a "no animals" policy**. For example, care cannot be postponed for a patient with a qualified assistance animal and they cannot be forced to wait in an alternate location, such as an outside seating area.



Patients with allergies or discomfort around qualified assistance animals should be encouraged to make their concerns known to clinic staff. Clinics should work to make alternate arrangements for these patients in these instances.

Emotional support animals are not qualified assistance animals. They provide comfort to persons with psychological or developmental disabilities, but are not trained to do specific tasks. Patients with a clinical need for an emotional support animal typically obtain a letter from a qualified mental health professional or doctor; however, a professional letter does not turn a support animal into a qualified service animal. While there is no legal obligation to allow emotional support animals into public places (including medical clinics), clinical discretion may be applied in determining how an emotional support animal might safely accompany a patient, or if alternative care strategies can be explored.

#### **Restricted Areas**

Animals are expected to be restricted from the following areas of a medical clinic:

- Areas where medications are prepared and stored,
- Areas where sterile equipment or clean supplies are stored or used,
- Medical device reprocessing areas,
- Laboratory and diagnostic imaging areas, and
- Areas where soiled items are found (e.g., laundry rooms).

#### **Animal Health and Temperament**

Animals in medical clinics are to be in good health, well-groomed, free from diseases and parasites and evaluated by a licensed veterinarian on an appropriate schedule. Rabies immunizations and other vaccination documentation recommended by the animal's veterinarian are to be up-to-date and readily available. Animals must be removed immediately if they appear ill or distempered (e.g., open sores, discharge from eyes and ears, urinary or fecal incontinence, vomiting and diarrhea, coughing or sneezing).

Clinics are expected to ensure that animal temperament is appropriate for the desired or intended animal interaction. Animals should be on a leash or in an animal carrying case when entering or leaving the medical clinic. Animals should have a calm, quiet demeanor even in potentially chaotic situations (e.g., loud noises, sudden movements). Only house-trained and domesticated animals are permissible in medical clinics. Reptiles, amphibians, rodents, birds, farm animals, exotic animals and petting zoo livestock are considered inappropriate and present an unnecessary introduction of risk to the clinic setting.

## **Hygiene and Sanitation**

Hand hygiene must be performed by all clinic staff who have come in contact with animals and their belongings (e.g., pet carrier) or where clinic staff have assisted in



cleaning up a mess left by an animal (e.g., litter boxes, accidents, fish tank maintenance).

Clinic staff are responsible to ensure that a mess made by an animal, including excrement, is cleaned up immediately to the satisfaction of the clinic's IPAC lead. Clinic staff are encouraged to have the animal owner perform these cleaning steps, but are responsible to ensure that it is done in an effective manner.

Clinics should encourage patients to perform hand hygiene before and after contact with animals. This can be facilitated by ensuring that access to alcohol-based hand sanitizer is present throughout the clinic.

Any furniture used by animals (chairs, benches, etc.) should be cleaned and, where appropriate, disinfected immediately afterward and on a regular basis. Wherever possible, use impermeable and disposable barriers to cover furniture where animals sit/rest.

Medical equipment, devices, dressings or bandages are not to contact animals or be handled by animal owners.

With the exception of a qualified assistance animal, animals should not be present while a patient is undergoing a medical procedure. Clinic staff are best positioned to assess the appropriateness of an unqualified animal being present during routine medical assessments (e.g., check-ups).

#### **References & Resources**

- 1. Alberta Health Services. *Animal Interactions, Personal Pet Visitation, And Qualified Assistance Dogs Policy* (Draft dated March 30, 2022).
- Alberta Health Services. Infection Prevention and Control. Animals in Healthcare Facilities. 2020. Best Practice Recommendations. Available at: <u>https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-animals-hcf.pdf</u>
- Centers for Disease Control and Prevention. Infection Control. Guidelines for Environmental Infection Control in Health-Care Facilities. Animals in Health-Care. Available at: <a href="https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/">https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/</a>

animals.html



4. Government of Alberta. Service Dogs in Alberta webpage: <u>https://www.alberta.ca/service-dog-information.aspx</u>