

Animals in Healthcare

Note: If you have any questions or comments contact IPC at ipcsurvstdadmin@ahs.ca. Refer to version history page for updates.

Best practice recommendations

Purpose

- Support implementation of the provincial [AHS Animal Interactions, Personal Pet Visitation, and Qualified Assistance Dogs Policy](#) and resources, located here: (Insite > Animals Entering AHS Facilities).
- Provide an IPC resource that reduces the risk of zoonosis or animal-human disease transmission related to animals in healthcare.

Intended audience

This document is intended to help AHS representatives, including Infection Control Professionals, implement the AHS Animal Interactions, Personal Pet Visitation, and Qualified Assistance Dogs policy.

Refer to [Appendix A: Part 1 – IPC risk assessment action worksheet](#) and [Part 2 – Case scenarios/actions to address risk](#) and [FAQ](#) for more detail about breaking the chain of infection.

1. All visiting, therapy or resident animals in healthcare facilities are approved by site management or designate prior to the animal coming into the facility.
2. Animal visits may be restricted during infectious disease outbreaks. Contact your local infection control professional for direction as required.
3. Facilities are responsible for documenting and tracking animals, as per AHS policy.
4. Animal related hygiene practices must be followed to protect both animals and people the animals are in contact with.
 - 4.1 Perform hand hygiene as per AHS [policy](#) and [procedure](#).
 - a) perform hand hygiene before and after animal contact;
 - b) remind handlers to perform hand hygiene between rooms with alcohol-based hand rub (ABHR)
 - c) assist patients with hand hygiene, as needed;
 - d) wash hands with soap and water after cleaning up pet excrement, litter boxes, bird cages or aquariums.
 - 4.2 Where possible, place a disposable or washable waterproof barrier, e.g., a soaker pad or blue liner pad, between clothes/bedding and the animal to prevent direct contact with the surface.
 - a) Keep animals off furniture unless it is covered with a water-resistant fabric or a barrier.
 - b) Clean and disinfect surfaces the animals contact with [ready-to-use disinfectant wipes](#), e.g., chairs, benches, beds.
5. Animals are not permitted in the following high-risk areas:
 - 5.1 Clean areas such as:
 - a) kitchen, [food preparation](#), eating, and storage areas (Food Regulation (AR 31/2006) s.32). Exception, by law, qualified guide and service dog teams have the right to access any location where the public is allowed, e.g., eating areas;

- b) medication preparation areas;
- c) surgical areas (including recovery area);
- d) central sterile supply; and
- e) clean utility areas.

5.2 Contaminated areas such as:

- a) dishwashing;
- b) laundry;
- c) medical device reprocessing; and
- d) soiled equipment or material storage.

6. The site manager, supervisors or designate assesses visitation requests on a case-by-case basis, in consultation with the patient, family, healthcare team and IPC for animal interactions including, but not limited to:

- additional precautions/isolation rooms;
- during communicable disease outbreaks;
- maternity units (antepartum, intrapartum and post-partum). Refer to provincial policy Section 2.5;
- neonatal nurseries;
- immunosuppressed or neutropenic patients; and
- chronic/palliative patients.

Refer to [Appendix A: Part 2 - Case scenarios/actions to address risk](#) and [FAQ](#) for more detail.

6.1 Infection Control Professional considerations are as follow:

- a) If the visit can occur safely with infection control measures in place, i.e., performance of adequate hand hygiene, use of barriers, cleaning of the environment after the visit, etc.
- b) If the pet visit can take place as a one-to-one visit with the patient in a separate area, with no contact with other patients.
- c) If the visit is for compassionate reasons.
- d) Animals and handlers must not interfere with patient care and will not have contact with medical equipment, invasive devices, wounds, dressing or bandages.
- e) Visitation is scheduled with the patient to avoid eating times and medical procedures.
- f) There is an animal handler who can stay with the animal for the duration of the visit and maintain responsibility for animal care.
 - Educate/orientate handlers on how to access supplies; how to appropriately clean and disinfect soiled areas and notify staff that will be done.
 - The handler cleans up any mess, including excrement, generated by the animal immediately. Facilities may supply clean up materials as necessary, e.g., disinfectant wipes for the area after the initial cleanup has been completed.
- g) The animal is in good health and free of symptoms of disease as described in the Policy, clause 3.2.
- h) IPC expert sources such as APIC (Association for Professionals in Infection Control and Epidemiology) and American Veterinary Medical Association recommend that animals fed raw meat diets including poultry, dehydrated animal products or pigs' ears be excluded from visiting for 90 days.

- i) Animals with any of the following condition(s) are excluded from visiting for one week following the resolution of:
 - diarrhea regardless of cause, bacterial or parasitic;
 - vomiting;
 - sneezing,
 - coughing;
 - on antimicrobial or immunosuppressive therapy;
 - skin infections, both open and closed, ear infections, skin and soft tissue infections (SSTI). Suspend visitation until veterinary documentation is provided to show the treated animal is free of MRSA; and
 - fleas, ticks, external or internal parasites (including worms).
- j) Domestic animals are permitted in healthcare facilities (HCF), but the following are excluded:
 - reptiles and amphibians;
 - all rodents, including hamsters, gerbils, mice, rats and hedgehogs;
 - animals that have not been litter trained or when measures cannot be taken to prevent exposure to animal's excrement; and
 - farm animals, zoo animals, exotic mammals and petting zoo animals.
- k) The handler must obtain explicit permission from patient and roommate(s) before entering the room.
- l) Animals licking patients and "shaking paws" is not recommended as floors may be contaminated.
- m) If an animal bites or scratches refer to 3.10 in the policy and notify the manager, supervisor or designate immediately to get appropriate treatment.
- n) During outbreaks or ongoing microorganisms' transmission IPC may further restrict visitation.

Resident/facility animals or pets

- 7. Follow Section 7 in the AHS Animal Interactions, Personal Pet Visitation, and Qualified Assistance Dogs policy and refer to Environmental Public Health [webpage](#) for more details.
 - 7.1 Birds or fish are not recommended as resident/facility pets in acute care. If birds or fish are in the facility:
 - Bird cages must have a cleanable or wipeable plastic container under the cage to contain scattered birdseed, feathers, etc. Clean cages on a regular schedule based on animal requirements. Do not dispose of aquarium water in sinks used for hand hygiene, food preparation or drinking water.
 - Clean and disinfect sinks following disposal of aquarium water.
 - 7.2 Assign a dedicated person(s) responsible for the care of any resident or facility pet. Documentation is required and this individual is responsible for:
 - ongoing veterinary care arrangements.
 - feeding.
 - cleaning and sanitizing living space, bedding and toys following facility procedures, using facility approved products.
 - 7.3 Dedicate an area for storage of pet supplies away from the medication room, clean and sterile supply rooms, kitchens and resident areas.

7.4 Store bowls and litter boxes where residents cannot access.

- Use a 'walk-off tray' to contain scattered litter and excrement.
- Change litter routinely, e.g., daily.

7.5 Isolate any resident animal displaying signs of illness until a veterinarian examines them.

Animals trained to identify organisms such as *Clostridioides difficile*

8. Some animals may be specially trained to detect specific organisms in the environment such as *C. difficile*. Canine detection team considerations:

- Search occupied rooms only if accompanied by a staff member and with the permission of the patient.
- Do not search surgical suites, food preparation areas, neonatal units, psychiatric units, palliative care units, or offices outside of patient units.
- Do not search people.

Refer to Vancouver Coastal Health [Canines for Care](#) for more information.

Definitions

Terms	Meanings
Representatives	Means Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).
Farm animals	Means livestock like cattle, sheep, pigs, goats, llamas, and alpacas and includes backyard poultry such as chickens, ducks, geese, guinea fowl, and turkeys. Refer to CDC Health Pets/Healthy People for details.
Exotic animal	Means an animal that is not domesticated and has been introduced from outside of Canada. such as lions, tigers and elephants which may reside in a zoo. Refer to exotic animals examples and definitions
Personal or visiting animal	Means an animal or pet who visits the facility on an ad hoc basis or limited time frame to provide comfort to a person in a healthcare facility. Also called animal visitation
Pet	Means an animal for pleasure or companionship.
Petting zoo	Means a collection of farm animals or gentle exotic animals for patients to pet and feed. Refer to Petting Zoo definition and meaning .
Resident/facility animal	Means an animal or pet that lives in the healthcare facility on a permanent basis. Care of the resident/facility pet is the responsibility of an identified person (staff or volunteer) working at the healthcare facility
Pet Therapy/Animal-Assisted Therapy	Means the use of trained animals and handlers to achieve specific therapeutic goals. May also be referred to as animal assisted activities.
Service Animals	Means any animal that assists a person with disabilities with one or more daily activities. A service animal is not considered a pet. Rules regarding service animals in healthcare facilities are found in the Alberta Service Dog Act and Alberta Blind Person's Rights Act.
Domestic animal	Means an animal adapted to life in intimate association with and to the advantage of humans. An animal that is not wild and is kept as a pet.
Zoonosis	Means any infectious disease that can be transmitted from non-human animals, both wild and domestic, to humans. Also referred to as animal-human disease transmission

Version	Date (YYYY-MM-DD)
Created	2015-10-01
Updated	2020-11-25
Revised	2024-04-03

References

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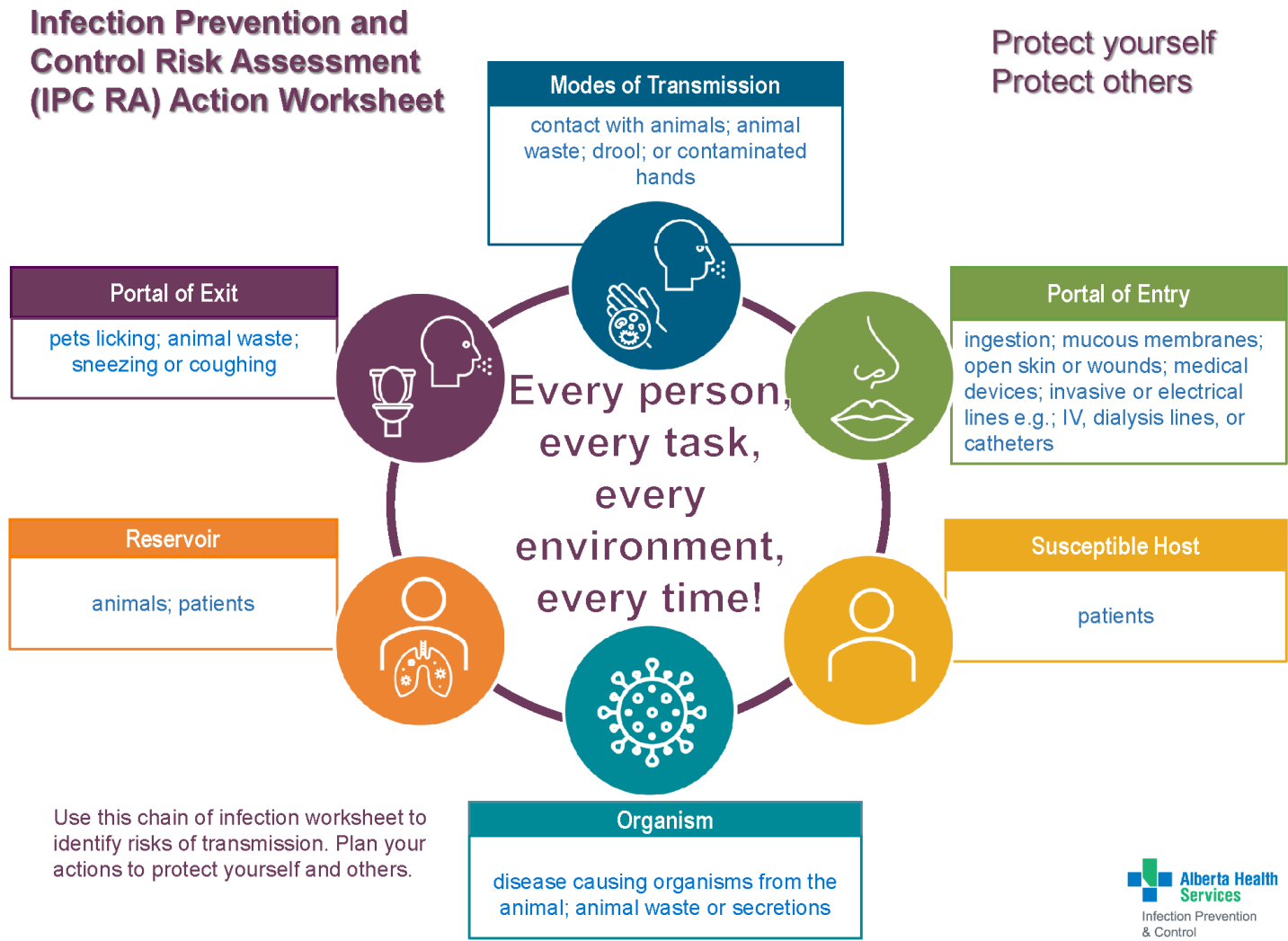
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Appendix A

Part 1 – IPC risk assessment action worksheet



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Part 2 - Case scenarios/actions to address risk

Overarching principle

The [policy](#) recognizes that animal interactions and qualified assistance dogs may benefit our patients and have a role in the health and wellness of our patients in alignment with our AHS values. IPC supports patient wellbeing and recognizes the importance of safe animal visitation in healthcare.

IPC consultations

Infection control professionals (ICPs) may be consulted on a case-by-case basis about animal visits in healthcare related to additional precautions, critical care areas such as ICU and NICU, resident animals, compassionate care requests, or other circumstances.

Actions to address IPC risk assessment and break chain of infection

ICPs refer to the relevant policy sections and this BPR to help determine if the visit can occur safely by implementation of IPC measures to mitigate risk. For example:

- Is the visit for compassionate reasons?
- Can the animal handler and the patient perform required hand hygiene?
- Is the visit pre-planned to avoid mealtime, scheduled treatments etc.?
- Is the visit planned in a dedicated private space with no contact with other patients?
- Can the animal be kept on a leash or in a cage to prevent contact with anyone other than the requesting patient?
- Is there an animal handler and necessary clean up supplies readily available to immediately clean up excrement?
- Can a barrier be used to protect the bed, clothing from direct contact? If not, can the area be cleaned and disinfected after the visit?

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Frequently asked questions

Questions	Responses
Are rabbits or horses allowed in healthcare?	Review policy sections about expectations for animals participating in animal assisted activities and animal assisted therapy. See also, IPC BPR recommendations about animals that are permitted and those that are excluded. Consult Environmental Public Health resources for questions about resident animals.
Insite articles	<ul style="list-style-type: none"> • Home > News > Inside Stories > Inside Stories 2020 > Horsing around for mental health • Home > Social > What's Your Balance? > Mental Wellness > Paws-itive Mental Health • Home > News > Insite Stories > "sometimes, it's pure magic" • Home > News > Insite Stories > Messi shakes a paw to bring smiles to cancer patients • Home > News > Inside Stories > Inside Stories 2021 > Horse therapy spurs connections, healing conversations • Home > News > Insite Stories > Inside Stories 2020 > A fond farewell to a furry friend • Home > News > Inside Stories > Inside Stories 2019 > Goose, goose... and six more on the way • Home > News > Inside Stories > Inside Stories 2019 > Fur babies bring joy to emergency • Home > News > Inside Stories > Inside Stories 2019 > Lending a helping paw • Home > News > Inside Stories > Inside Stories 2018 > Misha the therapy dog leaves precious memories at Royal Alex
Can pet therapy occur when the patient is on additional precautions or during a communicable disease outbreak?	Consideration: When IPC measures are in place to mitigate the risk of disease transmission, will the animal visit increase the risk of transmission for either the patient or the animal?
What outbreak measures should be in place for resident animals?	Refer to the relevant AHS policy sections. See an interesting news article about a facility that had four cats that they had to rehome because the person responsible for their care was no longer working at that facility.
Can snakes and iguanas visit patients in healthcare?	Yes, if IPC measures are adequate to support patient safety, e.g., visits in a children's hospital take place in a designated, private space where patients can visit their pets including snakes and other reptiles. The space the animal has contact with must be cleaned and disinfected after the visit. Hand hygiene must be performed, as required.
When service dogs are being assessed to see if they are eligible, is their diet reviewed to determine if their diet contains raw meat?	Yes, the Alberta service dog policy is in line with both the Alberta and Canadian Veterinary Medical Association in that we do not recommend feeding raw food to any dog seeking qualification as a guide or service dog. For owner-trained dogs, we approach this from the point of view of ongoing education to make people aware of the risks associated with feeding raw meat diets. They intend to incorporate the BPR Animals in Healthcare Facilities recommendation against feeding raw meat for 90 days into their materials so that handlers are aware of the restriction.
Are certified/approved therapy animals allowed to have raw meat in their diets and visit AHS facilities?	No. Therapy animals certified by organizations such as St. John Ambulance are not allowed raw meat in their diets and the Northern Alberta Pet Society does not restrict raw diets, but members are aware that AHS facilities do not allow them, and they restrict animals on raw diets from visiting AHS facilities.

BPR version history

Document number/name	if-hp-ipc-animals-hcf	
Version	Revision date	Revision Description/Comment
V3	2023-10	Major changes to this BPR include: Updated to align with and support implementation of new AHS policy: Animal Interactions, Personal Pet Visitation, and Qualified Assistance Dogs (expected release date January 2024) The policy requires Infection Prevention and Control consultation on a case-by-case basis in several situations including: <ul style="list-style-type: none">• Patients on Additional Precautions,• Requests for visitation with animals that are not domesticated,• Requests for visitation with animals in restricted areas, e.g., laboratory collection area. Appendix A: Case scenarios added to assist IPC professionals when they are consulted on case-by-case basis. Added Appendix A – Part 1, IPC risk assessment action worksheet. Appendix A – Part 2 is Case scenarios/action items.
V4	2024-02	No update to content. Minor formatting updates. Sent to WebComm to post. The animal interaction policy was released, and we've now linked to it in the BPR Feb 20, 2024 (email).



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