



## MONTANA STATE HOSPITAL POLICY AND PROCEDURE

### ANIMAL ASSISTED THERAPY POLICY

**Effective Date:** November 24, 2015

**Policy #:** TX-33

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- I. PURPOSE:** To provide guidelines for the implementation of animal assisted therapy as a part of treatment and rehabilitation programs provided by the Hospital.
- II. POLICY:** Montana State Hospital (MSH) is aware of the therapeutic benefits to the implementation of Animal Assisted Therapy. Treatment and Rehabilitation Programs will follow the guidelines outlined to ensure current animal assisted therapy training and registration standards are upheld.

This policy does not address service animals used to promote greater independence for people with disabilities (e.g., leader dog for person who is blind). Specific procedures will be developed to address situations where an individual needing a service animal is admitted to MSH.

### **III. DEFINITIONS:**

- A. Animal Assisted Therapy (AAT): Goal directed treatment implemented by a professional who has received specialized training and is currently registered as an AAT pet handler. AAT is designed to improve functioning in the cognitive, social, emotional and physical domains of being.
- B. AAT Animals: For the purpose of this policy are dogs, cats, guinea pigs, horses, donkeys, and birds registered as AAT animals through Pet Partners.

### **IV. RESPONSIBILITIES:**

- A. Rehabilitation Program Manager: To schedule and ensure AAT handler and pet has completed appropriate training and are currently registered.
- B. Treatment Teams: To determine a therapeutic need for implementing Animal Assisted Therapy for a client(s). Work with Rehabilitation Program Manager on scheduling AAT handler and pet. Write individualized goal and objectives to be added to the individual treatment plan. Complete documentation on effects of AAT interventions.

**V. PROCEDURE:**

- A. Upon determination by treatment team of the need for AAT, the Rehabilitation Program Manager will schedule an AAT registered pet handler to visit campus.
- B. AAT will take place outdoors whenever possible. When it is important that the visit take place indoors, the designated locations where visits may occur are: 1) the alcove near the front door of the main building; 2) the visiting room off of D wing; 3) the fenced unit courtyards; 4) room P119 and P150 at the Recovery Center, and 5) any room in the Therapeutic Learning Center where food is not prepared or served.

This is intended to minimize exposure of other clients or staff that may be allergic to animals. AAT may not take place in locations where food is prepared or served including the Rotunda in the Main Hospital Building.

- C. Treatment Team must inform front desk personnel of the arrangements of Animal Assisted Therapy.
- D. AAT handlers and animals must show proof of successful completion of AAT training and show current proof of registration. A copy of current registration will be kept on file with the Rehabilitation Program Manager.
  - 1. AAT training and registration includes:
    - a. Completion of approved AAT Training Course by Handler
    - b. Completion of Pet Health Screening
    - c. Completion of a AAT Skill and Aptitude Test
    - d. Completion and maintenance of AAT registration
- E. AAT pets will remain under the immediate control of the AAT handler during the visit. AAT pets are not permitted to run loose on the Hospital campus at any time. The Hospital reserves the right to discontinue AAT sessions at any time.
- F. Indications of allergic reactions in clients or staff must be reported to the Hospital's infection preventionist.
- G. AAT pet handlers and hospital staff will respect the wishes of clients and/or staff who prefer not to come into contact with the animals or who may be fearful of the animals.

**VI. REFERENCES:** Pet Partners ([www.petpartners.com](http://www.petpartners.com)).

**VII. COLLABORATED WITH:** Director of Clinical Services and Rehabilitation Program Manager.

**VIII. RESCISSIONS:** #TX-33, Animal Assisted Therapy dated March 15, 2010; #TX-33.

- IX. **DISTRIBUTION:** All hospital policy manuals
  
- X. **ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.
  
- XI. **FOLLOW-UP RESPONSIBILITY:** Hospital Administrator
  
- XII. **ATTACHMENTS:** None

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John W. Glueckert                      Date  
Hospital Administrator

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Thomas Gray, M.D.                      Date  
Medical Director