

# Infection Prevention & Control Guideline Animals in Healthcare Premises

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# Animals in Healthcare Premises

## Version Control Sheet

Version	Section/Para/Appendix	Version/Description of Amendments	Date	Author/Amended by
1		New document	April 2011	Cheryl Day
2	Appendix A	New ED assessment	September 2013	Lynne Roberts
3	Whole document	Changed Infection Prevention and Control Team to Infection Prevention Team	July 2015	Lynne Roberts
	Whole document	Changed Footers	July 2015	Lynne Roberts
	Section 12	Added new references	July 2015	Lynne Roberts
3.1		Minor Amendment to front sheet	Feb 2018	Corporate Assurance Team
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# Guideline on Animals in Healthcare Premises

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## **Animals in Healthcare Premises Guideline Statement**

<b>Background</b>	The purpose of this guidance is to advise on the precautions and control measures that are recommended in relation to pets in healthcare premises, thus minimising the risk of healthcare associated infections to patients, visitors and staff in health care settings.
<b>Statement</b>	This guidance is comprehensive, formally approved, ratified and disseminated through appropriate channels. It will be implemented for all staff within Lincolnshire Community Health Services NHS Trust.
<b>Responsibilities</b>	Compliance with this guidance will be the responsibility of all Lincolnshire Community Health Services NHS Trust staff and invited contractors.
<b>Training</b>	The Infection Prevention Team will support/ facilitate any training associated with this guidance.
<b>Dissemination</b>	Via Lincolnshire Community Health Services NHS Trust Website.
<b>Resource implication</b>	This guidance has been developed in line with the NHS Litigation Authority and Department of Health guidelines to provide a framework for staff within the organisation to ensure appropriate production, management and review of organisation-wide policies.

## **Guideline on Animals in Healthcare Premises**

### **1. Clinical need for the guideline**

Disease and infection can be acquired from a variety of animals and this has been extensively documented. This guideline is necessary as, although acknowledged that animals can have a therapeutic affect on the well being of clients, animals can also provide an unacceptable hazard to some groups of clients.

### **2. Purpose and Aim of this Guideline**

The purpose of this document is to provide best practice guidance in relation to infection prevention and control pertaining to animals in community and primary care settings.

The aim of this guideline is to offer best practice advice to Lincolnshire Community Health Services NHS Trust (LCHS NHS Trust) service providers to ensure that when animals are permitted onto healthcare premises this is done with minimal risk to clients, visitors and staff.

### **3. Scope of this Guideline**

The principles contained within the guideline reflects best practices and apply to those members of staff who are directly employed by the Trust and for whom the Trust has legal responsibility. This guideline provides advice on minimising the risk of infection associated with animals in a primary health care environment. This is to safeguard clients, staff and visitors to the Trust.

This guideline is applicable to all the Trust clinical care areas.

### **4. Key Responsibilities**

#### **4.1 General**

The following procedure for the management of animals in healthcare premises is the responsibility of **ALL** staff and must be followed at all times. Permission for an animal to enter the Trust premises must be obtained from the service manager/lead.

A written record of patient contact with the animal must be retained by the departmental staff as a matter of reference/contact tracing.

If the animal is admitted to the Trust premises to undertake a policing, security or search and rescue activity, then the Health and Safety Officer and the Trust Security Officer must be consulted.

#### **4.2 The Infection Prevention Team**

The Infection Prevention Team will:

- Review the guidance in response to the publication of any urgent communications from the Department of Health and on a bi-annual basis.
- Assist managers with the audit of compliance with the guidance as part of the Infection Control audit programme.

#### **4.3 Managers**

Managers have the responsibility for the standards of clinical practice by their staff in the health care setting. They must:

- Ensure all individuals are appropriately trained.
- Inform new employees of their responsibilities under this guidance.
- Ensure that all employees within their area of responsibility comply with this guidance.
- Audit compliance to this guideline as necessary.

#### 4.4 Employees

All employees have a responsibility to abide by this guidance and any decisions arising from the implementation of it. Any decision to vary from this guidance must be fully documented with the associated rationale stated.

#### 4.5 Education and Workforce Team

The Education and Workforce Team has a responsibility to ensure the coordination of the learning and development of staff, as identified within the local training matrix. In relation to this guidance they will if required, in conjunction with the Infection Prevention and Control Team, facilitate education sessions to staff groups.

### 5. Training

#### 5.1 Training Provided

The Infection Prevention Team, in conjunction with the Education and Workforce Team will provide any education associated with this guidance as deemed necessary by the organisation

### 6. Audit and monitoring

Audits may occasionally be required in relation to this document. Any audits will be undertaken by the manager/infection prevention and control team and any action plans arising from the audits will be monitored via the Infection Prevention & Control Committee.

Minimum requirement to be monitored	Process for monitoring e.g. audit	Responsible individuals/ group/ committee	Frequency of monitoring/ audit	Responsible individuals/ group/ committee (multidisciplinary) for review of results	Responsible individuals/ group/ committee for development of action plan	Responsible individuals/ group/ committee for monitoring of action plan
Compliance	Audit	Managers/ Link champions/ IP Team	Bi-annual	Infection Prevention and Control Committee	Infection Prevention and Control Committee	Infection prevention and Control Committee

### 7. Animals permitted onto healthcare premises

Animals will **not** be permitted onto Trust premises with the exception of:

- guide dogs (for the visually impaired)
- hearing dogs (for the auditory impaired)
- security/search & rescue dogs
- pets used for therapy/pets where owner is “end of life” (with prior agreement)

### 8. Visiting Animals

Assistance dogs (e.g. guide dogs, hearing dogs for the auditory impaired) and pets used for “therapy” are allowed access to the clinical area when they are working. Requests for access for animals into Trust buildings will be refused unless they fit the above categories or the animal is an essential part of patient therapy.

The animals used are usually dogs and the following guidance will apply.

The animal:

- Must be fully trained.
- Must be regularly vaccinated, de-wormed and treated against fleas/other infestations.
- Must be house trained and kept on a leash and accompanied by their owners at all times.
- Must be capable of confinement to designated areas of the healthcare environment, e.g. day room, relatives' room, etc.
- Must be excluded from clinical treatment rooms and kitchens at all times.
- Must be kept away from other clients with phobias or allergies.
- Must not be excited or provoked and must only visit patients where permission has been sought.
- Must be discouraged from licking patients/staff.

**NB: With prior agreement from the IP Team assistance dogs/pets of service users who are "end of life" may be permitted into day rooms and client bedrooms.**

## **9. Infection Prevention and Control Precautions**

### **9.1 Staff Hygiene**

Thorough hand decontamination using the six-step technique and liquid soap and water must be carried out following contact with the animal or its environment, cleaning, feeding and/or any other equipment (see Hand Hygiene Guidelines G\_IPC\_17). This is the most important aspect of minimising infection risk.

Staff must keep any skin lesions/cuts/abrasions covered with a waterproof dressing.

If bites or scratches occur staff should follow the procedure for Accidental Exposure to Blood Borne Virus Infections and contact the Occupational Health Services at 2 St Annes Close, Lincoln, LN2 5RB, Tel 01522 573597 for advice. Or Boston 012054 45317 or Grantham 01476 464228

Any member of staff who has a known or suspected allergy to the animal in question should report this to their line manager and Occupational Health Services

### **9.2 Feeding**

Staff must not eat in front of or share food with the animal.

Animals must not be fed/watered in kitchen or patient areas. They must have their own feeding dishes, which must not be cleaned in the kitchen area (sluice area is acceptable).

Feeding dishes should be cleaned after each feed with detergent and water.

Patients should be discouraged from allowing the animal to lick them. If patients are licked, they should be encouraged to wash the area with soap and water.

### **9.3 Pet Excreta**

Pet excreta can present an infection risk. Dogs should be encouraged to eliminate away from the health care environment. We would recommend providing an area within the grounds which can either be section off or used as a spend area.

Animal excreta eliminated within the health care environment should be dealt with as a body fluid spill. The owner/handler/other suitable person must clean up the spillage and the area then decontaminated using a neutral detergent and hot water followed by a 1,000 p.p.m. chlorine releasing agent e.g. Chlorclean or Haztabs and disposed of as clinical waste (see Spillage guidelines).

## **10. Development of these guidelines**

This document has been developed through collaborative working between:  
Lincolnshire Community Health Services NHS Trust  
Guide Dogs for the Blind Association

## **11. Review**

The guideline will be reviewed 3 years from the date of issue, or earlier if new evidence is published which would recommend a change in practice.

The Infection Prevention & Control Team will be responsible for reviewing this guideline.

## **12. References**

Khan M., Farrag N. (2000) Animal-assisted activity and Infection Control implications in a healthcare setting. Journal of Hospital Infection (46) 4 – 11.

DiSalvo H, Haiduven D, Johnson N, Reyes V, Hench C, Shaw R, Stevens D (2000) Who let the dogs out? Infection control did: Utility of dogs in health care settings and infection control aspects. American Journal of Infection Control, 34(5), Pages 301-307

Lefebvre SL, Waltner-toews D, Peregrine AS, et al (2006) Prevalence of Zoonotic agents in dogs visiting hospitalised people in Ontario: implication for infection control. *Journal of Hospital Infection*. 62 458-466.

Pets as Therapy (2012) [Internet] <http://> / Accessed 1<sup>st</sup> July 2015



## Appendix A: Equality Analysis

A.	Briefly give an outline of the key objectives of the policy; what it's intended outcome is and who the intended beneficiaries are expected to be	The purpose of this guidance is to advise on the precautions and control measures that are recommended in relation to pets in healthcare premises, thus minimising the risk of healthcare associated infections to patients, visitors and staff in health care settings.		
B.	Does the policy have an impact on patients, carers or staff, or the wider community that we have links with? <b>Please give details</b>	To minimise the risk to patients, carers and staff of healthcare associated infections in the healthcare setting.		
C.	Is there is any evidence that the policy\service relates to an area with known inequalities? <b>Please give details</b>	Non known		
D.	Will/Does the implementation of the policy\service result in different impacts for protected characteristics?			
		Yes	No	
	Disability		x	
	Sexual Orientation		x	
	Sex		x	
	Gender Reassignment		x	
	Race		x	
	Marriage/Civil Partnership		x	
	Maternity/Pregnancy		x	
	Age		x	
	Religion or Belief		x	
	Carers		x	
<b>If you have answered 'Yes' to any of the questions then you are required to carry out a full Equality Analysis which should be approved by the Equality and Human Rights Lead – please go to section 2</b>				
The above named policy has been considered and does not require a full equality analysis				
<b>Equality Analysis Carried out by:</b>		Lynne Roberts		
<b>Date:</b>		12 Aug 2013		