

Animals in Health Care

Guidance and recommendations for health care facilities



Wisconsin Healthcare-Associated Infections Prevention Program

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Introduction

Animals within health care facilities are becoming more common. While animals can provide comfort and enrichment for patients and residents, efforts must be made to prevent the transmission of zoonotic diseases, or infectious diseases, that are passed from animals to humans. Prior to allowing animals within a health care facility, facilities should understand the risks associated with animal interactions and how to prevent infections.

Key terms

Animal-assisted activity (AAA): A program that allows patients or residents to interact with animals in a common, central location within a facility or in individual patient or resident rooms.

Animal-assisted therapy (AAT): A goal-oriented intervention that involves an animal in the treatment process. A credentialed therapist provides this therapy.

Emotional support animal (ESA): A pet that provides therapeutic benefit and comfort through companionship. This type of animal has not been trained to perform a specific job or task, so it does not qualify as a service animal under the Americans with Disabilities Act (ADA).

Facility animal: An animal that lives in the facility permanently and is cared for by facility staff, a third party, or patients or residents.

Miscellaneous animal interactions: Activities offered by the facility outside of AAA, AAT, or the other categories of animal interactions including, but not limited to, petting zoos, carnivals, and farm animal interactions.

Personal pet visitation: A personal pet of a patient or resident that is brought into the facility to interact with that patient or resident specifically. These animals are not allowed to interact with others in the facility.

Service animal: Dogs that are trained to work or perform tasks for a person with a disability. Service animals are protected under the [ADA](#) and are not considered pets. There are specific requirements that must be met before a service animal can be officially licensed.

Therapy animal: An animal registered or certified for animal-assisted activities or animal-assisted therapy. These animals must tolerate new people and places and should undergo temperament testing by a person or group who is experienced in assessing animal behavior.

Zoonotic disease (zoonoses): Illness or disease caused by a pathogen that can spread between animals and humans. Transmission can occur directly or indirectly via bites, scratches, aerosols, ectoparasites, accidental ingestion, or contact with contaminated soil, water, food, or unpasteurized milk.

Zoonotic pathogen: Organisms that can spread from animals to people and cause illness or disease. Organisms can include viruses, bacteria, fungi, multidrug-resistant organisms (MDROs), and parasites.

Risks associated with animals and animal interactions

There are many risks associated with animals and animal interactions.

Zoonotic disease: The transmission of infectious diseases between animals and humans is called zoonoses. Transmission can occur from animals to humans, from humans to animals, and potentially from human to human. There are over 200 known zoonotic pathogens that can cause illness in humans. MDROs are especially of concern and have been increasingly present in cats, dogs, horses, and pigs.

Allergies: Animal fur and dander may be a source of some allergies in patients or residents.

Phobias: A fear of certain animals is common which can cause distress in some patients or residents.

Injuries: Animal bites and scratches may occur and can be a cause of infections and potential phobias.

Animals in Health Care Best Practices

Animal interactions and their presence in patient or resident care areas are increasing in various types of health care settings. Animals can serve as a source and reservoir for zoonotic pathogens, including MDROs. These risks should be considered when allowing animal interaction within a facility. The guidance below applies to any animal in a health care setting.

Animals best suited for health care settings

Health care facilities should consider which types of animals may be best suited for their facility, patients, or residents. Based on best practices, animals should be at least 1–2 years of age and not recently adopted from a shelter, rescue organization, or research facility.

Animals such as primates, rodents, birds, reptiles, or amphibians are not suited for health care facilities due to them being more difficult to train and control during interactions. Additionally, farm animals carry a higher risk of infectious disease. This should be taken into consideration if allowing farm animals and petting zoo animals into the health care facility to interact with patients, residents, and staff.

Animals best suited for health care settings include cats and dogs. These animals may be easier to train to interact with patients, residents, staff, and visitors within a health care environment. If the dog or cat does not adjust to these settings, they should not be allowed to visit.

Infection prevention and control

It is essential for facilities that allow animals to interact with their patients, residents, and staff to implement infection prevention best practices to prevent zoonotic disease transmission. Animals can be reservoirs or carriers of infectious agents which can spread between patients, residents, and staff. Zoonotic diseases can be transmitted by

animal bites, contact, ectoparasites, droplet, and airborne routes and can cause severe illness. While there are over 200 known zoonotic pathogens that may cause illness, there are several of these that can be of concern with animal interactions. These zoonotic illnesses include, but are not limited to, viruses like rabies, illnesses caused by bacteria such as campylobacteriosis, salmonellosis, tularemia, and parasites or fungi.

Animals that interact with patients and residents within a health care facility are at a higher risk of acquiring and becoming carriers of MDROs. [Studies](#) have shown that MDROs, including *Clostridioides difficile* (*C. diff*), are more common in dogs that visit health care facilities than if visiting other facilities. Human strains of *C. diff* have been reported in visitation dogs. More recent studies have shown outbreaks of MDROs in animal care settings that can increase incidence of community cases.

Infection prevention and control (IPC) practices should focus on hand hygiene, cleaning and disinfection, and environmental cleanliness.

Hand hygiene: All who come in contact with animals, including patients, residents, staff, visitors, and handlers should practice hand hygiene. Hand hygiene can be performed using soap and water or alcohol-based hand rub before and after contact with animals.

Cleaning and disinfection: Promptly clean and disinfect any animal urine, feces, or other body substances. Disinfection should be performed using a facility approved, Environmental Protection Agency (EPA) registered product and following the instructions for use (IFUs). Gloves should be worn during the cleaning and disinfection process, and all substances and materials should be discarded in a leak-resistant bag. Hand hygiene must be performed after cleaning and glove removal. Clean and disinfect surfaces that the animal comes into contact with to minimize risks of indirect contact transmission.

Environmental cleanliness: Animal hair and dander can be a source of allergies and should be cleaned up after interactions. Ensure that there is no food or drink in the areas where animals have access or are allowed. All the animal's supplies should be clean and in good condition.

Injuries and incidents

Any animal allowed in a health care facility should undergo temperament testing by a person who is experienced in assessing animal behavior. This evaluation should be documented and verified prior to the animal coming into the health care facility and interacting with patients, residents, and staff.

People who know the animals and their behavior should supervise the animal activities or therapy sessions. Animal trainers or handlers are required to:

- Abide by facility policies.
- Be in good health and free of communicable diseases.
- Be trained to perform the activity or therapy.
- Be responsible for any supplies that the animal will need during the activity or therapy session.
- Take appropriate precautions to prevent animal bites.

- If an animal bites a person during an animal-assisted activity or therapy, the animal should be permanently removed from the program.
- Report animal bites to the local public health department or law enforcement. Wisconsin state law ([SS 95.21](#)) requires that any dog or cat which bites a person be quarantined for 10 days so that it can be observed for signs of rabies.

Facilities should notify a physician and complete an incident report if there are injuries. Significant injuries that require staples, sutures, or medical intervention should be reported to Wisconsin Department of Health Services, Division of Quality Assurance (DQA) through your normal reporting means. [Entities](#) (providers regulated by DQA and state employees) must report incidents, allegations, or suspected occurrences of abuse, neglect, or misappropriation of client property. See [Misconduct Definitions, P-00976 \(PDF\)](#) and [Wisconsin Caregiver Program Manual, P-00038 \(PDF\)](#) for more information.

Animal health

Any animal that is allowed in a health care facility should be clean, well-groomed, healthy, and free of communicable diseases. Animals should also:

- Be even tempered and well trained.
- Be greater than 1 year of age due to unpredictable behavior and elimination control.
- Be free of fleas, ticks, and worms and should be on a flea control program.
- Have no sutures, open wounds, skin conditions, or lesions.
- Be bathed within 24 hours before the visit or bathed regularly.
- Have short nails with no rough edges.
- Be up to date with recommended immunizations (such as rabies) and preventive medications (such as heartworm prevention).
- Receive routine veterinary care and check-ups to maintain good health.

General animal guidelines

Animals should be restricted from certain areas of the facility including:

- Food prep areas and kitchens.
- Laundry areas.
- Sterile supply rooms and any storage areas for clean supplies.
- Medication preparation areas.

The decision to allow access to patient or resident rooms should be made on a case-by-case basis with the consultation and consent of the attending physician, nursing, and infection control staff.

Any animal should be removed from the facility if the animal:

- Is unable to properly contain bodily excretions (is not housebroken or has vomiting or diarrhea).
- Shows aggressive behavior such as snarling, biting, scratching, or teeth baring.
- Is excessively noisy (howling, crying, or whining).

- Is infectious or ill.
- Poses a direct threat to the health and safety of others.

Patient and resident suitability

Not all patients and residents are suitable for animal interactions. When determining suitability consider excluding those who:

- Have open wounds.
- Have open tracheostomies.
- Are immunosuppressed.
- Are on [transmission-based precautions](#) or isolation.
- Have an active infection.
- Have allergies or phobias to the animal

Service animal specific guidelines

Under the ADA, a service dog must be permitted in any area of the facility that is unrestricted to patients, residents, or visitors if:

- The service dog does not pose a direct threat.
- The presence of the service dog would not require a fundamental alteration in the facility's policies, practices, or procedures. If the facility cannot accommodate the type, size, or weight of the dog or if the dog will compromise requirements necessary for safe operations of the facility, the dog may be restricted.

When it is not obvious what task is being performed, staff may only ask two questions:

- Is the dog a service animal required due to a disability?
- What work or task has the dog been trained to perform?

A service dog handler must:

- Control the service dog. Service dogs must be harnessed, leashed, or tethered, unless these devices interfere with the service dog's work or the individual's disability prevents them from using these devices. In that case, the handler must maintain control of the service dog through voice, signal, or other effective controls.
- Provide the service dog with food, water, and other necessary care or plan care through other accompanying people (family or friends). The facility should not be responsible for providing care for the service dog.
- Clean up promptly after the service dog or plan for accompanying people to clean up after the service dog. The facility should not be responsible for cleaning up after the service dog.
- Ensure the service dog is vaccinated and licensed, to the extent required by state law and local ordinance.

It is generally appropriate to exclude a service dog from certain areas of the facility such as operating or procedure rooms or locations where immunocompromised patients or residents live. Decisions to exclude a service dog from a care area should be made on a case-by-case basis by evaluating the dog, the patient or resident, and the clinical

situation. If a service dog is excluded, the facility should work with the service dog's handler to determine any reasonable modification to accommodate the service dog or alternative opportunity to services without the animal's presence.

A service dog may be removed from the facility if the dog:

- Is unable to properly contain bodily excretions (is not housebroken or has vomiting or diarrhea).
- Shows aggressive behavior such as snarling, biting, scratching, or teeth baring.
- Is excessively noisy (howling, crying, or whining).
- Is infectious or ill.
- Poses a direct threat to the health and safety of others.

A facility should document the circumstances of the removal.

Guidelines and resources

- Administration for Strategic Preparedness & Response: [Understanding How to Accommodate Service Animals in Healthcare Facilities](#)
- American Journal of Infection Control: [A Survey of Infection Prevention and Animal Assisted Activity Policies in Healthcare Facilities - United States, 2023](#)
- American Veterinary Medical Association: [Animal-Assisted Interventions](#)
- Americans with Disabilities Act Requirements: [Service Animals](#)
- Americans with Disabilities Act Title II Regulations: [Section 35.136 Service Animals](#)
- Centers for Disease Control and Prevention: [About Zoonotic Diseases](#)
- Centers for Disease Control and Prevention: [Animals in Healthcare Facilities](#)
- Society for Healthcare Epidemiology of America: [Animals in Healthcare Facilities: Recommendations to Minimize Potential Risks](#)

Facility Policy on Animals and Animal Interactions

Health care facilities that allow animals and animal interactions within the building or the facility grounds should have a specific policy that outlines the details necessary to prevent zoonotic pathogens and mitigate the risks associated with animal interactions.

This template policy will address animal-assisted activities, animal-assisted therapy, resident or facility animals, service animals, and emotional support animals and personal pet interactions. Health care facilities can use and modify this template or pieces of this template to create their own policy on animals and animal interactions. Each section outlines information that a facility may choose to include in their own policy. Decisions on what to include should be based on a facility risk-assessment.

Template: Animals in [Name of Facility]

Initial effective date: *mm/dd/yyyy*

Most recent revision date: *mm/dd/yyyy*

Authorized/reviewed by: *[Department or individual who has authority of the policy]*

Responsibility

It is the responsibility of health care personnel and facility administrators to ensure that animals that interact or reside in this facility abide by this policy. The health care facility's infection prevention and control staff should participate actively in planning for and coordinating animal-assisted activities or therapy and animal interactions.

[Define how facility staff should escalate any concerns about an animal in the facility.]

Policy

Injury and incidents

Report animal bites to the local public health department or law enforcement. Wisconsin state law ([SS 95.21](#)) requires that any dog or cat which bites a person be quarantined for 10 days so that it can be observed for signs of rabies. Serious injuries need to be reported to Wisconsin Department of Health Services, Division of Quality Assurance per the requirements. Additional considerations for injury reporting should be made based on the type and severity of the injury.

[Define who in the facility is responsible for reporting, should this occur].

Infection prevention and control

Infection prevention and control practices are essential to prevent zoonotic diseases.

- *[Define hand hygiene requirements for all animal interactions].*
- *[Define cleaning and disinfection requirements. Include who is responsible, how it should be done, and where any waste should be disposed of].*
- *[Define environmental cleanliness expectations].*

- *[Define who is responsible for providing education to health care personnel, patients or residents, handlers, and visitors. Include how often this education will be conducted and how it will be documented].*

Animal-assisted activities and animal-assisted therapy

Animal guidelines

- *[Define type of animals that are eligible or ineligible for animal-assisted activity or therapy].*
- *[Define any age requirements for the animals].*
- *[Define if documentation of immunizations and prophylactic treatment will be required **before** the animal can enter the facility. If so, define where the documentation is stored and who has access to this information].*

Animal handler guidelines

- *[Define any documentation requirements to verify the handler is appropriately trained].*
- *[Define any site-specific orientation the animal handler will receive to ensure they work efficiently with staff in the facility]*

Patient or resident populations

- *[Define patient or resident populations that may or may not participate in animal-assisted activities or therapy].*
- *[Define whether animal-assisted activities will be offered in a group setting and/or in individual patient or resident rooms].*

Patient or resident animals

Animal guidelines

- *[Define which type(s) of resident animals are or are not permitted].*
- *[Define whether the animal will be able to interact with other patients or residents and if it will be allowed to roam freely in the facility. Note specific areas of the facility where the animal will live or sleep].*
- *[Provide detail on how the animal will be confined to prevent entering restricted parts of the facility].*

Animal health and care

- *[Define how the animal's health and behavior status will be regularly evaluated]*
- *[Define the plan for if the animal has an acute infection and the veterinary care plan].*

- *[Define requirements for an ill resident animal to return to the facility. For example, the animal is evaluated by a veterinarian and written certification is provided to the facility noting that the resident animal does not pose an increased risk to patients, residents, or staff].*
- *[Define who is responsible for providing care for the animal, whether that is the patient or resident or another responsible person (third party)].*
 - *[Define a back-up plan if the assigned responsible person is unable to carry out their duties caring for the animal].*

Facility guidelines

- *[Define how the facility will manage other patients' or residents' allergies, asthma, and phobias].*
- *[Define how the facility will take precautionary measures to prevent bites and scratches].*
- *[Define the criteria for when an animal is to be removed from the facility].*

Service dogs

Access and exclusion

- *[Define any areas in the facility where a services dog may be excluded– may include areas such as oncology units, intensive care units].*
- *[If a determination is made to exclude services dogs from parts of the facility, define how the facility will work with the service dog's handler to identify reasonable modifications or ways to accommodate the service animal].*
 - *[Define how the facility will offer the individual with a disability the opportunity to obtain services without the service dog's presence].*
 - *[Define who is responsible for finding alternate care for an excluded service dog; this is usually the service dog's handler].*

Removal of a service dog

- *[Define criteria in which the service dog may be removed from the facility].*
- *[Define who will be responsible for documenting the circumstances of the removal].*
- *[Define requirements for an ill service dog to return to the facility. For example, the dog is evaluated by a veterinarian and written certification is provided to the facility noting that the service dog does not pose an increased risk to patients/residents or staff].*

Emotional support animals and personal pet interactions

Animal guidelines

- *[Define which type(s) of emotional support animals or personal pets are or are not permitted].*
- *[Define any requirements for the age of the animal, immunization status of the animal, or health of the animal before interactions].*
- *[Define who is responsible for providing care for the animal, whether that is the patient or resident or another responsible person].*
 - *[Define a back-up plan if the assigned responsible person is unable to carry out their duties caring for the animal].*

Interaction guidelines

- *[Define which patient or residents are eligible or ineligible to have an emotional support animal or personal pet].*
- *[Define any pre-requisites necessary to allow emotional support animal or personal pet interaction].*
- *[Define any facility rules for documentation, such as signing an animal interaction agreement before the first interaction].*
- *[Define any parameters for duration of interactions].*

Miscellaneous animal interactions

Animal guidelines

- *[Define which type(s) of animals are or are not permitted in the facility and/or facility grounds].*
- *[Define any requirements for the age of the animal, immunization status of the animal, or health of the animal before interaction].*
- *[Define who is responsible for providing care for the animal, whether that is the handler or another responsible person].*
 - *[Define a back-up plan if the assigned responsible person is unable to carry out their duties caring for the animal].*

Interaction guidelines

- *[Define which patient or residents are eligible or ineligible to interact with the miscellaneous animal].*
- *[Define any pre-requisites necessary to allow miscellaneous animal interaction].*

- *[Define any facility rules for documentation, such as signing an animal interaction agreement before the first interaction].*
- *[Define any parameters for duration of interactions].*