

**CARROLL MEMORIAL COUNTY HOSPITAL
Corporate Compliance Manual**

Section: Rights/Issues	Originating Dept: Administration	Effective Date: 3/11/2020
Title: Animal Accommodations	Approved By:	Page 1 of 5

Purpose:

The Carroll County Memorial Hospital (CCMH) complies with the Americans with Disabilities Act (ADA) and other laws related to persons with disabilities. This policy provides guidance for staff of CCMH hospital to use when they encounter a service animal in the hospital. CCMH only recognizes a dog or a miniature horse as service animals. This policy applies to CCMH hospital and all CCMH facilities.

Definitions:

Americans with Disability Act (ADA) is a federal law passed in 1990 that requires covered entities Title II (state and local government services) and Title III (public accommodations and commercial facilities) to provide reasonable modifications in their policies, practices and procedures when necessary to accommodate people with disabilities.

Service animal is defined by the ADA as a dog or a miniature horse that is individually trained to do work or perform tasks for people with physical disabilities. The work or task the animal has been trained to provide must be directly related to the person's physical disability. Utilization of a service animal is a covered provision under the ADA.

Emotional support animal or **therapy animal** is an animal that solely provides comfort, emotional support or companionship, is not a service animal and is not covered under this policy or the ADA.

Policy:

CCMH welcomes service animals assisting people with physical disabilities to accompany hospital visitors, employees, and patients in our public and patient areas of CCMH hospital and/or CCMH facilities. In order for an animal to be considered as a service animal they must meet the criteria defining a service animal, and be trained to perform a specific task for the individual with the physical disabilities. Animals that act solely as an emotional support animals, comfort, companion or therapy animals are not service animals and are not covered under this policy.

Should a individual have a different type of service animal, it will be reviewed on a case-by-case basis and all criteria must be met. Only a dog or a miniature horse (24-30 inches tall, 70-100 lbs) are recognized as service animals by the ADA.

When it is not obvious what tasks the service animal performs for the individual, staff may ask two questions to clarify the service animal's purpose which are (1) does this animal perform a service for you because of a disability? and (2) what tasks has the animal been trained to do?

Staff may not ask what the individual's disability is, why the individual needs a service animal, ask the individuals service animal to demonstrate a task they are trained to do, or request that additional documentation of the individual's medical history or the service animal's training be provided. CCMH

hospital and all other facilities do require that the owner of the service animal show proof of current vaccinations.

Patient's and/or visitors are responsible for all aspects of care the service animal requires during the time with in the healthcare setting. This includes feeding, grooming, and toileting. Prior to admission to a CCMH hospital, it must be determined by the attending physician that the patient can care for the service animal. A CCMH Service Animal Arrival Checklist must be completed by staff and placed in the patient's chart. Hospital staffs are not responsible for any aspects of the service animal's care except when it is necessary to supervise the patient (for example, when patient is taking service animal outside for toileting and must be accompanied by staff).

Should the attending physician determine that the patient is not capable of either interacting with the service animal (using the service animal for the animal's trained tasks) or taking care of the animal, and then the service animal may be refused admission to the hospital with the patient. When admission is refused, arrangements to care for the service animal outside of the hospital are the responsibility of the patient or their legal guardian. This includes any financial responsibility of veterinary care or boarding costs.

Should the patient become incapacitated during their inpatient stay and unable to care for the service animal, the admission can be revoked and the alternate caregiver listed on the CCMH Service Animal Arrival Checklist is to assume possession of the animal. Should the alternate caregiver be unavailable, then the hospital must make arrangements, with a local boarding shelter. The patient will be responsible for any and all cost for the animal to be boarded at an appropriate facility while attempts to engage the alternate caregiver continue. The service animal cannot be left on the hospital grounds while the patient is unable to care for it.

While in the hospital, the service animal must be allowed to accompany the patient or visitor in all areas the individual can go. This includes patient rooms, clinics, cafeterias, or examination rooms. A service animal can be excluded from areas where the animal's presence may compromise or fundamentally alter the nature of services provided (such as a sterile environment).

The service animal must always be under the owners control by use of a leash, harness or tether unless an inability to use one of these is associated with the individual or patient's disability. A service animal that is not in control by either running, exhibiting aggression, barking, lounging, biting or attempting to bit, not housebroken (defecating and urinating with in the facility), is ill (fever, vomiting, diarrhea), is unkempt (dirty, malodorous) or has an infestation (fleas, parasites) may be removed from the facility after an individual assessment is made and a service animal exclusion form is completed.

Any decision to exclude a service animal from an CCMH inpatient hospital or CCMH facility can only be made after an individual assessment of the individual/patient's ability to interact and care for the animal are evaluated. During the evaluation process staff will determine whether the animal meets the criteria for a service animal, whether the animal can safely be utilized in the hospital/patient care setting, and/or if the service animal imposes undue financial and administrative burden.

The evaluation assessment for potential exclusion will be done by a department supervisor in collaboration with direct nursing staff, social worker, and other departments, such as Infection Control or Risk Management, as needed.

A CCMH Service Animal Exclusion Assessment form must be completed in detail and placed in the patient's medical record for inpatients. For all other individuals staff would need to complete the evaluation form, along with a hospital occurrence form and submitted both to the Risk Manager.

Should another inpatient or any hospital staff have either a fear of animals or an animal allergy then reasonable accommodations must be made for those individuals. Neither a fear of animals nor allergies to animals are not valid reasons to deny an individual use of their service animal in CCMH healthcare settings.

Service Animal Arrival Checklist
Carroll County Memorial Hospital

Alternate individual that the owner would like to be contacted to take possession of or make arrangements for the service animal in the event that the owner becomes incapacitated and unable to make arrangements:

Name of Alternate:	Phone Number:	
Address:	City:	
State:	Zip Code:	
Signature of alternate provider:		
Name of Boarding Facility: (if any, or write none)		
Address:	Phone Number:	
City	State:	Zip Code:
Patient or Guardian Signature:		
<input type="checkbox"/> Copy of animal's immunization record <input type="checkbox"/> Water bowl (must be lightweight plastic) <input type="checkbox"/> Food Bowl (must be lightweight plastic) <input type="checkbox"/> Animal Food (in airtight plastic container) <input type="checkbox"/> Bags for animal waste removal <input type="checkbox"/> Crate <input type="checkbox"/> Leash, harness or tether <input type="checkbox"/> Collar		
Signature of Staff verifying all items are in place: Date:		

Service Animal Exclusion Assessment
Carroll County Memorial Hospital

Must be completed by a department supervisor in collaboration with direct nursing staff, social worker, and other departments, such as Infection Control or Risk Management, as needed. Copy of this signed, completed form and all supporting documentation must be placed in the patient's chart on date of assessment.

Assessment date:	Place of assessment:
Name and title of department supervisor conducting assessment:	
Patient name:	MRN#:
Animal name:	
Description of animal: (i.e. mixed breed male dog)	
Part 1 – Assessment of the service animal (check all that apply)	
1. Poses a direct threat to the health and safety of others because:	
<input type="checkbox"/> Animal is not housebroken, more than one incident	
<input type="checkbox"/> Unkempt appearance: animal is dirty, malodorous or has fleas/parasites.	
<input type="checkbox"/> Illness: vomiting, diarrhea, fever or other illness that impairs animal's ability to perform their tasks for patient.	
<input type="checkbox"/> Antisocial or disruptive behavior such as uncontrolled barking, growling, biting or snapping, lunging, jumping.	
Explanation of any boxes checked: (attach supporting documentation)	

2. Animal fundamentally alters facility's operations, practices, procedures.

Provide detailed explanation: (attach supporting documentation):

Part 2 – Assessment of the patient/owner: (check all that apply)

____ Refuses or is unable to control the animal (no leash or harness, no verbal or physical cues, animal exhibiting disruptive behavior unchecked).

____ Refuses or is unable to feed and care for animal (toileting, exercise, grooming).

____ Patient's current mental status makes them unable to interact with the animal or allow the animal to perform the tasks they are trained to do.

Explanation of any boxes checked: (attach supporting documentation)

Signature of supervisor completing assessment

Date

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