



# Monterey County Behavioral Health Policy and Procedure

<b>Policy Number</b>	477
<b>Policy Title</b>	Therapy Animals
<b>References</b>	Attachment One: Therapy Dog Identification Sample
<b>Effective</b>	January 1, 2011

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## Policy

Monterey County Behavioral Health Division (MCBHD) strives to utilize evidence based practice that will benefit in the treatment of its consumers. The use of therapy animals (not to be confused with service or assistance dogs: guide or hearing dog) is encouraged when it is determined such assistance will benefit a consumer without causing distress to others within the clinic. The use of a therapy animal can be a goal directed intervention with specific criteria and is part of the treatment process, within the scope of practice of the therapist. Therapy animals can have a calming effect in that they have been shown to lower blood pressure and stress levels during visits, provide unconditional love and warmth.

Animals in general are not permitted in the clinic unless they meet the definition as provided for in the Americans with Disabilities Act (i.e.: dogs for the visually impaired or guide dogs). If a “pet” (dog, cat, snake, parrot, rat, etc.) is brought in the clinic the Patient’s Services Representative (PSR) would notify the clinician who would then ask that the animal be removed from the clinic. That is done for several reasons (i.e.: allergies, fleas, barking, biting, etc.). The consumer should be informed not to bring the animal to any subsequent appointments. Should any issues arise the supervisor will be advised in regard to following this protocol. The goal is to maintain the health and safety of all concerned.

Therapy animals and handlers will be certified or registered by a recognized Animal Assisted Therapy (AAT) institution such as Delta Society, Assistance Dog Institute, Therapy Animals International, Inc., Canine Companions for Independence, or another organization approved of by the MCBHD. They shall be under the care of a veterinarian, determined to be free of communicable diseases, and be up to date on appropriate vaccinations. The therapist must assure sound sanitation practices and be aware of any allergic response by consumers who are receiving the therapy. The therapy animal shall be well behaved and under voice control by the handler at all times. They will be consistently “housebroken”. “Accidental” wastes shall be disposed of promptly and appropriately. Repetitive “accidents” will exclude the animal from the treatment site as would aggressive behavior.

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**Procedure**

The case-by-case proposed use of a therapy animal at a treatment site must be approved of by the clinician’s supervisor, Program Manager, and Deputy Director prior to its use. The clinician must clarify in writing why the animal is needed and what the expected outcome will be.

The goal directed, specific outcome needs to be documented with each intervention (i.e.: improve social skills, increase attention span, and diminish aggressive behavior, etc) along with any noted improvement and/or effectiveness of that intervention.

Consumer participation is voluntary and a written agreement to participate in the therapy should be on record.

Any complaint about the therapy animal will be reported immediately to the Program Manager and documented in an incident report.

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### **Why Don't Therapy Dogs Wear Vests?**



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62 Therapy Dogs are to be petted, and vests cut down on the petting area. Additionally, the use of vests  
63 can confuse a Therapy Dog with a Service Dog. They can be identified by a TDI bandana or TDI ID  
64 tag.

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THERAPY DOG

ATTACHMENT ONE