I. PURPOSE

Patients and visitors with disabilities are entitled to be accompanied by their service animals when they are either admitted or visit UCSF hospitals, outpatient areas, and ambulatory practices/clinics in compliance with state and federal laws (see Medical Center Policy 1.01.10, “Disabled Accessibility and Services”). Patients and visitors with service animals may access areas of UCSF Medical Center where patients and visitors are normally allowed except for (1) certain areas that require a protected environment, as defined below and (2) when the service animal directly threatens the health or safety of patients, visitors or staff or would fundamentally alter the provision of essential services, as defined below.

II. REFERENCES

42 U.S.C. § 12101 – Americans with Disabilities Act (ADA)
28 C.F.R. Part 36
http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm

III. DEFINITIONS

A. Service Animals: The ADA defines a service animal as “any domestic animal individually trained to provide assistance to an individual with a physical, cognitive, or mental disability.” Service animals perform tasks that individuals with disabilities cannot perform or need assistance with, including but not limited to:
1. Guiding individuals who are blind or have low vision;
2. Alerting individuals who are deaf or hard of hearing to the presence of people or sounds;
3. Pulling a wheelchair;
4. Picking up dropped items;
5. Assisting an individual during a seizure;
6. Retrieving medicine or the telephone;
7. Providing physical support to assist with balance and stability to individuals with mobility disabilities; or
8. Assisting individuals, including those with cognitive disabilities, with navigation.

B. Psychiatric Service Animals (PSAs) are service animals individually trained to perform tasks which mitigate the functional impairments associated with the psychiatric disabilities of their partners. Tasks performed may include:
1. Reminding the handler to take medicine;
2. Providing safety checks, or room searches;
3. Turning on lights for persons with Post Traumatic Stress Disorder;
4. Interrupting self-mutilation by persons with dissociative identity disorders; or
5. Keeping disoriented individuals from danger.
C. **Therapy Animals** are not service animals, and are not entitled to the same access that must be given by law to service animals, as they have not been individually trained to perform disability mitigating tasks. Therapy animals are animals that provide supervised, goal-directed interventions to individuals in hospitals, nursing homes, schools and other institutional settings.

D. **Personal Pets** are animals kept for ordinary use and companionship. Pets are not service animals, and are not entitled to the same access that must be given by law to service animals, as they have not been individually trained to perform disability mitigating tasks.

E. **Direct Threat:** A direct threat exists if an animal could cause a significant risk of substantial harm to the health or safety of patients, visitors, or staff (including but not limited to the infectious risk or allergic risk posed by the animal), or if the animal could cause a fundamental alteration to the essential nature of the services being provided or the program in question. Animals will be restricted if its presence would cause a direct threat to the health or safety of patients, visitors or staff, or would cause a fundamental alteration of operations as determined by the attending physician, and/or nurse manager.

IV. **POLICY**

A. It is the policy of UCSF Medical Center that no individual shall be discriminated against on the basis of disability in the full and equal enjoyment of UCSF Medical Center’s services, facilities and accommodations. Service animals are allowed access to areas of the Medical Center open to the general public (except for those areas noted below in Section IV. E. of this policy) when accompanying a patient or visitor with disabilities if the animal is clean and in good health, under the control of the owner, does not pose a direct threat to the health and safety of patients, visitors or staff, or would not fundamentally alter the essential nature of the services being provided as determined by the attending physician and/or nurse manager.

B. Staff may not require proof of certification or other such evidence of service animal status before permitting the service animal to accompany the person with a disability. Service animals are not required to wear identification indicating that it is a service animal. Staff may ask if the animal is a service animal or what the service animal is trained to do. Staff should not ask about the nature of the disability, or require “proof” of disability as inquiring into a person’s disability is prohibited by law.

C. Therapy animals are permitted to visit patients on a supervised basis if they are clean and in good health, under the control of the owner, are not disruptive, do not pose a threat to the health and safety of other patients, visitors or staff, and do not alter the nature of the services being provided or the program, as determined by the attending physician and/or nurse manager. Therapy animal visits are scheduled in advance through the Department of Nursing and/or Volunteer Services in conjunction with the SPCA.

D. Pets are generally not permitted in the Medical Center. Pet visitation is discouraged in most circumstances. On a case-by-case basis, pet visitation may be arranged after consulting with the attending physician and/or nurse manager in consultation with Hospital Epidemiology and Infection Control.
E. No animals are permitted access into sterile surgical areas, operating rooms, holding and recovery areas, Labor and Delivery Suites, nurseries, sterile processing areas, food preparation areas and other areas that require a protected environment. Exceptions should be made only after consultation with the attending physician, and/or nurse manager on a case by case basis. In addition, animals may be excluded from patient care areas in the Emergency Department, Intensive Care Unit, and other areas not open to the general public based on the discretion and judgment of the attending physician and/or nurse manager on a case by case basis.

F. All animals, while on Medical Center property, shall be restrained on a leash or other appropriate restraining device and the leash/device must be held by and under control of a person at all times.

G. UCSF Medical Center is not responsible for the safety, health, or security of service animals, therapy animals or pets. Owners are solely responsible for the conduct of their animals while in the Medical Center.

V. ANIMAL VISITATION MANAGEMENT AND RESPONSIBILITIES

A. UCSF Medical Center is not expected to provide care or food for an animal or to provide a special location for it to relieve itself. All patients and visitors must be advised that the care or supervision of the animal is solely their responsibility, and that staff are not required to provide care, food, or a special location for the animal.

B. If unable to care for the animal, a patient must designate a responsible party (family member, friend, or other designee) other than themselves or healthcare workers, who must be available for the stewardship of the animal, including feeding, providing water, exercise and elimination if the patient cannot provide those services. If a patient decides to leave the animal at home, a family member or designee may bring the animal in for visits with the patient to help maintain the bond between the person and the animal.

C. For inpatients, all occupants in a multiple-occupancy room must agree to the presence of the animal.

D. For inpatients, staff should discuss all aspects of anticipated care with patients who use service animals prior to the admission or scheduled procedures and determine what arrangements need to be made regarding care of the animal, including the patient’s preference to be accompanied by the animal.

E. For inpatients, if the patient is immunocompromised (less than 500 absolute neutrophils), the attending physician must be consulted to determine whether allowing the animal to stay with or visit the patient will cause a direct threat or fundamental alteration, or will cause other clinical concerns. For those patients with wounds, the wounds must be covered prior to animal visitation.

F. Patients and personnel should implement effective hygienic measures (such as hand washing before and after visits) to prevent transmission of disease.

G. Staff are expected to follow standard infection control and environmental surface cleaning procedures following visitation.
H. The owner may be asked to remove the animal from the Medical Center if the owner or animal fails to comply with this policy, in addition to conditions for removal as noted above in Sections III. E., and Sections IV. A., C., D., and E. of this policy.

I. Separation of animals from owner – if it becomes necessary to separate the animal from its owner:
   1. Effort should be made to explain the particular rationale to the owner and help the individual make alternative arrangements for the care of the animal.
   2. In the event that an animal must be separated from the handler and no family member, friend or other responsible party is presently available (i.e., the handler has an unanticipated medical emergency), then staff will contact Patient Relations and efforts will be made to make temporary arrangements for the care and supervision of the animal.
   3. Any separation and rationale for the separation will be documented in the patient’s medical record.

J. As a courtesy to patients, visitors and employees, large, foldable plastic crates (that will accommodate animals up to 75 pounds) are available to check out 24/7 (from the hospital security department) at both UCSF Medical Center and Mount Zion locations in order to temporarily assure the safety of the animal, patients, and staff.

VI. RESPONSIBILITY FOR POLICY

Direct questions about this policy to Patient Relations, or to the Department of Hospital Epidemiology and Infection Control.

VII. HISTORY OF POLICY
Reviewed April 2009 by Susan Alves-Rankin, Patient Relations; Bruce Flynn, UCSF Risk Management and Insurance Services; Ann Sparkman, Office of Legal Affairs; Kristy Ensunsa, Ambulatory Services, and Amy Nichols, Department of Hospital Epidemiology and Infection Control. Approved June 2009 by Infection Control Committee.
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Approved March 2010 by Senior Leadership Council
Approved March 2010 by Executive Medical Board
Approved March 2010 by Governance Advisory Council and Chancellor Susan-Desmond Hellmann, MD, MPH

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