



NHS Greater Glasgow & Clyde Assistance Dog Policy

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The Assistance Dog Policy is for all staff working across Greater Glasgow and Clyde and it is anticipated that the information it contains will assist staff in the delivery of open and accessible services for all disabled people using assistance dogs.

NHSGGC would like to thank all who have contributed to the development of this policy, including the following;

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1. POLICY STATEMENT

"A Fairer NHS Greater Glasgow & Clyde" (Equalities In Health 2018) details the ways in which NHS Greater Glasgow & Clyde (NHSGGC) is fully committed to ensuring equalities issues are addressed regardless of race, disability, gender, sexual orientation, religion, age, socioeconomic status and/or social class. Equalities sensitive practice is promoted across all of its services.

The Disability Discrimination Act (DDA) 1995 introduced measures to eliminate discrimination often faced by disabled people and, by 2006 the Disability Equality Duty had become law. This was then superseded by the Equality Duty as laid out by The Equality Act 2010 (Equalities in Health 2018). This legislation serves to combine and improve upon the measures contained within the range of equalities legislation from the preceding forty years and covers a range of protected characteristics; namely, Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation.

Accessibility within NHSGGC buildings and services for disabled people who have assistance dogs is based upon this Act. It is the aim of this policy to minimise any restrictions in relation to access for people who have assistance dogs, thus reducing any distress to that person, their assistance dog, staff and other patients.

- Throughout this policy, Person in Charge can include Managers,
 Senior Charge Nurses and Nursing Staff.
- This policy applies to the provision of all services and all premises in NHSGGC including wards, outpatient departments, GP surgeries and dental surgeries.
- Staff also need to give full consideration to their understanding of assistance dogs (see section 5) and to associated "Good Practice" (see appendix 2) when conducting home visits.

2. INTRODUCTION

The Equality Act 2010 consolidated many different pieces of equalities legislation into one and now states that it is illegal to treat disabled people less favourably than anyone else in areas such as service provision.

According to the Scottish Government (2016), 33% of adults in Scotland have a long term limiting health condition or disability. This means that under the Equality Act 2010's Public Sector Equality Duty they are entitled to have their rights protected. This Public Sector Equality Duty requires public bodies to have;

"due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities...The broad purpose of the equality duty is to integrate consideration of equality and good relations into the day-to-day business of public authorities."

(Equalities & Human Rights Commission [EHRC] 2016)

Having "Due regard" for circumstances where a person requires to use an assistance dog means it is a legal requirement to permit and enable their access. Also relevant here is the duty, under the legislation to make "reasonable adjustments" for people within public buildings and services or in employment and who require additional support or alterations to their environment to enable them to have access (ACAS 2014).

3. SCOPE

The Assistance Dog policy sets out the requirements of NHSGGC to support access for patients with assistance dogs. The policy applies to, patients, carers, visitors and all employees of NHSGGC in all locations.

4. RISK

Organisational risk associated with assistance dogs can be broken into 3 principle areas with associated controls:

RISK	CONTROL
Reduced patient access and	Compliance with content of policy
non-compliance with legislation	and reasonable adjustment.
Infection control concerns and potential dog fouling	Compliance with existing infection control procedures including hand washing to support best practice
Inappropriate impact of dog	Safe and considered conduct by
presence or behaviour to others	staff and dog owners as set out
i.e. patient allergies or dog bite	within policy

5. GENERAL INFORMATION: ASSISTANCE DOGS

As outlined by the Equality & Human Rights Commission (2017), assistance dogs are not pets.

They are:

- highly trained
- will not wander freely around the premises
- will sit or lie quietly on the floor next to their owner
- are trained to go to the toilet on command and so are unlikely to foul in a public place

Such dogs may perform practical assistive tasks for their partners, alert to life-threatening medical conditions and/or otherwise facilitate the independence of their owners.

Over 7,000 people across the UK who have a range of disability types and, therefore, a range of support/assistance needs which rely on the support of a dog. As the Royal College of Nursing (2018) indicate, types of assistance dogs include:

- Guide Dogs: supporting people with visual impairment or sight loss with guiding.
- Hearing Dogs: supporting people with hearing loss or impairment.
- Assistance Dogs: aiding mobility and support daily living such as undressing and picking dropped items up off the floor, opening and closing doors etc.
- Medical Alert Dogs: trained to constantly monitor their partner's health condition and alert to impending episodes where their health would acutely deteriorate. The alert allows the person to take preventative action to avoid/limit the episode, or to make themselves safe, thus reducing the risk of injury during the episode. For example: Type 1 diabetes, Addison's disease, Postural Orthostatic Tachycardia Syndrome (POTs), seizures, and severe allergies.
- Autism Assistance Dogs: supporting people with autism.
- Dogs supporting people who have mental health issues.

Considered to be the benchmark organisation for training within the UK, Assistance Dogs UK [ADUK] is a coalition of eight assistance dog charities [see Appendix 1]. Dogs trained in this way;

- (i) behave well in public
- (ii) have safe and reliable temperaments
- (iii) are healthy and do not constitute a hygiene risk observed over a considerable period of time
- (iv) are fully toilet-trained
- (v) are regularly checked by experienced veterinarians

- (vi) are accompanied by a disabled handler trained to work alongside their assistance dog
- (vii) are recognisable by the harness, organisation specific coat, id tag on their collar or lead slip they wear

(ADUK 2018).

Some assistance dogs may be owner-trained. This does not mean that they are not valid assistance dogs but rather that they may well have been trained to assist people with more complex conditions or combination of conditions. As pointed out by Assistance Dog Law UK (2018), there are not enough accredited programmes covering the range of needs of those requiring an assistance dog, therefore owner training is the most beneficial option for some. Such dogs can still be highly trained but do not necessarily have the accreditation of a large organisation. Owners of dogs trained in this way will still be expected to take full responsibility for their dog and ensure their dog behaves in the way outlined above.

5.1 RECOGNISING AN ASSISTANCE DOG

Most assistance dogs are instantly recognisable by their harness or jacket. However, the law does not require the dog to wear a harness or jacket to identify it as an assistance dog (EHRC 2017). Assistance dogs who wear harnesses will be recognisable in the following ways;

- People who are blind or who are visually impaired can be assisted by guide dogs. Such dogs usually wear a white working harness with yellow reflectors and have tags on their collar. – For further information see "Access to Medical Facilities for Guide Dog Owners and Other Blind and Partially Sighted People"
 [https://www.bing.com/search?q=Access+to+medicalfacilities+for+ guidedog+ownersand+other+blind+andpartially+sighted+people&s rc=IE-TopResult&FORM=IETR02&conversationid]
- Guide Dogs [Scotland] trainee dogs will be recognisable by their blue jacket (they do not wear a harness until they are 14 months

approximately and begin guiding training)) which will say "guide dog puppy in training" on it.

- A Guide Dog with a red and white harness indicates the owner is deafblind.
- Hearing Dogs wear a burgundy coloured coat with "hearing dog" written on it. Such dogs assist people who are Deaf or who have hearing loss.
- Assistance Dogs, Support Dogs or Dogs for the Disabled help people with many different tasks ranging from alerting people when their owner has a seizure, carrying items, assisting with dressing/undressing and many other tasks. They wear a purple coloured coat.

The owner of an assistance dog may also carry an identity book. This yellow covered "passport" sized book has been designed to support & guide assistance dog owners with access to goods, facilities and services, as defined by the equalities legislation, as explained in Section 1 of this document. Please also note that Assistance dogs trained by member organisations of ADUK will have formal identification in the form of ID tags on the dog's collar, a harness or lead slip and an organisation specific branded dog jacket or harness (Assistance Dogs UK 2018).

For the purposes of supporting access to NHSGGC buildings and services both now and going forward, trainee assistance dogs should be regarded as "assistance dogs" and afforded access as per this policy. It is the responsibility of any relevant training organisations to request access in the first instance.

5.2 THERAPY DOGS/ANIMAL ASSISTED INTERVENTION

According to the Society for Companion Animal Studies (2018), "therapy dog" is a generalised term often used to describe a dog that's used to benefit people in a therapeutic way. Therapy dogs in the UK are not

considered to be assistance dogs and do not, therefore, have to be considered for access in the same way as assistance dogs – at least in legislative terms. Where the therapeutic use of dogs within NHSGGC settings is suggested, each situation should be considered on its merits and where it could enhance patient care and experience it should be enabled, taking into account all policy guidance regarding risk and hygiene etc.

The RCN (2018) point out Animal Assisted Intervention in health care settings incorporates many fields such as Animal Assisted Therapy (AAT), Animal Assisted Play Therapy (AAPT) and that most commonly practised by many therapy dog volunteers, Animal Assisted Activity (AAA) (See Appendix 5 for further detail). As it states above, where the therapeutic use of dogs within NHSGGC settings is suggested, each situation should be considered on its merits and in consideration of the relevant policies. Where it could augment patient care and experience it should be enabled.

5.3 Pet Dogs

On occasion, requests to bring a pet dog to visit a person in a health care setting may be received. Whilst there may be some value in a patient having time with their pet dog, many health care settings are unfamiliar environments for those dogs and, as such may prove very unsettling for a dog which isn't trained to manage in such a context. Similarly, it is difficult for hospital staff to have any confidence in the manner such as dog is likely to behave (unlike an assistance dog); unless, therefore, in the most exceptional of circumstances, pet dogs should not be permitted into NHSGGC buildings. Exceptional circumstances could include hospice care and/or other care settings such as long stay wards or care homes.

6. NHS SETTINGS

6.1 INPATIENT SERVICES

Assistance dogs are not routinely able to stay in hospital with their owners (please see section 6.5 also). Prior to any admission, alternative arrangements for care of the dog outwith the setting of the NHS should be discussed with the patient.

In cases of unplanned care, where family or friends are unable to look after the dog make contact with a relevant organisation (see Appendix 3) that may be able to assist.

6.2 Outpatient Area or Primary Care

Generally, assistance dogs can accompany a patient on their outpatient or primary care visits. If, however, the patient requires tests/treatment they may prefer their dog be left in a suitable area for a short period. This may be a quiet area, office or duty room and, ideally with someone supervising them. If they have to be left alone for any time it is best to ensure this is as limited as possible to minimise any distress to the dog.

When being transferred for a test in a chair or trolley, patients can lead their assistance dog (a member of staff can also do the leading on behalf of the patient) and should be able to have their dog accompany them.

6.3 Visitors with Assistance Dogs

A visitor with an assistance dog should be greeted on arrival to the clinical area where, the Person in Charge will communicate any limitations regarding their access to them [see 6.4].

6.4 Access

The Person in Charge will decide if it is appropriate or not for an assistance dog to be allowed into a particular clinical area. In making this decision, all Persons in Charge are expected to carefully consider the guidance set out below.

(High risk areas where access will not be permitted are identified in section 4 of this policy document)

The Person in Charge needs to take account of the role the assistance dog fulfils for the person concerned. They should understand the person's individual needs and the role the dog plays in meeting those needs. If the dog is not able to be present, in what way will these needs be supported? Can they be supported? For example, in the case of a medical alert dog it may well be prudent to enable prolonged access for the assistance dog so it may monitor a patient's health status.

Any refusal of an assistance dog's admittance needs to be made on justifiable grounds. The Person in Charge, therefore, has to fully consider the circumstances including whether the care needs of other patients are/are not a reasonable objection to an assistance dog being present. Reasonable objections could include, for example, potential exacerbation of mental health issues with dogs which could include a particular fear of dogs.

Objections under religious belief are not considered reasonable. The EHRC also state where another person is allergic to dogs, this alone is unlikely to be reason enough to refuse entry to an assistance dog;

"If there is an identifiable person with an allergy to dogs then employers and service providers should take reasonable steps to ensure that person has minimal or no contact with dogs; reasonable steps are unlikely to include banning all assistance dogs" (EHRC 2017:8).

Where reasonable objections exist, staff should try and make adjustments. For example, a patient could be cared for in another area of the ward or side room, if one is available.

6.5 Justifiable Separation

Infection control and patient safety remain paramount. Assistance dogs will generally be permitted access into wards and other hospital areas,

GP surgeries and clinics, however, they will not be permitted in any high risk area.

High risk areas include:

- High Dependency Wards
- Intensive Care Units
- Operating Theatres
- Day Surgery Units (primary recovery rooms)
- Haematology Wards
- Oncology Wards
- Transplant Units

The care of assistance dogs should be discussed with the patient and where patients will use 'high risk' services then alternative arrangements for care of the dog should be organised.

However, where this is not possible, assistance dogs belonging to visitors or patients can be kept in a quiet area, office or duty room. Check with other members of staff if this is appropriate. Ideally, dogs should not be left alone but if unavoidable this should be for a short a period of time as possible to minimise distress and regular welfare checks should be made. In the event of separation of the assistance dog from its owner, staff should ensure this is for as short a time as possible.

7. Hygiene & Infection Control

Staff, patients and visitors must ensure they follow hand washing and infection control procedures at all times. Assistance dog owners should also be given hand gel and follow the same infection control procedures as all visitors.

Areas where assistance dogs have visited should be cleaned on a daily basis as part of the usual cleaning schedule. In the unlikely event that an assistance dog accidentally fouls within the NHS premises blood and

body fluid spillage policies should be consulted and followed. Cleaning of the area should be carried out as per existing protocols.

Further information is available in the National Infection Prevention and Control Manual (NHS Scotland 2012). Staff can also contact local Infection Control Teams for assistance or check information at the Infection Prevention & Control pages of the NHSGGC website (NHSGGC 2018).

8. RESPONSIBILITIES

8.1 RESPONSIBILITIES OF STAFF

All staff should have a clear understanding of the Assistance Dog Policy and should be aware of the different types of support provided by assistance dogs as well the support needs of patients when the patient (or visitor) has been separated from the assistance dog.

The best way to identify the needs of patients or visitors is to ask them.

It is important that staff recognise the assistance dog is a working dog and should try to minimise distractions.

Staff are responsible for implementing existing local infection control and cleaning protocols as necessary.

Staff should consider the care needs of patients, visitors and assistance dogs as appropriate to the situation and as outlined in this document.

People in Charge are asked to consider this guidance when determining whether there is any reasonable justification to deny access to an assistance dog.

8.2 RESPONSIBILITIES OF ASSISTANCE DOG OWNERS

At all times the care and assistance required by the dog is the responsibility of its owner.

Owners should check with the staff of the NHSGGC building, service hospital ward or outpatient area to be visited prior to arrival to see

whether the area is deemed high risk area and if so take this into account. They should clarify any need for assistance in relation to the care of their dog during their hospital stay so that staff can signpost to relevant organisations or provide support in contacting those organisations (see Appendix 3).

On arrival the patient or visitor should report to the ward or reception area.

The owner should ensure the dog is fit and well and its care regime follows guidance provided by Assistance Dogs UK. Owner trained dogs (see Section 5) are expected to follow the same high standards.

The owner should follow the infection control policy of the area to be visited, including the use of hand gel provided for all visitors.

9 COMMUNICATION AND IMPLEMENTATION PLAN

A communication plan will be developed to support the launch and the promotion of the Policy, targeting key staff groups including:

- Frontline staff across all services
- Facilities Managers
- Practice Managers
- Person[s] in Charge
- Reception Staff

10 REPORTING & MONITORING

Monitoring of the policy and guidance will be by exception, with routine monitoring of complaints through existing complaints arrangements within Directorates or Partnerships.

11 IMPACT ASSESSMENT

An Impact Assessment was undertaken and is available on http://www.nhsggc.org.uk/media/220255/EQIA_Guide_on_Assistance_Dogs.pdf

12 REVIEW

The policy will be reviewed in three years or sooner if there are any changes required under legislation.

For further information or advice contact:

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E mail: jac.ross@ggc.scot.nhs.uk

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APPENDIX 1

ADUK [Assistance Dogs (UK)] https://www.assistancedogs.org.uk/

https://www.assistancedogs.org.uk/the-law/

Member Organisations:

- Autism Dogs CIC https://www.autismdogs.co.uk/
- Canine Partners
 <u>info@caninepartners.org.uk</u>

 www.caninepartners.org.uk
- Dog A.I.D <u>www.dogaid.org.uk</u>
- Dogs for Good <u>info@dogsforgood.org</u> www.dogsforgood.org
- Guide Dogs
 guidedogs@guidedogs.org.uk

 www.guidedogs.org.uk
- Medical Detection Dogs <u>operations@medicaldetectiondogs.org.uk</u> <u>https://www.medicaldetectiondogs.org.uk</u>
- Hearing Dogs For Deaf People

Tel: 01844 348 100

Text relay: 18001 01844 348100

info@hearingdogs.org.uk

https://www.hearingdogs.org.uk

- Support Dogs https://supportdogs.org.uk
- The Seeing Dogs Alliance <u>info@seeingdogs.org.uk</u> <u>http://seeingdogs.org.uk</u>
- Service Dogs UK
 <a href="https://www.servicedogsuk.org/getintouch@servicedogsuk.org/getintouch.getintouch

There are also several organisations (candidates) currently working towards the same accreditation. Info can be accessed on the ADUK website.

APPENDIX 2

Assistance Dogs: General Tips re Good Practice

An assistance dog is a working dog and as such should be treated with respect. Do not approach or speak to the dog without first checking with the owner.

(i) APPROACHING PATIENT AND DOG

- If an assistance dog harness handle is down, this means the owner may like your help or that the dog is "off duty". If the person has requested your assistance you should approach the person from the opposite side to where the assistance dog is. Do not take the harness handle or the lead as these are what the owner uses to control the dog.
- When calling a patient for their appointment, for example, in an outpatient clinic, staff are required to fully consider that person's circumstances. For example, someone with an assistance dog may not hear their name called or see where the member of staff who has called them has gone. Please take such factors into consideration.
- When being guided, some people like to walk by your side, others
 may request that you walk in front of the dog and they will follow.
 Always ask the person's preference. Remember to offer clear
 directions when guiding a disabled person who has requested your
 assistance.
- If the person is deafblind, approach face on and try to speak to them first; if there is no response, gently tap the person on the shoulder or arm, try speech again or if the person uses a deafblind manual a hand may be raised by the person to indicate you should use the deafblind manual or the block alphabet. If staff are unaware of how to use the deafblind manual, the block alphabet can be easily used by tracing each letter onto the palm of the

deafblind person's hand. For further information regarding deafblind manual please contact Deafblind Scotland (see Appendix 3) or look at the information provided at the link below. (https://dbscotland.org.uk/?s=Deafblind+manual+)

(ii) CARE OF DOG ON SEPARATION FROM OWNER

- It is important to remember the dog may show signs of distress if
 its owner is unwell and if it has to be removed from its owner's
 side. It may be necessary to house the dog temporarily in the ward
 duty room, quiet area or an office.
- The assistance dog should be kept as near to the owner as possible and any separation from its owner should be for as short a time as possible. Separation should only happen in an emergency situation until contact has been made with an Assistance Dog organisation. The dog should not be tethered to a radiator, placed in direct sunlight or near electrical plugs. The dog should be offered a bowl of water; feeding arrangements will be carried out by the appropriate Assistance Dog organisation.
- Assistance dogs are usually toileted by their owners prior to leaving home and again prior to entering buildings. In an emergency admission it may be necessary to take the dog outside for toileting at least once after arrival (The person in charge should, after discussion with staff, nominate a member/members of staff to undertake this task until alternative arrangements can be made if this proves to be necessary). If the time the dog is at the hospital exceeds a three hour period, the dog should be taken outside again. Any faeces should be double bagged, put in a clinical waste bin and removed immediately (or follow local spillage policies).

APPENDIX 3

Useful Contact Information

Guide Dogs for the Blind Association (Glasgow) Glasgow Mobility
Team Axis House 12 Auchingramont Road Hamilton ML3 6JT [ADUK member] Tel: 0118 983 8123 Out of hours (emergencies only) 0345 143 3333 Email – glasgow@guidedogs.org.uk email picked up Mon to Fri 9-5 Website: https://www.guidedogs.org.uk/how-you-can-help/fundraise/local-to-you/glasgow-mobility-team

Hearing Dogs for Deaf People The Grange Wycombe Road Saunderton Princes Risborough BucksHP27 9NS Tel: 01844 348 100 Out of hours 0797 673 7427 Website: www.hearingdogs.org.uk

Canine Partners Mill Lane Heyshott Midhurst West Sussex GU29 0ED [ADUK member] Tel: 0845 658 0480 Website: www.caninepartners.co.uk

Support Dogs 21 Jessops Riverside Brightside Lane Sheffield S9 2RX [ADUK member] Tel: 0114 261 7800 Website: www.support-dogs.org.uk

Dogs For Good (formerly Dogs for the Disabled) The Frances Hay Centre Blacklocks Hill Banbury OX17 2BS [ADUK member] Tel: 01295 252 600 Website: https://www.dogsforgood.org

Royal National Institute for Blind People (RNIB) 12-14 Hillside Crescent Edinburgh EH7 5EA Tel: 0131 652 3140 Website: www.rnib.org.uk RNIB Helpline – 0303 123 9999 email - helpline@rnib.org.uk

Deafblind Scotland 1 Neasham Drive Lenzie Kirkintilloch Glasgow G66 3FA Tel: 0141 777 6111 Mini com 0141 777 5822 Email - info@dbscotland.org.uk Website: www.deafblindscotland.org.uk

Deaf Connections 100 Norfolk Street Glasgow G5 9EJ **Tel**: 0141 420 1759 (voice or text) Website: www.deafconnections.co.uk

Action on Hearing Loss Empire House 131 West Nile Street Glasgow G1 2RX Tel: 0141 341 5330 Textphone 0141 341 5347 Email - scotland@hearingloss.org.uk Website: www.rnid.org.uk

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Sense Scotland 43 Middlesex Street Kinning Park Glasgow G41 1EE Tel: 0300 330 9292 Email info@sensescotland.org.uk Website: www.sensescotland.org.uk

APPENDIX 4

ANIMAL ASSISTED INTERVENTION

(A Protocol To Support Organisations Considering Working With Dogs In Health Care Settings & Allied Health Environments https://www.rcn.org.uk/professional-development/publications/pdf-006909)

 Animal Assisted Therapy (AAT) is delivered in conjunction with other health care professionals and should be goal directed with outcomes documented and evaluated. The field is advancing in line with practices worldwide to include involvement in many health care settings, including intensive care units and treatment rooms.

These types of interventions are directed in conjunction with health care professionals and delivered alongside a handler and dog with specialised training and expertise. They form part of an individual plan of care for a patient. Dogs working in this type of environment should always have a handler in addition to the care giver, so that one person can advocate for the patient whilst the other advocates for the dog.

Animal Assisted Activity (AAA) is the term used where a handler brings a dog to the patient/ resident for general interaction. These dogs are usually owned by the person who is their handler.
 Owners volunteer their services to provide visits to groups of people or individuals in health and social care settings and schools, to allow people to stroke the dog or interact with them to help them feel connected. This is the most common form of animal assisted intervention.

There are two types of dogs providing AAI;

Dogs That Are Registered With A Visiting AAI Dog Organisation.

These dogs are pet dogs which have been assessed by a visiting AAI dog organisation (e.g. Pets as Therapy) and are accompanied by their owners who are registered volunteers with the organisation. Owners and their dogs volunteer their services to provide visits to groups of people or individuals in health/ social care settings and schools, to allow people to stroke the dog or interact with them to help them feel connected.

Dogs Trained Specifically For Animal Assisted Interventions (AAI) In Health Care Settings.

These are specially-trained dogs and highly trained handlers who are part of an organisation providing AAI services. They will work alongside a nominated health professional in a goal-directed Animal Assisted Therapy intervention as part of a patient's agreed care plan. The engagement of the dog and handler will therefore have been agreed and planned in conjunction with the relevant local health care professional.