Animal-Assisted Interventions (AAI) in Hospitals

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What we will cover today

• Challenges to implementing AAI programs in hospitals
• Evidence of AAI efficacy in hospitals
• A best practice model of AAI in a hospital
• Suggestions for developing a successful program
• Benefits and risks for AAI teams
Therapy animals present challenges to hospitals

• Many hospital administrators lack knowledge of AAI
• Patient and staff safety issues
  – Potential injuries
  – Allergy and asthma exacerbation
  – Fear of dogs
• Liability
• Zoonotic diseases
Therapy animals present challenges to hospitals

- Treatment interference
- Patient confidentiality
- Animal Cleanliness
  - Accidental urination or defecation
  - Fleas and ticks
  - Animals will smell and/or shed
- Animal Misbehavior
- Operational challenges
  - Who coordinates visits, where, when, how
  - Patient screening
Hospitals present challenges for AAI teams

• “It’s like a box of chocolates” – Forrest Gump
• A vulnerable population
• Wide range of ages
• Diverse cultural beliefs about dogs
• Wide range of emotional displays
• Loud and varied sounds
• Slick flooring, elevators and escalators
• Presence of food, medication, antiseptic cleaners
Hospitals present challenges for AAI teams

• Crowded rooms
  – Staff often coming and going quickly

• Varying patient conditions
  – Acute or chronic pain
  – Compromised immune systems
  – Terminal illnesses
  – Pregnancy
  – Conditions may change very quickly
Other important considerations

• Not all dogs are comfortable in the hospital setting
  – Or with all patient populations

• Not all people are comfortable in hospital settings
  – Or with all patient populations
Evidence of AAI efficacy in hospitals

- **Results are mixed**

- More consistent evidence supports benefits for patients with psychiatric illnesses
  - Reduced anxiety, depression, pain and fear
  - Increased social interactions and activity levels
  - Increased group therapy attendance

- **Cancer patients**
  - Reduced tiredness and depression
Some evidence of AAI efficacy in hospitals

• Urology patients
  – Reduced stress and anxiety before cystoscopy

• Cardiovascular patients
  – Improved cardiovascular indicators and motivation to walk in congestive heart failure patients
  – Increased walking speed and distance in stroke patients

• Pediatric patients
  – Reduced stress, pain, loneliness
  – Increased self-esteem, comfort, and relaxation
Other hospitalized groups with some evidence of benefits

• Obstetric patients
  – Improved anxiety and depression in women with high risk pregnancies

• Orthopedic patients
  – Less pain medication use after total joint replacement surgery

• Trauma patients
  – Increased patient satisfaction

• Hospital staff
  – Reduced physiological and psychological stress
Impact of AAI on physicians leads to award
Example of a best practice AAI program in a hospital, Dogs On Call

• A clinical program of The Center for Human-Animal Interaction in The School of Medicine at Virginia Commonwealth University (VCU)
  – Established in 2001
  – Non-profit 501 (c) (3)
  – **Mission**: Improved health and well-being through human-animal interaction
  – Pursue our mission through goal-oriented clinical, educational, and research activities
What is a best practice model?

• A program that has been shown to consistently show superior results based on research and experience
• Considers sustainability and ongoing development
• Established or proposed as a model for widespread adoption

*All royalties donated to the Center for Human-Animal Interaction at VCU
**Best Practice:** An integrated clinical, research, and education program model

- What we learn from our Dogs On Call teams
- Informs our research
- Enriches education
- Establishes efficacy

![Image of a child with a therapy dog]
Best Practice: Policies and procedures to maximize human and canine safety

• Developed/adopted by VCU Medical Center in 2001
  – Involved physician and nursing leadership, epidemiology, risk management, volunteer services, security, animal care and use advisory program, Center director
  – Consulted existing CDC, veterinary and animal-assisted activity/therapy guidelines
  – Started with Pet Partners policies and strengthened with specific policies and procedures for visiting in our hospital and clinics
  – Routinely reviewed and revised to maximize safety for patients, staff, dogs, and volunteers
Dogs On Call: Best Practice

• Manualized program with continuous monitoring, evaluation, and continuing education for team members

• Fully integrated into VCU Medical Center
  – More than 80 active Dogs On Call teams
  – Areas visited based on consultation with infection control, medical directors, and nurse coordinators
    – All areas except operating and isolation rooms and food preparation areas

• Online scheduling and on-site check-in and check-out procedures to monitor visits

• High safety profile and high demand for visits
Dogs On Call Requirements

• Species limited to adult dogs
• Current registration with Pet Partner’s Program or Alliance of Therapy Dogs
• Completion of VCU Medical Center Volunteer training
• Completion of Dogs On Call Orientation
• Compliance with Medical Center/Dogs On Call policies and procedures
  – Includes annual veterinary wellness documentation
  – Includes criterion-based Dogs On Call renewal evaluation every other year
Dogs On Call: Best Practice

- Demonstrated benefits for healthcare teams
  - Reduced physiological stress levels
  - DOC requested following stressful/critical events
  - Included in VCUMC initiatives (Dept of Surgery Wellness Initiative, Physician Stress Management Resources, Medication Safety Committee, Resident physician well-being)

- Demonstrated benefits for our students
  - Significant reduction in perceived stress
  - Requested presence at key events

- Demonstrated benefits for our patients
Impact of AAI on an individual patient
Patient satisfaction following Dogs On Call (DOC) visit

Was the DOC visit helpful? (n=407)

99%

1%

helpful
not helpful
If the dog visit was helpful, how? (n=402)

- More relaxed: 83%
- Less fearful: 35%
- Improved mood: 90%
- Less lonely: 57%
- Less anxious: 53%
- Less pain/discomfort: 33%
- Other: 15%
Suggestions for developing successful programs

- BE PATIENT!
- Identify allies in the facility
- Educate – about AAI, Pet Partners, evidence base
- Develop policies involving key stakeholders
  - Medical leadership, nursing leadership, epidemiology, risk management, volunteer services, security
  - Include veterinarian
  - Start with Pet Partners but add hospital specific policies and procedures
Suggestions for developing successful programs

• Establish advisory committee
  – Include hospital leaders who can help advance the program

• Start small and go slowly
  – pilot test policies and procedures
  – Obtain feedback from staff and involve them in decisions
  – Obtain feedback from patients, visitors, dog handlers
Suggestions for developing successful programs

• Involve key stakeholders
  – Solicit feedback
  – Include in events and activities
  – Share accomplishments
  – Share publicity

• Maintain your enthusiasm and expect challenges

• There will be setbacks, but view them as opportunities
Risks to you

• Exposure to illness

• Compassion Fatigue
  – Exposure to highly emotional and traumatic events
  – Awareness, self-care, and support

• Negative responses

• Boundary issues
  – pictures
  – Special requests
Benefits to YOU of providing AAI in hospitals

• Incredibly rewarding
• Bring joy and comfort at some of life’s darkest moments
• Elicit a smile or response that hasn’t been seen in some time
• Allow a child “to just be a kid with a dog for a few moments rather than a kid with cancer”
• Provide an enjoyable distraction from one’s medical condition
• Bring stress relief to busy staff and trainees
• Know you make a difference

AND SO MUCH MORE!!!
Thank You

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