



Informed Consent for Animal-Assisted Therapy

Animal-assisted therapy (AAT) is a form of therapy intervention that utilizes registered therapy animals and handlers (people who handle the animal) to provide goal-directed interventions to individuals of all ages. AAT can be used with various types of psychological, emotional, developmental, cognitive or physical impairments. Amy Holsten and her dogs Willow and Wrenley have been providing AAT to clients at Therapy Junction since July, 2014. All three dogs are registered with Pet Partners and have passed the stringent evaluation process for becoming therapy dogs. The purpose of this form is to review the policies, procedures and risks of working with a therapy dog, as well as request your consent for treatment utilizing AAT provided by qualified therapists at Therapy Junction.

Policies, Procedures and Risks for Working with Dogs in Therapy:

1. Participation in AAT is not guaranteed and will be based on the therapist's judgment and physician recommendations. Factors which may indicate AAT might not be appropriate include:

a. Client has a history or indication of animal abuse (this does not necessarily mean your child will not be allowed to interact with the dogs – there is a protocol for addressing this issue. The therapist just needs to be aware so interactions are positive and safe for both the client and the dog).

b. Client has severe allergy to dogs.

2. Clients wishing to participate in AAT should be screened for allergies before working with the dogs. All allergies must be reported before beginning treatment so proper precautionary measures can be taken. When mild allergies are reported but the client still wants to have a dog present in the session, client must provide written clearance from his/her primary physician.

3. Any fear of dogs must be reported before treatment commences so proper precautionary measures can be taken. If fearful clients still wish to have therapy dogs present during sessions, the therapist will make accommodations so that the client feels safe during encounters with the dog.

4. When therapy dogs are ill or recovering from injury or surgery, they will not be at Therapy Junction until cleared by their veterinarian.

5. Although the dogs are always current on vaccinations and health screenings, there is always a slight risk of zoonotic disease transmission (illnesses that can be passed from dog to human) when working with the therapy dogs. Every effort will be made by Therapy Junction

staff to reduce the risk of zoonotic transmission. Neither the dogs' owner nor Therapy Junction can be held liable for the transmission of zoonotic disease.

6. All clients, family members and therapists must wash their hands, use hand sanitizer or use sanitizing wipes before and after touching the therapy dogs.

7. Therapy dogs are routinely groomed and bathed weekly. Although every effort will be made to keep the dogs' nails trimmed, scratching may occur while physically interacting with the dog. Neither the dogs' owner nor Therapy Junction can be held liable for injuries incurred by the dogs' nails.

8. Dogs use their body to communicate and may brush against or lean into a person. Other body language such as tail wagging or body wiggling may also occur. Such behaviors create a risk for loss of balance, falling or light bruising. Neither the dogs' owner nor Therapy Junction can be held liable for injury incurred by physically engaging with therapy dogs.

9. If at any time the dog shows signs of distress, irritation, overstimulation, or fear, he/she will be taken out of the session.

10. If the handler and client/family agree, the dogs may work off leash, which will be noted in the client's file.

I, (or parent/guardian of) _____ understand and agree to the policies, procedures and risks associated with the use of Animal-Assisted therapy in my/my child's speech or occupational therapy sessions. I hereby consent to therapeutic services involving the registered therapy dogs and accept full liability in the event the dog causes injury to me/my child in any way throughout the course of treatment. Furthermore, I am not aware of any fear, allergy, skin or respiratory sensitivity or other medical condition I/my child have/has that would render physical interaction (touching/handling) with or close proximity to a therapy dog potentially harmful to my/his/her health.

- Deny permission to use a dog in my/my child's session.
- Grant permission to use a dog in my/my child's session with no restrictions (off leash ok, physical interactions ok)
- Grant permission to use a dog in my/my child's session with the following restrictions:
 - No Physical Contact:** The dog may be present in the room, but no physical contact shall occur.
 - Leashed:** Physical contact is fine, but the dog shall be leashed at all times.
 - Fearful:** I/my child am/is fearful of dogs but would still enjoy controlled interactions with dogs.
 - Mild Allergies:** I/my child have/has mild allergies to dogs but I would still like dogs present in sessions. I understand I must provide a written doctor's note allowing interactions with dogs.

Client/Parent/guardian signature _____ Date _____