

Assistance Dogs in Medical Facilities

by Toni and Ed Eames

When nurse Mary Ellen entered Room 405 at St. Agnes Medical Center in Fresno, California, she was not only greeted by a smiling patient, but also by a Golden Retriever with a wagging tail! Toni was the patient and the wagging tail belonged to her guide dog Escort. Escort was present during Toni's pre-operative procedure and two-day hospitalization. In contrast, Nikki Deptula was not allowed to have her service dog with her during her hospitalization at Johns Hopkins.

Some medical facilities welcome disabled visitors accompanied by assistance dogs, while others attempt to exclude them. Some assistance dog partners are employed in medical facilities, while others are denied the right to bring their dogs to work. In many cases of access denial to medical facilities, claims have been filed against the hospital and these cases are working their way through the legal system. Hopefully, with greater understanding of the role assistance dogs play in the lives of their disabled partners, future illegal access denials will be avoided.

THE WORK OF ASSISTANCE DOGS

Guide dogs for the blind have been known in this country since 1929, but more recently, dog power has been harnessed to assist people with other disabilities. Guide dogs assist their blind and visually impaired teammates to safely negotiate their environment. They stop at curbs and steps, go around obstacles, locate entrances and exits and avoid moving objects including cars, bicycles, shopping carts and people. They are taught intelligent disobedience and will refuse a command perceived as dangerous or unreasonable.

Hearing dogs assist their deaf and hard-of-hearing teammates by alerting them to unheard sounds in the environment. These dogs make physical contact with their partners and lead them to the source of the sound. Dogs will alert to the smoke alarm, door knock or bell, telephone, alarm clock and kitchen timer. Among other things, dogs can be trained for a baby cry, emergency siren or the

partner's name.

Service dogs assist people with physical disabilities in a variety of ways. One of their universal tasks is retrieving requested or dropped items. They also turn switches on and off, open and close doors, push elevator buttons, pull wheelchairs and act as support for people with balance problems.

ASSISTANCE DOGS IN MEDICAL FACILITIES

Toni was driven to her out-patient post-surgery chemotherapy treatments by a friend. What role did Escort play in this setting? He expertly guided her into the facility, found an empty seat and followed the nurse into the treatment areas. During her hospitalization he was available to assist her to safely ambulate prior to her release. As a trained guide, he helped her skirt other patients, portapotties, meal trays and wheelchairs as the team navigated the hospital corridors. In similar fashion, blind visitors and employees need to be mobile and

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their guide dogs are the means of achieving this goal.

A hearing dog would alert his/her hard-of-hearing or deaf partner when called for examination or treatment in an out-patient setting. The dog would be helpful to his hospitalized partner in many ways. If the bedside telephone rings, equipment warning alarms sound or a staff member wants to get the patient's attention, the hearing dog would go into action. Deaf or hard-of-hearing visitors and employees also depend on the alerting services of their hearing dogs.

In an out-patient facility, service dogs would assist their partners by pulling the wheelchair, provide balance and support for those with unsteady gaits, pull open heavy doors and push elevator buttons. Had Nikki Deptula been allowed to have her dog in the hospital, he would have retrieved her cane and

assisted her to ambulate as part of her recovery process. Service dogs provide these and many other needed tasks for physically disabled visitors and staff members.

REASONS FOR ASSISTANCE DOG EXCLUSION

Based on the experience of people with disabilities denied the right to be accompanied by their canine assistants in medical facilities, especially hospitals, a variety of reasons have been cited. Among these are spread of disease and infection control, fearful or allergic patients or co-workers, misbehavior of the dog, unwillingness of staff to care for the dog and misunderstanding of the dog's function.

According to epidemiologists, the probability of transmission of diseases from canines to humans is insignificant. For contagion to occur, vulnerable humans would have to come in direct contact with canine feces or urine. The probability of this happening is extremely remote. According to these same experts, the risk of sick assistance dogs in hospitals is certainly much less than the risk of the presence of sick visitors and other patients.

Balancing the rights of patients and co-workers allergic to or afraid of dogs with the rights of those partnered with assistance dogs is a difficult task. In most circumstances, dog phobic or allergic people could easily avoid interacting with a disabled visitor, patient or staff member accompanied by an assistance dog. Although a small minority of patients express dislike or fear of dogs, the vast majority express pleasure and openly welcome canine visitors.

Concern that dogs may be disruptive and poorly behaved seems to be based on lack of knowledge about working canines. Assistance dogs are carefully selected and go through an intensive training period. They are under the control of their disabled handlers and behave properly in public places. Dogs should lie out of the way and not interfere with medical procedures.

Whether a disabled patient is being treated in the hospital or as an out-patient, medical personnel are not required to exercise, feed or care for the assistance dog. If the disabled partner is not able to care for the dog then he/she must make arrangements for someone else to do so. In many cases, however, nurses and aides vie for the opportunity

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to take care of the dog.

At first glance, the position that staff can provide all the services needed by a hospitalized patient seems reasonable. Based on such a belief, the assistance dog's presence is not needed. This assumption disregards many of the work activities performed by assistance dogs in hospital settings such as those previously described. Frequently, nurses and aides are overworked and cannot respond immediately to the needs of their patients, while the canine partner is always ready to assist. An additional element overlooked by those fostering this view is the disabled person's perception of the dog as intimately intertwined with his/her life. They are a team. The decision to work with an assistance dog is not taken lightly. Working with the trained dog fosters a sense of independence and self-confidence often not known before. The bond is so strong, separation frequently causes increased stress for both dog and patient.

Going beyond the in-patient setting, there are some situations in which hospital authorities claim visitors and employees do not need their assistance dogs because other staff members can do whatever is needed. When we were denied the right to visit a friend in St. John Medical Center in Tulsa, Oklahoma (see *Nursing Management*, 1997), the administration claimed it was offering reasonable accommodation by providing the guiding services of an untrained staff member. In some employment cases, the administration claims other staff members can provide all the service needed

by a disabled employee and, based on this mistaken belief, has barred the presence of the assistance dog.

WHAT'S THE LAW?

The Americans with Disabilities Act of 1990 (ADA) is frequently cited as the law guaranteeing access to all places of public accommodation, including hospitals, for disabled people accompanied

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by assistance dogs. However, well before the ADA became law, Section 504 of the Rehabilitation Act of 1973 and its subsequent re-authorization prohibited discrimination against people with disabilities in federal programs and all institutions receiving federal funds. Over time the issue of the rights of blind people to be accompanied by guide dogs in medical facilities was addressed by the Department of Health and Human Services (HHS) under Section 504. In a memorandum dated March 24, 1988, HHS determined that guide dogs must be permitted in all areas of the hospital with the exception of those in which the dog would threaten the ability of the medical facility to provide its services to patients. This document makes clear that a denial of access must be based on a real rather than an assumed threat to the medical service provider receiving federal funds. Stereotypes or past experi-

ence with other guide dogs cannot be the basis of denial. Since all hospitals receive federal funds, this memorandum applied to visitors, patients and employees. After the passage of the ADA, this mandate was extended to hearing and service dogs.

THE ROLE OF THE PATIENT REPRESENTATIVE

To adequately represent a disabled patient partnered with an assistance dog it is essential to know something about what the dog does for the disabled partner. It would also be helpful for every medical facility to develop specific policies concerning assistance dogs. Such policies must conform to current legal mandates. Once policies are established, the role of the patient representative would be to make sure these policies are fully implemented.

References

Eames, Ed and Toni, "Interpreting Legal Mandates: Assistance Dogs in Medical Facilities," *Nursing Management*, June 1997, 49-51.

Additional Sources

For additional information about assistance dogs and their disabled partners, see Eames, Ed and Toni, *Partners in Independence: A Success Story of Dogs and the Disabled*, Howell Book House, New York 1997, and *A Guide to Guide Dog Schools*.

For further information about consumer organizations, current access cases, existing training programs, etc., contact the International Association of Assistance Dog Partners, a consumer advocacy organization. IAADP publishes a quarterly newsletter, *Partners' Forum* and has an Information and Advocacy Center which can be contacted by phoning 810-826-3938. IAADP's web site is www.iaadp.org.

Toni Eames, M.S., and Ed Eames, Ph.D., Adjunct Professors of Sociology at California State University, Fresno, travel and live with Golden Retriever guide dogs Escort and Echo. They publish in many animal- and disability-related magazines. They are itinerant educators and do workshops for veterinary schools and professional associations, graduate social science programs and organizations dealing with the human/companion animal bond. Ed and Toni are board members and officers of the International Association of Assistance Dog Partners. Toni was inducted into the National Hall of Fame for Persons with Disabilities in 1998.

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glass walls, symbolic of darkness and light, into the core of the garden. See *Metropolitan Home*, March-April 1998.

Our residential work is extensive. These two particular gardens offer insight into two significantly different approaches to sanctuary. The Che Garden exemplifies contemplation focussed on a central kinetic object; 340 Lombard exemplifies contemplation on the void, the removal of form to the position where the boundaries are the dynamic elements of the core.

"What are bulbs?" he put in quickly.

"They are daffodils and lilies and snowdrops. They are working in the earth now -

pushing up pale green points because the spring is coming."

"Is the spring coming?" he said. "What is it like? You don't see it in rooms if you are ill."

The Secret Garden

Francis Hodges Burnett

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