



Health and Therapy for Women

Informed Consent to Participate in Animal-Assisted Psychotherapy (AAP)

The following Consent identifies and describes Rules, Risks and Benefits associated with Animal-Assisted Psychotherapy(AAP) as it pertains to our practice, and in many respects, AAP in general.

Health and Therapy for Animals offers AAP interventions including interactions with and handling of Practice Therapy Animals as follows: dogs, cats, small mammals, and various reptiles.

RULES:

1. Animals have individual rights, just as each client has rights. Each animal is allowed to determine if and when they participate with others. While it may be planned to have an AAP session, the animals will never be forced to do so.
2. Each animal has their own quiet space at Therapy House where they are housed, eat, rest, play and sleep. These environments are their protected surroundings and they are not to be disturbed or handled until a staff member safely removes them from these areas.
3. Each animal should always be treated gently. They should never be hit, have their tails or any other parts pulled, be carried or treated in any other way that is uncomfortable to them.
4. Each animal will always be present in any therapeutic situation in the presence of a staff member.
5. Should an animal become irritated, scared, or in any way acts in a negative manner, the animal will be put in a safe place by a staff member in an effort to assist the animal's calming. No other person should touch the animal at these times.
6. Animals are unpredictable in unfamiliar situations, such as meeting unknown and new animals, and sometimes new clients, therefore clients may not bring their own animal(s) to be involved in their AAP sessions.
7. Parents or guardians of children under the age of 12 must remain on the premises during their child's session.

RISKS:

1. Animals have their own natural defenses. While our practice and staff will do everything possible to prevent any injury, it is possible that a client will get scratched or bitten.
2. Animals often use their mouths in play. Therefore, even when playing, it is possible for light biting to occur. When playing with toys, an animal may miss the toy and get a client's finger. A client may feel teeth but this is typically not a deliberate act of biting.
3. Every effort will be made to ensure against zoonotic disease transmission (i.e. the sharing of disease between humans and animals). All Practice Therapy Animals are currently on all standard vaccinations, such as rabies; however, there is always a risk of the transmission of a disease when working with animals. Our animals are screened by a veterinarian before commencing to work in AAP. Because a client will have contact with an animal, as minimal as this is, a risk still must be considered.
4. Animal's saliva, body surface, fur and/or hair are potential allergens to clients. If you have had any previous allergic reactions to animals please disclose the specific details of your response to our staff prior to consenting to AAP. Allergic responses are considered serious and our practice should be fully aware of any previous reactions.
5. Sanitation of the environment and of hands is necessary to minimize containments and spread of germs. Our practice will provide antibacterial wipes, hand sanitizers and soap. Staff and clients must use sanitizing products before and after interacting with Practice Therapy Animals. Any soiled areas (e.g. should an animal have drainage coming from their mouths and/or have a soiling accident) the areas will be contained and the surface(s) will be disinfected with proper sanitizing products safe for the animals and clients. Please allow our staff time to contain a soiled area prior to continuing with therapy.

BENEFITS:

1. Animals help improve motivation and engagement in psychotherapy, perhaps resulting in a shorter recovery process.
2. Animals provide a sense of security and emotional support. Dogs in particular offer unconditional acceptance and positive regard.
3. Animals promote relaxation. Research has demonstrated that petting an animal can help lower blood pressure, heart rate, and increase oxytocin (i.e. a chemical in the brain).
4. Animals assist clients to adapt and learn frustration tolerance and other anger management techniques.

5. Animals can help in the areas of focus and attention.
6. Animals can be instruments of learning, which can increase self-confidence and self-esteem.
7. Animals offer playfulness and fun due to their innate playful nature.
8. Animals offer clients the ability to develop empathy, nurturance, and responsibility, and model other skills; such as acceptance, forgiveness and patience.
9. Clients can learn about stereotypes affecting clients and animals (e.g. physical disabilities) and how they deal with stereotypes in their own life. Through this, they can learn advocacy skills.
10. Through the use of positive reinforcement clients can learn the importance of rewarding good behaviors in themselves, in their partners, and/or their children.

I agree to abide by the Rules, Risks and Benefits as stated above. If I have any questions as to conduct that is appropriate when interacting with our Practice Therapy Animals, I agree to make inquiries before engaging in such conduct. I consent to working with a Therapy Practice Animal as an adjunctive tool to my psychotherapy session(s). I acknowledge that I have NO known illnesses or allergies that would prevent me from interacting with and handling the Practice Therapy Animals.

I understand that each Practice Therapy Animals is unique in its own living form. Each animal has been individually assessed for temperament and for their responsiveness to interacting with clients. Each animal meets one or more of the following qualifications: innately amiable and affectionate, assessed to be tolerable around adults and children, trained to provide therapeutic support: as a designated service, therapy, emotional, or comfort animal.

My signature below acknowledges that I, individually, and/or on behalf of my minor child, being informed of the above known risks, and acknowledging other potential unknown risks, have read and understood the above information and agree to the terms stated. I sign this consent voluntarily, freely, and without duress. I indicate that AAP is available and fully explained to my satisfaction. I have had the opportunity to receive information about the recommended AAP and I consent to this treatment. Even after signing, I can still refuse any dose or withdraw treatment at any time. If I have questions pertaining to AAP, I will make further inquiries prior to signing this consent. I am entitled to a copy of this agreement.

Name: _____

Signature: _____

Relationship to client: _____ Date: _____