K-9 CINB Working Service Dog Prescriber Guidelines Updated: January 6th, 2023

Service Dogs are dogs that have been specifically trained to perform skills that mitigate a person's symptoms with a disability. Studies have shown that Service Dogs can improve the quality of life and reduce symptoms of people with physical or psychiatric disabilities. However, as with any other intervention, the prescriber must determine that a Service Dog is an appropriate treatment approach and method of supplying the intervention to minimize the risk of harm to the patient, the service dog and the public.

Definitions

Therapy Dogs

- Therapy Dogs are somewhat similar to service dogs.
- Therapy dogs provide emotional support to many people.
- Service dogs give support to one person.
- Therapy dogs are not allowed into all public venues. They are only allowed access with permission.
- Therapy dogs are taught to interact with the public.
- Service dogs are taught to ignore the public and focus on their specific handler

Emotional Support Dog/Pet

- ESA's Emotional Support Animals are only recognized in New Brunswick. No other province in Canada recognizes emotional support animals.
- ESA's are not required to do any specific tasks. They have no specialized training, and they have no formal obedience training. Many lack the training to be certified as service animals.
- Their primary role is to provide emotional and psychological support to their owners at home.
- They have no legal rights to accompany their owners into public areas like service dogs.
- They are a pet that has no specialized training and whose presence provides comfort to their owner.

Service Dogs

Service dogs are trained for a specific job for their handlers.

- The first role of a service dog is to pay attention and do the alert and or task required to assist their handler, something that they can't do on their own.
- **A task** is a specifically trained behaviour that the Service Dog performs on a cue or command from their handler. For example: Pick up something that the handler has dropped and retrieve it for the handler.
- **An alert is** a specifically trained behaviour that the Service Dog performs on a non-directed cure from the handler. For example, an anxiety alert is obtained from a change in heartbeat, sweat, action or chemical change in the body.
- Service dogs are allowed in all public areas and must accompany their handlers everywhere they are looked on as a piece of medical equipment.

Indications and Usage

To qualify under the legislation for public access with a service dog, two criteria must be present in the patient:

- 1. The patient must meet the criteria to be diagnosed with a disability
- 2. The symptoms of that disability must be specifically mitigated through the trained behaviours of the service dog.

Criteria: 1

The patient must meet the criteria to be diagnosed with a disability in their province of residence.

There are a minority of patients who seek to be prescribed a service dog that does not qualify for the diagnosis of a disability in the province where they live. They may falsify their symptoms to obtain a prescription. Reasons for falsifying/overstating symptoms can include but are not limited to; wanting their pet dogs to fly in the passenger cabin of airplanes with the, wanting to have their pet live with the in non-pet housing, or enjoying the company of the pet in public.

It is also important to note that a patient reporting they "feel better" with a dog in public is not a criterion for a disability that would warrant the prescription of a Service Dog.

The presence of a mental or depressive disorder does not necessarily mean that a patient's symptoms qualify as a disability that requires a Service Dog. These qualifications often include how the symptoms impact the patient's ability to engage in activities and participate in society.

Criteria: 2

The symptoms of that disability must be specifically mitigated through the trained behaviours of a Service Dog.

PTSD - Post Traumatic Stress Disorder

- Interruption of recurrent, involuntary and distressing memories of the event
- Reduction in distressing dreams or sleep disturbances night terrors
- Interruption of dissociative reactions
- Reduction in physiological or psychological distress (through redirection) at exposure to reminders of traumatic events
- Reducing stress during exposures to previously avoided situations by providing physical distance between the patient and the situation (blocking people by using the Service Dog)
- Reduction in negative emotional stress
- Increase in the ability to experience positive emotions
- Redirection of irritability and or anger
- Reduction of hypervigilance.
- Interruption of harmful behaviours

Anxiety Disorders

- Interruption of worry behaviours
- Reduction of symptoms of Panic
- Counter Balance for dizziness or lightheadedness or faintness
- Increase in the feeling of being able to cope with panic reactions
- Redirection of fear of social situations to a positive reminder –(the dog)
- Reduction in feeling trapped

Depressive Disorders

- Increase positive affect
- Reduction of insomnia or hypersomnia through the prompting of waking or going to sleep
- Decreasing feelings of worthlessness
- Interruption of harmful behaviours

Physical disabilities

- Assisting with balance
- Grasping or grabbing, retrieving objects
- Carry objects, placing objects
- Opening and closing doors
- Turning on and off light switches
- Assisting with wheelchair operations
- Obtaining assistance in case of emergency

Contraindications

There are situations where a service dog must not be prescribed or used for safety reasons.

Violent or Abusive Behaviour

Service dogs are contraindicated when the patient has a history of violence or abuse towards animals. If violent behaviour towards humans or animals has occurred at any point in the patient's life and is related to low frustration tolerance or becoming overwhelmed by emotions, a service dog must not be prescribed.

Active Psychosis

A service dog is contraindicated for patients currently experiencing active psychosis.

History of Abusive Behavior Towards Minors

Service dogs must not be prescribed to individuals who have a history of perpetuating physical or sexual abuse towards minors, as this represents both a risk to the safety of the dog and a threat to the public if the dog could be used as a lure for minors. (Note: A Vulnerable Sector Check can be used to determine if this contraindication is present)

Use of Dog for Aggression

A service dog must not be prescribed to or used by patients who wish to have the service dog act as an aggressive deterrent to perceived threats.

Example: A dog trained to attack or look aggressive on cue from the patient.

Inability to interact with the dog using Humane Methods

Service dogs must be trained and handled using Humane Methods.

Service dogs are contraindicated with patients who feel that force, pain or discomfort are training methods to be used with a dog. Representatives from the Canadian Veterinary Medical Association have determined that harsh, aversive training methods are inappropriate in the training of a service dog as they have a high likelihood of causing unstable and unsafe behaviours in a dog. Improper methods include but are not limited to: yelling at the dog, hitting, pinching, pushing, and 'alpha rolls.' Furthermore, patients with a psychiatric diagnosis are at a high-risk level to use these tools to be very harmful to the dog.

Precautions

Before prescribing a service dog, the following factors should be assessed to determine suitability.

Worsening of symptoms

Patients whose symptoms are worsened by spontaneous interactions with strangers in public will likely struggle to work with a service dog. Evidence indicates that using a service dog significantly increases the number of strangers in public who approach and initiate conversations (that can range from friendly to aggressive interactions).

A patient must manage conversations with strangers in public without worsening their symptoms before being prescribed a service dog. Patients must be able to participate in public outings with assistance. Homebound patients, a Service dog is counter-indicated a pet or companion animal may help those patients who are homebound or agoraphobic.

Timing during the treatment of Service dogs is only effective if prescribed when a service dog's presence will enhance the patient's ability to function.

A patient must be able to perform a task (even with great difficulty or assistance) prior to being able to benefit from a service dog.

Example: A client cannot go outside for a walk in their neighbourhood but feels that they would do it if they had a dog = unsuitable time in treatment.

A client is able to go outside for a walk in their neighbourhood, but only with a safe person = possibly benefit from a service dog

The patient's symptoms must not be volatile to the point where the patient may be regularly unable to care for the service dog (such as recent or high likelihood of future hospitalizations, emergency room visits, police interactions, substance treatment center admissions or similar events).

Ability to care for a dog

The patient must be able to demonstrate that prior to prescribing the service dog, they are able to meet the care needs of the service dog. This Duty of Care includes but is not limited to financial (minimum \$100/m), dietary requirements (maintaining the service dog at an appropriate body mass index/non-obese), physical/exercise needs (walk or jog minimum 30 minutes per day), emotionally (being able to show the service dog respectful, positive regard) and intellectual (maintaining the dog's training for a minimum of 30 minutes per day). An inability to meet these criteria indicates that this is an unsuitable time to prescribe a service dog.

Consistency in training

A patient must have the capacity and insight to maintain the service dog's training. This includes being able to consistently apply cause and effect relationships and take actions to maintain the training of the dog. Failure to do so will result in the degradation of the effectiveness of the service dog.

Example: If the service dog is trained to alert when the patient is anxious by bumping their hand, the patient must be able to react to this by focusing on the service dog and providing a verbal or physical reward for the service dog behaving correctly.

Stability of medication

A variety of prescribed and non-prescribed medications may be used to manage symptoms of PTSD. To handle a service dog safely, a patient must be free of substances that may cause significant behavioural variability. Instability of medications can occur by changing or significantly adjusting medication or if a patient is over-using a medication / self-medicating substance use (such as marijuana or alcohol). A potential handler of a PTSD service dog must have the stability of medication use to ensure that the service dog is safe and treated appropriately.

Effects of having a Service Dog

Increase in daily care activities Having a service dog introduces an increase in the daily care activities for the patient in caring for the dog. This includes feeding, toileting, exercise, grooming and maintenance training. As these activities must occur every single day, a patient must have a support plan in place for an individual/group who can assist in these tasks when the patient is unable to.

Distress tolerance and stress level

The average wait time to obtain a service dog for psychiatric disabilities is two years, and this waiting period can cause stress in the patient. A client must have strong distress tolerance skills to manage the stress of being on a long waitlist for a service dog.

In the early stages of working with a service dog (first six months), the patient's stress level often increases due to the adjustments and requirements of working with a service dog. A patient should have significant distress tolerance skills before being prescribed a service dog. During the initial period of training, there is increased stress. It is essential to have ongoing, in-person training support from weekly therapy sessions, individual or group and the service dog placement organization/individual for the lifetime of the working team.

Type of Intervention

Service Dogs

A Service Dog can be a life-changing intervention for a patient with a disability. However, not every patient who wishes to benefit from a dog is a suitable candidate for a service dog. There are prerequisites needed to ensure the health and safety of the service dog and the public, and service dogs represent considerable investments of time, energy and finances, from the process of acquiring the service dog through the entire working life of the dog (approximately 8-10 years).

Pets

Many of the benefits of a service dog can be achieved through pet ownership. Pet ownership has been shown through research to support self-efficacy and strengthen a sense of empowerment, serve as 'family' or support, provide connections in social avenues and provide empathy.

Emotional Support Dogs/Companion Dogs

'Emotional Support Dog' is a vague term that refers to a pet dog that the owner finds comforting that is granted various access rights, depending on the jurisdiction (only recognized in New Brunswick in Canada). Many of the benefits seen with pets can be seen with Emotional Support Dogs, and handlers report they provide a sense of comfort. They may be allowed rights to non-pet housing or transportation, depending on where the handler resides. Currently, in most provinces, ESA cannot be used on public transit.

Risks with Emotional Support Dogs The difficulty with this term is that there is no training or behavioural standards for an Emotional Support Dog. This can cause severe consequences for the dog, the handler and the public. Public Transit is one of the most challenging situations to train a dog to work in, and the lack of training standards for Emotional Support Dogs has resulted in several airline passengers being bitten by Emotional Support Dogs on airplanes and cases of the dog itself having reported 'panic attacks' while in flight. (as of 2021, ESA are no longer allowed on flights)

The additional benefits to an Emotional Support Dog (above pet ownership benefits) do not outweigh the risks to the public. A Service Dog should be used if a patient feels they need an Emotional Support Dog for public transit reasons. A service dog has indicated if the patient requires the dog to perform specifically trained behaviours to help mitigate their disability in public.

A **pet dog** is indicated when the patient requires emotional support, comfort, companionship and gentle prompts for increased physical activity or social interaction. A Service dog is indicated if the patient feels that a pet dog is not a strong enough intervention and advocates that an Emotional Support dog is required for tasks during public outings.

Determining if a Pet or Service Dog is the right choice. Evaluation Questions

1.	 Does the patient have symptoms that would pose a risk to the health or safety a dog? Including a history of mistreatment of animals or active psychosis. 					
		(if yes no	dog is suitable) Yes	No		
2.	Does the patier aggression?	nt intend to use the do	ng for aggression or the	threat of		
		(if yes, no	dog is suitable) Yes	No		
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3.	Does the patier disability?	nt have symptoms that	t qualify as a formal dia	gnosis of a		
4.	Can their symp	ω22	y be s suitable) Yes ough a service dog's tra	Noined tasks?		
		(if no a pet dog may	y be s suitable) Yes	No		
5.	Is the patient a handling a serv	ice dog?	rease in public interaction to be s suitable) Yes	on that comes with		
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6.	Is the patient a training of a se	rvice dog?	their actions to mainta y be s suitable) Yes_	in the high level ofNo		
Total	number of Yes	Total N	lumber of no			
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Determining if the patient is ready for a Service Dog

 Does the disability treatment professional feel that the patient is at a point of their treatment where they may benefit from a service dog, including the patie having adequate distress tolerance and stress management skills? 	ent
(if no not ready) YesNo	
Does the patient have the emotional, financial, and physical exercise ability to meet the needs of a service dog?	
(if no not ready) YesNo	
3. Are there clear treatment goals that will ensure the service dog improves symptoms and reinforce adverse conditions?	
(if no not ready) YesNo	
If you answered yes to the questions above, the patient may benefit from Service Dog Method of Acquisition of a Service Dog — Fully trained or Owner train 1. Can the patient be consistent in their actions, have control over their emotions reactions and follow stepwise instructions with support? (if no, needs a trained dog) YesNo	
 Does the patient entering a training program, and has the dog being used, be screened professionally for temperament, health and working ability? Yes √ K-9 Country Inn Working Service Dogs 	l
3. Does the patient have support from a Training Professional? Yes √ K-9 Country Inn Working Service Dogs The support of th	

If you answered **yes** to questions 2 and 3 above, the patient would be eligible for K-9 Country Inn's owner train program and **no** to question one; the client would be eligible for a program-trained dog from K-9 Country Inn Working Service dogs.

If you answered **no** to all the questions above, the professional should not recommend or issue a letter stating that the client is ready for a service dog

NOTES

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Skills ment Skills dog if the patient cannot dog if the patient dog if the patient cannot dog if the patient dog if the patient cannot dog if the pa	Tolerance				,-						
4. Client is prepared to manage a Service Dog's Financial Dietary Exercise Needs Grooming costs and needs requirements 5. Select THREE (3) TO five (5) PTSD tasks /alerts that would help the patient rank 1-5 most to least needed	Skills						dog if th	e patient			
Financial Dietary requirements Exercise Needs Grooming costs and needs requirements Emotional needs 5. Select THREE (3) TO five (5) PTSD tasks /alerts that would help the patient rank 1-5 most to least needed							cannot				
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needed	requirements requirements		and need		requirements						
	5. Select THREE (3) TO five (5) PTSD tasks /alerts that would help the patient rank 1-5 most to least needed										
Intrusion Avoidance Negative Alterations Hyperarousal			Avoidar	nce Negative Altera		tions Hyper		Hypera	rousal		

Nightmare interruption Dog nudges, removes blankets or wakes up patient	Dog solicits petting during internal or external exposures creating correctiv learning	DPT dog lays across/pressure therapy	Alert to irritable behavour, nudge/solicit petting				
dog nudges or paws patient when they dissociate	Providing space between patient and expousre situation, facilitating patient tolerance ie: crowds		Cue patient to use therpeutic breathing skills coping mechanisms Dog assists patinet in redirection focus from anxiety/hypervigilance				
Rest head or body on lap heavy pressure	Dog pushes into patient dureing exposures to reduce	positive interactions or exercise	trigger				
when patient is triggered Deep Pressure Therapy	distress DPT deep pressure therapy	Other:	Other:				
Placement considerations							
Liviing situation: Rent Own	Pysical Activity Level Zero Stays at home Low/ Minimal Moderate High	Any Dog behaviours that may trigger Symptoms	Mobility Restrictions please explain.				
Client has been advised of risks of attempting to train their own pet without the help of training School							

K-9 CINB Working Service Dogs→ is utilizing the Service Dog Prescriber Guidelines - March 4,2019 – written by Kristine Aanderson, Registered Psychologist KristineAandersonPsychologist@gmail.com

If you have any questions, please feel free to reach out us.

