

## Sample Policy on Resident's Live-In Animal

This policy establishes guidelines for responsibility for an animal that lives with a resident of a long-term care facility.

- Coordination of living arrangements, questions or problems must be made with the animal care coordinator, \_\_\_\_\_.
- Before entering the facility, the animal must be in good health and must have received appropriate vaccinations as determined by a veterinarian. While living in the facility, the animal must be taken for regular well-pet visits to the veterinarian's office. Any trips to the veterinarian's office will be handled by \_\_\_\_\_ at his or her own expense.
- If an open wound is found on the animal's skin, it should be examined by a veterinarian. If the wound is infected, and the resident is immunocompromised, it may be necessary for the animal to remain at the veterinarian's office or to be housed elsewhere until the skin heals.
- The facility will not be responsible for any supplies needed by the animal. All supplies for the animal will be purchased by \_\_\_\_\_ at his or her own expense.
- The facility will not be responsible for daily care needs of the animal. Daily care needs include feeding, grooming, exercise, cleaning animal rest areas, and disposal of waste. Waste must be disposed of each day and the room kept odor-free. Management of the animal's daily care needs will be the responsibility of \_\_\_\_\_.
- The animal must be kept in a secured living area. In the event that the animal gets loose, retrieval of the animal will be the responsibility of \_\_\_\_\_.
- If living quarters are shared, any roommates must be consulted and give consent for the animal to reside in the same room. If a roommate is not able to give consent, the roommate's family will be contacted. Consent is given by: \_\_\_\_\_.
- It will be the determination of the facility when a resident is no longer able to care for or live safely with the animal. At that time, \_\_\_\_\_ will take the animal home.
- The animal will be brought in on a trial basis for two weeks. In the event that the animal has an untreated health problem or unmanageable behavioral problem, the facility has the right to ask that the animal be removed.

I understand the policy stated above and will abide by its specifications.

Signature: \_\_\_\_\_  
(Resident/family member)

Signature: \_\_\_\_\_  
(Facility representative)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

(This form was adapted from one used at The Tacoma Lutheran Home and Retirement Community in Tacoma, Wash.)