PRINCE GEORGE'S COUNTY, MARYLAND
FIRE/EMERGENCY MEDICAL SERVICES DEPARTMENT GENERAL ORDER

General Order Number: 08-25	**Effective Date:** November 26, 2018
Division: Health and Safety	
Chapter: Emergency and Non-Emergency Service to Citizens with Service Animals	
By Order of the Fire Chief: Benjamin M. Barksdale	**Issue Date:** November 26, 2018

POLICY

This General Order is intended to establish guidelines for employees and volunteer members of the Prince George's County Fire/Emergency Medical Services (EMS) Department when providing services to citizens with Service Animals. It is the intention of the Fire/EMS Department to provide a consistent level of high quality service to citizens with disabilities and remain in compliance with the Americans with Disabilities Act (ADA).

DEFINITIONS

American with Disabilities Act (ADA) – A federal civil rights law which prohibits discrimination on the basis of disability in the areas of employment, access to public and commercial facilities, transportation, telecommunications and the use of public services.

Individual with a disability – (For purposes of accommodation under the ADA); A person with a physical or mental impairment that substantially limits one or more major life activities, or a person who has a history or record of impairment. The ADA does not specifically name all of the impairments that are covered.

Service Animal – A dog that is individually and professionally trained to do work or perform tasks for the benefit of an individual with a disability including physical, sensory, psychiatric, intellectual, or other mental disabilities. In some cases, miniature horses are permitted to be used as Service Animals.

Emotional Support ("Companion or Therapy") Animals – An animal (typically a dog) generally used to provide emotional support to an individual. An emotional support animal does not have the same legal considerations and protections as ADA Service Animals.

Tasks – Actions performed by Service Animals for their disabled owners which include, but are not limited to, picking up items for individuals confined to a wheelchair, guiding those who are visually impaired, and alerting individuals with disabilities to oncoming dangers or medical events.

Service Animal Trainer – A person who trains Service Animals for individuals with disabilities. This person can be either a professional or volunteer.

Threatening Behaviors – Uncontrolled behaviors exhibited by a Service Animal which include but are not limited to off-task barking, growling, jumping up and down, jumping on, and/or attacking other persons or animals.

PROCEDURES / RESPONSIBILITIES

I. General Provisions

A. Citizens with disabilities who use Service Animals to assist them in their day-to-day activities have increased in recent years. All employees and volunteer members should become familiar with the rights of individuals with disabilities according to the Americans with Disabilities Act (ADA), including the use of Service Animals. Familiarization with the ADA, as well as State and County laws, will assist responders in accommodating citizens with Service Animals in both emergency and non-emergency settings. A person who illegally interferes with the use of or access to a citizen's Service Animal can be subject to a misdemeanor and fine.

B. County law prohibits bringing an animal into a public building, land, or grounds owned by the County. Service Animals are exempt from this rule. Prince George's County Code §14-139.04.

C. As a public entity, neither the Department, nor any of its employees or volunteers, are responsible for the care or supervision of a Service Animal. However, when providing assistance or allowing access to public places such as County buildings or events, the Department must allow the presence of Service Animals with their disabled owners or trainers, as long as the owner ensures that the animal is under control, secured (i.e. leash, tether, etc. unless it would interfere with the animal's ability to perform its tasks) and housebroken.

II. During Emergency Service

A. Identification of Service Animals during emergency medical care: When providing emergency medical services, providers may not be able to quickly identify Service Animals. According to the ADA, these animals are required to be professionally trained but do not need to possess any specific registration or documentation other than the legally required registration for all animals under County/State law. In most interactions, there will be no particular identifying marker suggesting the animal is a Service Animal (i.e. collar, vest etc.). The only initial indication that the animal is a Service Animal is the owner who is making the claim. In these instances, providers are permitted by law to ask *only* two questions, if it is not readily apparent what the animal is trained to do:

1. **Is the dog a Service Animal and required because of a disability?**

and/or

2. **What work or task has the dog been trained to perform?**

Providers should *not* ask for any documentation about the disability, the animal's training, or make additional attempts to ascertain proof by asking about the patient's disabilities. Questions about the patient's disability should be strictly related to the patient's medical event, and should be clearly documented in the Patient Care Report as an inquiry that directly correlated to the patient's medical assessment and care. Anything of note regarding the Service Animal should be documented in the PCR (i.e. answers to the above questions, description of the animal, any separation/reunion with owner, alternate transport or care arrangements, etc.).

B. Considerations for Transporting Patients with Service Animals:

1. Control of the Service Animal: The Service Animal should be under the safe control of the patient or owner and should not present a distraction or obstruction to patient care.

2. Secure Animal for Safety: The animal can be secured with items such as a leash or a cage, if available, and if it is safe for transport. If transporting the patient from their home, look around and ask the patient for these items before moving or potentially separating the Service Animal from the patient, if it will not delay patient care.

3. Resource Considerations: In the event the Service Animal cannot be transported in the ambulance with the patient, consider using an additional resource to transport the animal such as another apparatus that has been dispatched to the scene, an EMSDO, or the closest Battalion Chief if available. If it appears that the animal cannot be kept under control or otherwise safely transported, the patient should be given the opportunity to make alternate arrangements for the Service Animal's care, if he/she is able, such as a neighbor or family member to take custody of the animal. Do not delay or compromise patient care.

4. Loading and Unloading of Patients and Service Animals: For Service Animals that are being transported with a patient in an ambulance, it is recommended for the safety of the animal that the patient is loaded first, and that the stretcher is secured into the locking mechanism prior to loading and securing the animal. If the call for service is a motor vehicle collision, the owner may give permission to allow the animal to stay in the vehicle while loading the patient into the ambulance, which will allow it to regain its bearings before being loaded into the ambulance. Conversely, upon unloading, it is recommended that the Service Animal be unloaded first prior to unloading the patient, as long as this does not delay or compromise patient care. Ideally, a single provider who is not directly participating in patient care should be delegated to the responsibility of safely securing, loading, and unloading the Service Animal.

5. Notification to receiving hospitals: Notify the receiving hospital during transport through medical consult that a Service Animal is also being transported with the patient.

6. Guardians and Caregivers with Service Animals: Parents, guardians or caregivers with their own Service Animal who need to be transported with the patient should also be accommodated with all appropriate considerations for the safety of the animal and the priority of patient care. These circumstances should be documented in the Patient Care Report.

7. Reunite Service Animals with Owners: In all circumstances, providers should ensure that Service Animals are reunited with the owner or responsible party at an appropriate time, as soon as possible. Efforts should be made to have the Service Animal arrive at the hospital at the same time as the owner. The reunion should be documented in the Patient Care Report. If an immediate reunion is not possible, the person who is assuming care for the animal should also be documented in the patient care report.

8. Service Animal Trainers: Citizens who are Service Animal Trainers and in need of Fire/EMS services will receive all of the same considerations for accommodating the animal, regardless of whether they provide training on a professional or volunteer basis. Service Animal Trainers have the same rights of full access to public facilities, places, and public services while they are in possession of a Service Animal.

C. Denial of Service Animal Transport: It is generally expected that providers make every effort to facilitate the transport of Service Animals with their owner. However, there are circumstances in which a provider can legally deny transporting a Service Animal when the following conditions are present:

1. The owner (typically the patient with the disability) is unable to control the animal because of his or her medical condition, including, but not limited to, being unconscious, or being in an altered mental status.

2. The owner is both unable to articulate what task the animal can perform and the animal presents an obvious safety risk and disruption to patient care.

3. The space in the transport unit will not allow for optimal treatment of the patient and safe transport of the animal, and/or the time involved in attempting to make these arrangements will be detrimental to patient care.

4. The Service Animal exhibits aggressive or threatening off-task behavior that the owner is unable to control, has had a history of aggressive and threatening off-task behavior, or the animal is not housebroken.

When a Service Animal is denied transport with his/her owner, verbal notification should be made to the Battalion Chief on duty at the time of decision. If the Battalion Chief believes the decision was made in error, he/she should make arrangements for correction as soon as possible. The provider should also complete and submit the Denial of Transport of Service Animal Form (Attachment #1) to the Emergency Medical Services Office by completion of their tour of duty. The Patient Care Report should also clearly specify why the decision was made to not transport the animal to the hospital with its owner.

D. Injuries to Both Owner and Service Animal: In the event of injuries to both the owner and Service Animal, attempts should be made to find out the name of the animal's veterinary hospital. If the owner is unable to provide this information because of his/her medical condition, do not delay or compromise patient care attempting to obtain this information. Seek the assistance of other Fire/EMS responders on scene, police, EMS Duty Officer or Battalion Chief to coordinate the safe and responsible transport of the Service Animal to the owner's preferred veterinary hospital if known, or a local 24-hour emergency veterinary hospital. Animal Control should only be contacted as a last resort for assistance in extreme cases, if needed. Documentation specifying who is assuming the coordination of care for the Service Animal, as well as the name and location of the veterinary care facility, should be documented in the Patient Care Report.

III. During Non-Emergency Service

A. Visitors in Fire/EMS Department facilities: All visitors with disabilities and Service Animal Trainers who are in possession of Service Animals are welcome to visit Fire/EMS Department facilities and attend events that have been made open to the public. If there is any question as to whether it is a Service Animal, employees/members are permitted to ask the owner or handler of the animal the same two questions:

1. **Is the dog a Service Animal and required because of a disability?**

and/or

2. **What work or task has the dog been trained to perform?**

B. Service Animals and their owners should be compliant with the same ADA guidelines as explained above.

REFERENCES

Americans with Disabilities Act, 42 U.S.C. §12101 et seq.

Americans with Disabilities Act, Title II Regulations, 28 C.F.R. 35.136 Service Animals

Maryland Annotated Code, Human Services Article, Title 7 - Individuals with Disabilities, §7-701 *et seq*.

Maryland Annotated Code, Local Government Article, §13-104 Service Animals.

Prince George's County, Maryland Code of Ordinances, Subtitle 14 – Morals and Conduct, §14-139.04 Animals in Public Buildings.

Brainard, Criss. EMS Transport of Service Dogs and Support Animals. Journal of Emergency Medical Services, Vol. 42 (Issue 7). Retrieved June 4, 2018 from http://www.jems.com/articles/print/volume-42/issue-7/features/ems-transport-of-service-dogs-support-animals.html?c=1

U.S. Department of Justice, Civil Rights Division Guidance: Frequently Asked Questions about Service Animals and the ADA, July 20, 2015

FORMS / ATTACHMENTS

Attachment #1 – Denial of Transport of Service Animal Form

PRINCE GEORGE'S COUNTY, MARYLAND
FIRE/EMS DEPARTMENT

Denial of Transport of Service Animal

Instructions: This form is to be completed whenever a service animal is denied transport with a patient and transport of the service animal is not obtainable by a secondary means (another vehicle, police, EMS Duty Officer, etc). Denial to transport a service animal can only be made during extenuating circumstances such as a direct threat to patient or crew safety. The completed form is to be submitted to the EMS office. A copy should also be provided to the patient.

Name of Patient:			
Service Date:			
Direct Threat Posed by Animal:			
Action Taken:			
Signature of Crew Member:			
Date:		**Time:**	
Signature of Patient/Handler/ Representative:			
Date:		**Time:**	