



HAVEN

COUNSELING COLLECTIVE

Informed Consent and Release of Liability

ANIMAL ASSISTED THERAPY

Clients with Haven Counseling Collective (HCC) have the option to engage in animal assisted therapy with our therapy dog, Charlie. Numerous studies have shown that interacting with animals helps with lowering blood pressure, increases engagement in the therapeutic session and can reduce anxiety and depression. This consent form outlines the risks, benefits and guidelines needed to ensure your health and safety (as well as Charlie's) as you work together with your therapist.

Charlie has been and will continue to be in training with a professional therapy dog trainer. While Charlie has completed his first test (the Canine Good Citizen test) toward becoming a therapy dog, he does have various tests ahead of him. Incorporating him in working in conjunction with an HCC therapist is the next step in him gaining the skills needed for his next therapy dog test.

BENEFITS OF ANIMAL ASSISTED THERAPY:

There are many benefits associated with working with therapy animals. Some benefits that have been found in utilizing therapy animals include:

- Animals help improve motivation and engagement in therapy by providing a sense of security and emotional support.
- Animals can promote relaxation. Research has demonstrated that petting an animal can help lower blood pressure, heart rate, and increases oxytocin (a feel-good chemical in the brain).
- Animals can help the client learn frustration tolerance and other anger management techniques.
- Animals can help in the areas of focus and attention.
- Animals offer humor and fun due to their playful nature.
- Animals in therapy ask for clients to develop empathy, nurturance, and responsibility, and model other skills like forgiveness and patience.

POSSIBLE RISKS:

- You may opt to not have Charlie in your sessions. Initial here if making that choice: _____
- While Charlie has been screened by a veterinarian before commencing work as a therapy animal, animals do sometimes carry disease. Because your contact is minimal, this risk is very small. Charlie is up to date on all of his vaccinations.
- Charlie is not considered a "hypoallergenic" dog meaning there is a risk of an allergic reaction. Please let your therapist know if you typically have allergies to animals.
- If you have a fear of dogs (however mild) then animal assisted therapy may not be appropriate for you. Let's discuss potential risks & benefits prior to the start of our work together.
- While your therapist will be looking out for your welfare as well as Charlie's, it is important to remember that Charlie is an animal & as such can be unpredictable. Charlie is a gentle and affectionate dog, however, scratches, jumping, mouthing & unwanted kisses are all possible, especially during his early training.
- Animals have individual rights, just as each client has rights. Charlie gets to decide how & when he participates in the sessions. It is important for everyone's benefit (as well as safety) that he is not coerced or mistreated. He typically greets people enthusiastically & then sleeps.
- When scheduled to participate in an animal assisted therapy sessions, you may not bring your own

- o animal to also be involved in their therapy session.
- o Confidentiality is important to Charlie. He won't talk about you, but it is possible he may recognize you outside of a session. Don't worry, he is friendly with most people, so no one need know that he actually knows you.

While some common risks have been listed, all potential risks cannot be foreseen. By signing below you are stating your acceptance of the above rules & risks and agree to accept full liability in the event that Charlie harms you or anyone else involved in your therapy over the course of treatment or as a result of treatment. By signing this form, you are releasing Haven Counseling Collective and all affiliated clinicians from any liability should any injury occur as part of your animal assisted therapy.

STATEMENT OF UNDERSTANDING

I understand that I have a right to a copy of this agreement. Any and all questions, I may have had, have been answered to my satisfaction. **I have read, understand, & agree to abide by this agreement & consent to participate in animal assisted therapy with a trained Haven Counseling Collective therapist.**

I, _____ hereby agree for myself to hold all affiliated clinicians with Haven Counseling Collective ("Releasees") harmless from any and all claims and/or damages (including medical fees and attorney fees) and causes of action of any nature for any and all personal and/or bodily injury or illness, which may occur to myself or other individual present in my session or which may be aggravated or caused by the negligence of others while interacting with Charlie.

ASSUMPTION OF RISK

I, _____ individually, specifically assume any and all known and unknown risk of injury or illness, resulting from interacting with Charlie, which may include, but is not limited to: disease transmission, scratching, nibbling, heavy leaning, jumping, light brushing, and/or licking by Charlie, and any unknown or known allergic reaction.

I agree to abide by Haven Counseling Collective's office policies and procedures as they specifically relate to Charlie and his training as a therapy dog. If I have any questions as to conduct that is appropriate when interacting with Charlie, I agree to ask my clinician before engaging in such conduct.

If any injury and/or illness occurs while at Haven Counseling Collective, I, individually, hereby authorize an affiliated Haven Counseling Collective clinician to contact the medical professional listed below, or if the medical professional is unavailable or cannot be reached, to call 911 or the nearest hospital. I take full responsibility for my welfare and safety; and I hereby give permission for emergency medical treatment to be administered as deemed appropriate.

Name, Address and Phone number Information for Medical Professional:

I, _____, being informed of the above known risks, and acknowledging other potential unknown risks, have read the above waiver, and release. I understand that by signing this Agreement I am waiving certain legal rights.

Client Signature

Date

Therapist Signature

Date