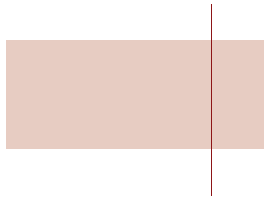


# Mobility assistance dogs for mobility-impaired people

SUMMARY

AGENCE D'ÉVALUATION DES TECHNOLOGIES  
ET DES MODES D'INTERVENTION EN SANTÉ





# Mobility assistance dogs for mobility-impaired people

## Summary

Report prepared for AETMIS by

**Myrlande Martin, Imen Khelia and  
Stéphanie Adam with the collaboration of  
François Pierre Dussault**

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The mission of the Agence d'évaluation des technologies et des modes d'intervention en santé (AETMIS) is to help improve the Québec health-care system. To this end, it advises and supports the Minister of Health and Social Services and decision-makers in the health-care system with regard to the assessment of health services and technologies. The Agency makes recommendations based on scientific reports assessing the introduction, diffusion and use of health technologies, including technical aids for the disabled, as well as the methods of providing and organizing services. The assessments examine many different factors, such as efficacy, safety and efficiency, as well as ethical, social, organizational and economic issues.

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# FOREWORD



## Mobility assistance dogs for mobility-impaired people

Presently, under the *Health Insurance Act*, the Régie de l'assurance maladie du Québec (RAMQ) gives visually impaired people a lump sum upon the purchase of guide dogs and an annual amount for maintaining the animals, which are provided free of charge by the MIRA Foundation, a not-for-profit organization.

The MIRA Foundation also provides mobility assistance dogs (MADs) to mobility-impaired individuals so that they can preserve or increase their independence. Over the past few years, reimbursement requests for the maintenance fees incurred by MAD users have been submitted to the RAMQ.

Wishing to know what the efficacy and safety of MADs are, as well as the anticipated cost to Québec's health-care system and the consequences of the presence of these dogs in public places, the Ministère de la Santé et des Services sociaux (MSSS) asked the Agence d'évaluation des technologies et des modes d'intervention en santé (AETMIS) to examine this matter.

A search of the scientific literature and other relevant works revealed a few studies with an intermediate or low level of evidence, based on their methodological quality. Together with the current statutes and regulations, mainly in the United States, this evidence is nonetheless sufficient for defining a broad range of services performed by MADs and putting forth several arguments in favour of recognizing the utility and safety of these dogs, both at home and in public places and health-care institutions, though certain precautions need to be taken in the latter two cases.

MADs must not, however, be placed hastily. If suppliers other than the MIRA Foundation are considered, they, too, must also use rigorous eligibility criteria for potential users and rigorous criteria for selecting well-trained dogs, then make a proper match between the user and the dog, which will be finalized with structured training sessions. As well, postplacement evaluations must be performed systematically, just as is done at the MIRA Foundation.

AETMIS concludes that mobility assistance dogs safely perform useful tasks for the mobility-impaired at a reasonable cost and recommends that a placement program along the lines of the guide dog program for the visually impaired be set up.

In submitting this report, AETMIS wishes to provide decision-makers in Québec with the information they need to guide policies and interventions relating to the placement of mobility assistance dogs with mobility-impaired people.

**Dr. Juan Roberto Iglesias**, President and Chief Executive Officer

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Occupational Therapist, and Program Development Advisor, Régie de l'assurance maladie du Québec, Québec, Québec.

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## CONFLICT OF INTEREST

None declared.

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1. <sup>\*</sup> When this report was being written.

# SUMMARY

## Introduction and context

Various types of dogs referred to as “service” or “assistance” dogs are used by people with disabilities. For a number of years now, mobility-impaired people have been using mobility assistance dogs (MADs), just as visually impaired or blind people use guide dogs. Requests for the clinical use of MADs, which is a relatively new phenomenon, are on the rise.

In Québec, the main supplier of assistance dogs is the MIRA Foundation, a not-for-profit organization (NFPO) that raises, selects, trains and places these dogs after evaluating the applicant’s abilities. The Assistance Dog Placement Program was set up by MIRA in 1992 in response to requests from people with severe mobility impairments. The purpose of MADs is to help people overcome upper- and/or lower-limb mobility and agility disabilities. The target clientele consists of people with mobility impairments that cause significant, persistent disabilities and who require assistance in order to function more independently in their day-to-day activities.

After they are selected, the dogs are trained to safely fulfill five specific assistance functions: grasping, bracing and transferring, support<sup>2</sup> and ambulation, pulling and alerting. These dogs can, in fact, fetch objects that are out of reach, open doors and actuate switches. If need be, they can serve as a brace for a handicapped person in order to help him or her change positions, get up after a fall or move from one place to another. They can also pull a wheelchair and help people with reduced upper-limb abilities overcome obstacles (edge of a sidewalk, an access ramp), or help maintain balance during walking. Lastly, they can attract the attention of passers-by in case of an emergency or a problem.

In Québec, as at the end of 2005, 340 people, including 30 children, were using a MAD placed by the MIRA Foundation. At the time, the foundation reported that it had a waiting list with approximately 100 requests, which was the same number as in 2001. MIRA assumes all the costs associated with raising, selecting, training, evaluating and placing dogs and with user follow-up. For their part, users have to assume the cost of purchasing the animal and the subsequent annual maintenance costs.

In 1998, someone with a mobility impairment made a request to the Ministère de la Santé et des Services sociaux (MSSS) and the Office des personnes handicapées du Québec (OPHQ), asking that MADs be included on the list of technical aids covered by the technical aid program administered by the Régie de l’assurance maladie du Québec (RAMQ). This individual requested coverage for the expenses incurred for these dogs, just as visually impaired or blind people who use a guide dog are covered for their expenses. A task force consisting of representatives from the MSSS, the OPHQ and the MIRA Foundation, which supplies assistance dogs in Québec, produced, in 2001, a report recommending the implementation of a mobility assistance dog placement program for the mobility-impaired. Various steps were taken, and they led the MSSS, in 2005, to ask the Agence d’évaluation des technologies et des modes d’intervention

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2. The support provided by an assistance dog fitted with a harness is similar to that provided by a support cane for walking and moving about. For people with degenerative diseases affecting locomotion or with muscle weakness, a dog can help them maintain their balance, change positions when getting up or lying down, or put back a limb that is out of place.

en santé (AETMIS) for a report. The request contained different questions about the efficacy and safety of MADs and the cost that covering the expenses associated with the use of these technical aids would entail, but also about the advisability of instituting a government MAD placement program for the mobility-impaired. The answers to these questions are the subject of this report.

## The MSSS's questions

The MSSS wishes to obtain from AETMIS a report on the advisability of instituting a MAD placement program similar to the guide dog program. The MSSS is presently revising the *Regulation respecting devices which compensate for a physical deficiency and are insured under the Health Insurance Act* and is to decide if MADs will be added to the list of covered technical aids. The questions concern the nature of the target clientele, the eligibility criteria, the cost projections five years after such a program would be instituted, the problems associated with the use of MADs in public places and schools, the pre- and postplacement evaluation procedures, the clinical utility evidence, and the advisability of putting quality control measures in place.

For the purposes of this report, the MSSS's questions were grouped into assessment objectives:

- 1) Gather evidence on the clinical efficacy, the safety and the cost of MADs.
- 2) Give an opinion on the definition of the target clientele and on the advisability of instituting a government MAD placement program.
- 3) Define the procedures for implementing such a program, if applicable.

## Data search method

A literature search on MADs was performed, and resource persons were consulted. The literature search focused on scientific, legal, regulatory and normative information. The search was carried by querying general (such as MEDLINE) and specialized (such as ABLEDATA) databases and targeted papers published between January 2000 and December 2006. The references in the publications retrieved were manually searched, which yielded papers dating from 1988 to 1999. More than approximately 100 articles were found, and about 30 of them were selected for the purposes of this report. Ten of these articles concerned MAD performance. Several other documents, mainly of a regulatory or normative nature, were obtained from the Internet.

For the purposes of this assessment, the identified studies had to mainly concern mobility assistance. Thus, articles that primarily dealt with psychosocial effects (socialization, self-esteem, etc.) were not systematically selected. In the articles that were chosen, different variables were added to mobility assistance, such as the risks, difficulties and problems associated with using canine assistance; the cost of purchasing and maintaining dogs; and the decrease in the amount of human assistance required. Other documents were obtained by contacting different organizations, such as the MIRA Foundation, the MSSS and the OPHQ.

## Conceptual framework

The gathered data were examined on the basis of two complementary conceptual frameworks. First, the model of the International Classification of Functioning, Disability and Health (ICF-2) of the World Health Organization (WHO) was used. However, since it is not entirely applicable to the context of this report, this model was complemented by the systemic human development model known as the "handicap

creation process” (HCP), which is more widely used in Canada and Québec. It is based on interaction between factors intrinsic to the individual (organic system, attitudes, identity) and factors that are extrinsic (social factors, such as the support and attitudes of friends and family, physical factors, which refer more to technological or natural means of assistance, such as technical aids and MADs). As helps or hindrances, these factors can facilitate or hamper the individual’s life habits, specifically, the performance of the activities of daily living (e.g., eating, personal hygiene, travel, household maintenance, communication) and exercising social roles developed by the individual (e.g., interpersonal relationships, jobs, leisure-time activities).

Will canine assistance constitute a help here for the mobility-impaired? Will it have a positive impact on «personal factors», specifically, by facilitating grasping-, mobility- and agility-related functions? Will MAD assistance also have a significant effect on these individuals’ life habits, mainly by facilitating their motor activities (walking, maintaining balance), their activities of daily living (dressing, household chores), but also their social activities and psychosocial roles (e.g., leisure-time activities)? It is these questions that this report will attempt to answer.

## Results

The literature review provided data on the typical clientele, the clinical utility of the canine technical aid and the risk associated with its use, as well as on the legal, regulatory and normative framework in several countries and Canadian provinces. Consultations with various specialized organizations yielded information on the current clientele, the costs, the placement and evaluation criteria, and quality control for the raising, training, placement and performance of these dogs. This section looks at the clinical efficacy, safety and costs and only broaches the question of the target clientele. This question, like those concerning the advisability of a government MAD placement program and the procedures for implementing such a program, if applicable, will be examined in the section entitled “Discussion”.

Of the 10 publications on MAD performance, nine are scientific studies, four of which are retrospective. The identified studies provide an intermediate or low level of evidence, given their methodological quality. Two publications are literature reviews.

## Clinical efficacy

The clinical efficacy of MADs translates into functional and psychosocial improvements. From a functional standpoint, MADs seem to effectively fulfill the functions for which they are trained by increasing the user’s level of independence, specifically, grasping, bracing, transferring, support for walking and moving about, and pulling. Several studies play up the fact that MADs have positive psychosocial effects on users: an increase in their self-esteem, sense of security, and social activities and interactions, and an improvement in their psychological well-being. From an economic standpoint, MADs result in decreased use of other types of technical aids. Furthermore, their help leads to a substantial decrease in the number of hours of human assistance required by the user.

## Safety

The safety of MADs has been examined with regard to the risks that users incur and those posed by the presence of the animal in public places. Some information was found in the literature. It concerns the dogs’ behaviour problems, the difficulty in caring for the animals appropriately, their becoming distracted in public places when they are on duty, and the health risks that their presence can carry. On the whole, the situations that may

entail a risk (the animal's behaviour) are minimal, according to the publications on this subject. In addition, the quality control that the MIRA Foundation carries out on MADs, both the selection and training procedures and the placement and postplacement user follow-up procedures, help minimize these risks. There is no evidence in the literature of problems posed by the presence of MADs in school environments. However, there are options for getting around the potential difficulties (such as phobias and allergies in the other children). The evidence reviewed on this topic is empirical and comes from the experience acquired by MIRA during its postplacement follow-up procedures in the user's natural environment. These opinions are positive, both at MIRA and in school environments (students, parents, administration).

## Costs

By way of comparison, the RAMQ presently gives \$210 to visually impaired or blind people upon the purchase of a guide dog and a yearly allowance of \$1028 for maintaining the animal. This amount is 75% of the annual maintenance costs estimated by MIRA. The difference is assumed by the user. The MIRA Foundation assumes all of the costs associated with the dogs up until their placement (approximately \$20,000 for a guide dog and \$15,000 for a MAD). According to a 5-year projection based on MIRA's production capacity, the additional cost that expanding the current program for reimbursing guide dog maintenance expenses to include MAD maintenance expenses would be less than \$500,000 a year for the period from 2006 to 2010. According to this projection, the number of users would increase from 340 in 2005 to 425 in 2010.

The type of clientele targeted by MIRA is substantially the same as that dealt with in the literature, that is, people with mobility impairments that cause significant, persistent disabilities.

## Discussion

There are answers to the questions concerning the efficacy and safety of assistance dogs and the potential cost of an assistance dog placement program to the health-care system. Although it is of intermediate or low strength, the accumulated evidence converges to indicate that MADs are useful functional aids for people who use them and have a positive psychosocial impact. We also note that, in terms of safety, situations involving a risk do not constitute insurmountable obstacles or a contraindication to the presence of dogs at home or in public. The question of the cost to the health-care system has a factual answer. It is similar to the cost assumed by the RAMQ for guide dogs, and the 5-year projection of this cost seems to be within reasonable limits. Indeed, the number of placements is limited by the number of dogs produced each year by the current supplier, and the not-for-profit nature of MAD production would not likely encourage the emergence of many new suppliers.

The answer to the question concerning the eligible clientele is the compulsory certification of the mobility impairment by a physician. The definition used by the Ministerial Program for Assistance for Daily and Domestic Living for potential candidates could, in large part, serve as a model for MAD eligibility. Placement should be based not on the diagnosis, but on the individual's needs and his or her specific inability to compensate. To identify this inability, an occupational therapist or any health or rehabilitation professional designated for this purpose by the institutions concerned performs an overall evaluation of the applicant and recommends the technical aid. This evaluation should preferably be based on a multidisciplinary approach bringing together the user and, if applicable, his or her main helper, the physician, the rehabilitation

professional (occupational therapist or physiotherapist, as the case may be) and a social worker, if necessary. It would be useful to establish clinical criteria validated by a consensus of experts to ensure the rigour and standardization of the evaluation process and thereby improve interevaluator reproducibility and test-retest reliability. Lastly, canine technical assistance should not be granted automatically to people who could achieve optimal independence with other technical aids offered by the existing government programs (funded by Income Security or the Ministerial Program for Assistance for Daily and Domestic Living).

The gathered evidence indicates that MAD performance depends on the rigour of the selection and training processes. The MIRA Foundation has considerable, unique experience in Québec in training MADs and has facilities that make for quality production tailored to the target clientele's needs. Other training organizations or schools should be certified only if they can provide evidence that their facilities are of equal quality and that they apply quality standards based on explicit criteria.

In this context, the task of training MADs should preferably be given to a single organization in order to facilitate quality control and avoid the problems that differences between dog training programs could pose (contents, length, trainers' competence, etc.).

In addition, the definition of the target clientele should be based on the typical profile of current MAD users, using the MIRA Foundation's placement criteria.

Furthermore, the legislative and regulatory framework for the guide dog placement program will need to be updated to include MADs. The answers provided in this report, not only with regard to quality assurance, but also with respect to the eligibility criteria for dogs to serve as MADs, the user eligibility criteria and the matching criteria, could be strengthened by examining the practices of organizations similar to the MIRA Foundation that are affiliated with Assistance Dogs International (ADI). Lastly, and with a view to guaranteeing the homogeneity and quality of the placement process and to thus ensure the program's continuity, it will be necessary to establish standards for raising, training and evaluating (standardized tests or tools, including exclusion criteria) assistance dogs, as well as matching criteria. These standards and criteria should be modeled on or even conform to international standards and programs.

## **Conclusions and recommendations**

There were three objectives to this report: 1) to evaluate the clinical efficacy, the safety and the cost of mobility assistance dogs; 2) to examine the advisability of instituting a MAD placement program and define those individuals who could benefit from it; and 3) to propose procedures for implementing such a program, if applicable. On the basis of the gathered scientific and regulatory information and the current practices, the Agence d'évaluation des technologies et des modes d'intervention en santé (AETMIS) draws the following conclusions:

### **1) With regard to efficacy and safety:**

The use of a mobility assistance dog can enhance, on a daily basis, the functional independence of a mobility-impaired individual and appears to be safe, both for the user and those around him or her. In addition, the interest in this specific assistive modality can only increase, since it can replace a number of technical aids, thus resulting in cost savings for the health-care system and user. No technical mobility aid can be used to perform as many daily activities and social roles (life habits), while at the same time reducing the burden on helpers, as an assistance dog.

2) With regard to the cost to the health-care system:

The cost of purchasing and maintaining a dog may be an obstacle for mobility-impaired people who might otherwise benefit from canine technical mobility assistance. Coverage of the purchase and annual maintenance costs by the public health insurance plan will improve access to this assistive modality in accordance with the principles of universality, access and equity, on which the health-care system is founded.

3) With regard to the implementation procedures:

The definition of the eligible clientele could be modelled after that used in the Ministerial Program for Assistance for Daily and Domestic Living and be rounded out with criteria similar to those used by the MIRA Foundation. Clinical placement criteria could be established in order to improve the rigour and standardization of evaluations of mobility assistance dogs and their users.

There does not seem to be any major contraindication to using mobility assistance dogs, and their presence in public places (restaurants, schools, etc.) seems to be a given in our society. However, it will be necessary to examine the definition of “public place” given in Section 15 of the Québec Charter of Rights and Freedoms, which seeks to eliminate any restriction on access to public places, and outline the exceptions that could create problematic situations.

**Based on these conclusions, AETMIS recommends:**

that mobility assistance dogs be added to the list of technical aids covered by the program administered by the RAMQ under the *Health Insurance Act* and that the *Regulation respecting devices which compensate for a physical deficiency* be amended accordingly.

The addition should be made under the following conditions:

- 1) Establish user eligibility criteria, eligibility criteria for dogs to serve as mobility assistance dogs, and matching criteria in collaboration with the main stakeholders in this dossier, namely, the MIRA Foundation and the Office des personnes handicapées du Québec. The eligibility criteria must be defined on the basis of the target clienteles' disabilities.
- 2) Take into consideration the additional contribution by way of the assistance provided by a dog well trained in line with the abilities and inabilities of a person who could benefit from other technical aids offered under the existing government programs.
- 3) Consolidate postplacement evaluations by using the physical disability rehabilitation centres in the regions.
- 4) Reimburse users of mobility assistance dogs trained and placed by the current supplier and, if applicable, by future accredited suppliers for the purchase and annual maintenance costs, just as guide dog users are reimbursed, and on the basis of similar criteria.
- 5) Define the scope and limits of what a public place constitutes for the use of a mobility assistance dog and define those situations in which the use of this canine mobility aid could be subjected to certain restrictions.

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