

Date: _____

P.A.W.S Observation Form

Name: _____ Facility Visited: _____

- Observe the interaction among PAWS volunteers, animals, patients/residents, and facility staff. Observe the procedures at that facility and different techniques used by volunteers to communicate with the patients and residents. Complete the check list and mail the form to the PAWS Coordinator. Your form will not be viewed by personnel at the site. It is only used as a record that you have completed this activity. There is no right or wrong answers. It is a process to help you think about what's happening, what works well and how you would handle a similar situation.
- There may be an occasion when you are the only PAWS representative. In that case, ask to meet with a staff person. This will usually be an Activity Coordinator. Introduce yourself and explain you are from Frazer and you are with the "PAWS/Pet Visiting" program. Ask them to explain the normal process when PAWS visitors are there. Discuss the program with them and ask how you can have the greatest impact during your visits.
- Your observation will not completely prepare you for the process at other facilities. Some visits are in a group setting and other visits are strolling along hallways and entering rooms. Entering a room always requires asking permission and common sense related to the immediate situation with the resident. However, a keen awareness of the interaction among the resident, animal and visitor will provide the basics for all situations.
- You may have been told that your animal has limitations associated with other animals or people. See if you recognize other animals being utilized along with some limitation.

.....

Was your observation in a group session or an individual room setting? (circle one)

Did you **(O)** Observe, **(N)** Not Observe or **(P)** Participate

Make notes if you want to amplify

- Welcome from or introductions with other PAWS members
- Compatibility among animals
- Interaction between PAWS volunteers and Staff Personnel
- Environment: Cheerful Somber Pleasant Professional
- Smiles Laughter Tears
- Resident's recognition of a pet/person from a previous visit.
- Eye contact between resident and volunteer
- Animals easily and safely accessible for physical contact with resident
- Physical contact between resident and animal
- Physical contact between resident and volunteer

- Speech and/or conversation therapy
- Interaction between residents that is directly stimulated by the pet therapy
- Muscle stimulation
- Conversation stimulating memory control
- Evidence of fear or concern in a resident.
- Evidence of self-control or bravery by a resident
- Refusal of a resident to participate with a visitor/pet
- Resident was stimulated by sights, sounds, smells or textures.
- Potential safety hazards. Identify: _____

The single most meaningful thing I observed today was:

Additional Comments:

Mail to the PAWS Coordinator
(contact information for the current coordinator is on the website www.frazerumc.org/paws)

or

Frazer United Methodist Church
C/O Life Care Ministries/PAWS
6000 Atlanta Highway
Montgomery, Alabama 36117

- + Attend an Orientation Meeting or become familiar with the Summary Document.
- + Complete an Observation visit and submit the form.
- + Successfully complete Temperament Testing with your animal.

Then, Pray & Visit

Remember, Father Walter Children's Home and HealthSouth require that a copy of the Rabies Vaccination Certificate be on file. You may send it in advance or take it with you on your first visit.