



## I. PURPOSE

To establish a policy and guidelines that allow Washoe County employees to bring certain qualifying dogs to the workplace where practicable, to extend the known benefits of dogs to the workplace. Studies have shown that employees who work around dogs may experience benefits including reduced stress, more relaxation, improved performance, more positive social interactions at work, increased communications with coworkers, and a better mood. Additionally, allowing certain dogs in the workplace may help employees maintain healthy work-life balance, serve as a recruiting/retention tool, encourage active breaks rather than sedentary breaks, reduce absenteeism, increase productivity, improve citizens' perception of the County, and improve employee morale. In certain cases, employees may be working with a qualified public service organization (e.g. Liberty Dogs) to benefit United States Veterans by fostering a dog/puppy and this policy intends to allow for that public service.

This policy is not intended to replace or conflict with the accommodation of Service Animals as defined by the Americans with Disabilities Act. This policy does not apply to requests involving ADA service animals. ADA service animals used by employees with disabilities are permitted in the workplace as a reasonable modification under the Americans with Disabilities Act. No vest, certification, registration, third-party insurance, or department head approval may be required for an ADA service animal.

## II. REVISION HISTORY

Board of County Commissioners adoption 4/14/26

## III. REFERENCES

[Service Animals | ADA.gov](http://www.ada.gov/topics/service-animals/) – [www.ada.gov/topics/service-animals/](http://www.ada.gov/topics/service-animals/)  
[Liberty Dogs](http://www.libertydogs.org) – [www.libertydogs.org](http://www.libertydogs.org)

## IV. PERSONS AFFECTED

All elected officials, officers, and Washoe County employees.

## V. POLICY

Washoe County hereby adopts a policy of permitting certain qualified dogs in the workplace to support and promote employees' wellness standards at work. Dogs can contribute to a fun and enjoyable work environment, encourage positive interactions among staff, help relieve stress, and promote appropriate exercise breaks. In certain cases, employees may be working with a qualified public service organization to benefit



United States Veterans or other persons with disabilities by fostering a dog/puppy and this policy intends to allow for that public service.

In the interests of maintaining high service levels and a well-functioning work environment, this policy is subject to rigorous standards, conditions, and exceptions, which are provided in Section VII.

The ability to bring a dog to the workplace is a privilege and not a right, and the owner must accept the responsibilities and liability that come with it.

Approval is subject to suitability for the specific work function, setting, and location, and on the condition that the dog must be well-behaved and not disrupt business operations. Approval of any dog may be suspended or revoked at any time if the policy requirements are not met, or if the dog's presence in the workplace creates a disruption, disturbance or safety concern, in the sole and absolute discretion of department heads or their designees. It is the Owner's responsibility to ensure the dog's presence does not distract the owner from work responsibilities and does not create a safety hazard.

This is not a pet therapy program, in which the dog and owner are working to provide therapy services to people at County facilities. Under this policy, employees in the workplace will function in their capacity as employees, not as service providers.

Additionally, the County reserves the right to unilaterally change the standards set forth in this policy for any reason in its sole and absolute discretion, including the revocation of the policy altogether. Such standards may include (without limitation) restrictions on certain locations, limitations on dog size, and a cap on the number of animals at a given worksite or County facility at a given time.

## VI. DEFINITIONS

- A. Employees – All elected officials, officers, and Washoe County employees.
- B. Certified Therapy Dog – A dog that has been appropriately trained and tested for temperament and provides physical or therapeutic benefits under the control of their owner. The dog has a current registration and membership with a recognized Therapy Dog Organization.
- C. Therapy Dog Organization – A recognized organization that provides educational and screening services to dog handlers, owners and volunteers, and provides liability insurance. Recognized organizations include, but are not limited to Alliance of Therapy Dogs, Bright and Beautiful Therapy Dogs, Love on the Leash, Pet Partners, Therapy Dogs Incorporated, Paws 4 Love, and Therapy Dogs



International. References to specific organizations are illustrative only and do not constitute County endorsement.

D. Qualified Public Service-Dog Organization (QPSO) - A non-profit program that breeds, raises, trains, and/or places service dogs with Veterans or other persons with disabilities, and that:

- Is a 501(c)(3) or equivalent nonprofit.
- Has documented training standards and oversight for puppy raisers/handlers.
- Provides equipment and veterinary care or stipends during the puppy-raising period.
- Maintains policies that ensure dogs are under effective control in public settings.
- Provides a primary point of contact for County coordination and incident reporting.
- Examples include, without limitation, regional or national service-dog programs operating in Washoe County.

References to specific organizations (e.g., Liberty Dogs) are illustrative only and do not constitute County endorsement.

E. Owner – An employee who owns a Certified Therapy dog or qualified public service dog and has received authorization to bring the dog to the workplace.

F. Visitor – Any person who is not an employee or officer of Washoe County or delivery personnel conducting business in County facilities.

## VII. ELIGIBILITY

A. To be considered for eligibility, the following conditions must be met:

1. The dog must be properly trained, licensed, and registered as a member of a recognized Therapy Dog Organization/QPSO. Evidence of licensure or registration must be presented to the department head or designee as part of the request and approval process.
2. The dog must exhibit calm demeanor and acceptable behavior to the satisfaction of the approving Department Head and Animal Services representative.



3. The dog must be at least one year old and housebroken at the time of the owner's request unless it is a service dog puppy in training from a QPSO.
  4. The Owner must have maintained a close relationship with the dog for at least six (6) months at the time of their request to bring the dog to work unless it is a service dog puppy in training from a QPSO.
  5. The dog must be healthy and fully vaccinated against rabies and other diseases common to the dog's breed or breeds. At the time of the request, the owner must present evidence of current vaccination and examination records to their department head or designee for review and consideration.
  6. The dog must have no prior history of aggression or violence towards humans or other animals. The dog must demonstrate loving interactions with people, a willingness to meet new people, ability to maintain a calm demeanor, and not be easily disturbed by loud noises or sudden movements.
  7. The Owner must provide proof that the owner has a Therapy Dog Handler insurance policy covering the Owner/Handler's dog-related activities and applies to County workplace activities and covers the Owner's dog while on County property or at County-approved offsite locations . The policy must name Washoe County, its Officers, employees, agents, and volunteers as additional insured. The policy must be issued by an insurance carrier licensed to do business in the state of Nevada. The insurance policy must have liability limits of \$1,000,000 each occurrence, \$2,000,000 general aggregate limit as well as \$10,000 of medical payments and shall include personal injury, bodily injury, and property damage.
  8. If the owner resides in Washoe County, the dog shall be licensed with Washoe County Regional Animal Services.
- B. Eligibility is subject to the discretion of the department head or designee, with subsequent confirmation by an Animal Services representative.

## **VIII. REQUIREMENTS**

- A. The dog must wear a vest or other clear identification indicating the dog is a Certified Therapy Dog or qualified public service dog.
- B. To ensure the safety of our employees and visitors to County facilities, the dog must be under the owner's direct control at all times; the owner may not leave the dog unattended.



- C. The department head, elected official, or designee of the affected department must provide advanced notification to employees informing them of the dates or schedule for which the Certified Therapy Dog or qualified public service dog is expected to visit the office. Supervisors should allow coworkers the opportunity to express concerns related to allergies or safety in advance and respect a coworker's desire for confidentiality if the co-worker expresses it.
- D. The HR Department will develop a plan to address concerns reported by other employees who are allergic to or uncomfortable with the dog.

## **IX. OWNER'S RESPONSIBILITIES**

- A. Pursuant to pet therapy rules and regulations, the owner will ensure the dog is appropriately groomed.
- B. The Owner is expected to consider each day's schedule of meetings and activities and discern when it is not an appropriate day to have the dog in the office. Planning and communication can help maintain productive workdays and meetings for all involved.
- C. If applicable, the Owner will display notices at their workstation or somewhere visible for employees with information for coworkers about interactions with a Certified Therapy Dog or qualified public service dog.
- D. The dog must be on a leash, harness, or other secure restraint no longer than four (4) feet long when moving throughout public areas of the County property, including elevators and hallways. The Owner is solely responsible for the care and supervision of the dog.
- E. The Owner must ensure the dog behaves appropriately with no aggression towards employees or visitors to County offices, does not create a level of noise that is unreasonable for the work environment, does not cause property damage, or other disruptions in the workplace.
- F. The Owner is responsible for cleaning up after and maintaining proper hygiene of the dog. The Owner must ensure that these activities coincide with authorized breaks and do not interfere with the Owner's regular work functions.
- G. The Owner is expected to maintain a workspace that is pet-proofed and safe for their visiting dog and will provide all necessary pet items such as food, bowls, waste bags, leashes, toys, crates, and gates to keep the dog secure. Pet enclosures must not block any exits and follow OSHA exit routes and emergency planning.



- H. Owner must file a notice of incident with Risk Management and their department within one business day and file a claim within seven business days.

## **X. PROCEDURE**

- A. An employee who desires to bring their Certified Therapy Dog or qualified public service dog to the workplace must complete the Request for a Therapy/Service Dog to in the Workplace Form, submit vaccination and examination records, proof of insurance, and therapy certification documents to their director for review and approval with signoff from Animal Services.
- B. The requester and affected department head may schedule an on-site visit with the owner for observation to determine if the dog is a good fit and the environment is a good fit for the dog.
- C. The completed packet and supporting documentation will be submitted to the HR Department for inclusion in the employee file.
- D. The HR Department will maintain the approved request and all accompanied documents. Department heads are to retain copies of the approval documents for reference and to ensure standards are maintained.
- E. The Owner must provide timely updates of vaccination, health records, and certification documents to the Human Resources Department.

## **XI. SAFETY**

- A. The Owner must be able to demonstrate appropriate safety techniques for managing the dog to ensure employees and visitors are safe around the dog. The Owner must be mindful at all times of employees' and visitors' varying degrees of comfort with dogs.
- B. The Owner is responsible for keeping the dog away from any employee who identifies as being allergic to the dog. Where practicable, department heads or their designees may make accommodations for sensitive/allergic coworkers (such as pet-free zones), and/or exclude the dog from certain spaces.
- C. The Owner must act decisively and promptly to secure or remove the dog in the event the dog behaves aggressively toward employees, visitors, or other dogs in the workplace. Any dog that shows repeated acts of aggression towards employees, visitors, or other dogs will not be allowed to return to the workplace.



## Request for Therapy Dog in the Workplace

Employee Name:

Date:

Department and Location:

Expected Number of Days Dog will be present in the workplace:

Dog's Name:

Breed:

Age:

Weight:

Current vaccine records attached (circle one)?

Yes / No

Is the dog certified and registered with a Therapy Dog organization or QPSO (circle one)? Yes / No

The dog has not had any infections or ringworms in the last six months: True / False

Is the dog routinely screened for and is free of ticks and fleas (circle one)? Yes / No

Do you have an insurance policy for the dog (circle one)? Yes / No

If you answered no or false to any of the questions above, please explain and attach supporting documentation for consideration:

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In consideration of my request to bring a dog to the workplace, I have read and agree to be solely responsible for the dog. In the event my dog acts violently, I assume full responsibility and liability. I acknowledge that my dog is fully house-trained. I understand that I am responsible for reporting accidents, cleaning and disinfecting affected areas in the event of an accident. I agree to keep my dog at home if they are sick or behave abnormally and will immediately remove the dog from the premises if they become sick while on County property.

By signing below, I acknowledge that I have carefully read and understand the policy and all my responsibilities as a dog owner.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Department Head / Animal Services Approval**

I have reviewed and discussed the forgoing authorization and release with the dog owner and approve the therapy dog to be brought to the affected department. This authorization is subject to approval by the affected department head and Animal Services, as well as the owner's ongoing compliance with the applicable policy and the guidelines therein.

Signature of Department Head

Date of Approval:

Signature of Animal Services Representative

Date of Approval:

## **Human Resources Review and Acknowledgment**

Signature of Human Resources Representative:

Date of Receipt:

Date Placed in Employee File: