



Hearts Adaptive Riding Center

Hearts Adaptive Riding Center Therapy Horse Selection

It takes a horse with special qualities to be awarded the title of “Therapy Horse”. First and foremost is temperament - a pleasant, easy-going, quiet attitude is a must - this cannot be taught at our facility, it must come naturally to the horse. A therapy horse can be asked to work for up to six hours of lessons per day, five days per week. In any given one-hour lesson a therapy horse may work at a fast-paced walk or a consistent trot. A few horses are even asked to canter for a portion of their lessons.

Therapy horses must tolerate being crowded by groups of people (a rider, two side walkers, a leader and the instructor); unsteady riders who may inadvertently pull on the reins; lots of noise and action all around them and being groomed several times a day with riders and volunteers touching and leaning all over them. Therapy horses may carry riders who are unable to mount from the ground so they use a mounting ramp. This process entails fitting the horse tightly between two stationary objects (the mounting ramp & mounting block) with an unstable rider and 2-3 people around to assist. Most important to the riders, therapy horses are asked to play various games such as basket ball; bean bag toss; obstacle course and other activities. All these can be frightening to a horse that is not properly trained to relate to them.

We match each of our riders to the therapy horse that best fits their riding needs. Each of our horses has its own personality, movement and strengths. We have utilized many different breeds of horses in our program. We use the movement of the horse as a teaching tool, so it is imperative that our horses are not limping, short stepping, or lame in any way (all of our horses must be serviceably sound). For a person who has never walked before, the movement of a walking horse can stimulate a walking motion in the rider’s hips while they are mounted. The horses’ gait is very important to consider when pairing with a rider. A rider who needs more stimulation will benefit most from a horse with a choppy stride. Riders who are tense or prone to seizures benefit most from a smooth gaited horse. Even the horse’s frame has to be taken into consideration. Narrow horses are good for riders who cannot separate their legs very far. A wide-based horse is good for riders who need a larger base for balance.

While we greatly appreciate all horses that are offered for donation, horses that are too old or young, too spoiled or spooky, or too fast or slow are not a good match for our therapeutic riding program.

The ideal therapy horse (although exceptions to these guideline may be considered) should be:

- Between 8 and 18 years old
- Gelding or mare
- 14 to 15.2 hands
- Most important: gentle, quiet and easy-going

- Serviceably sound
 - Well-trained - we have found that horses with background in areas like polo, pony club, 4-H are very well suited for life as a therapy horse. With our limited time and resources, we do not have the ability to train a horse from the ground up, we are only able to provide them with training in specific therapeutic areas like the mounting ramp, wheelchairs, various games and getting used to side walkers walking beside them during a lesson.
 - Experience: walk/trot/canter with beginning rider
 - Has ground manners: grooming / standing / shoeing
- All horses must have a current negative Coggins test and be up to date on all vaccinations. We cannot accept horses that have chronic health issues such as hock problems, uneven gaits due to leg or hoof lameness, back pain, loss of vision/hearing.

We have a well-defined 90 day therapeutic training program that we put all potential horses through. To help defray our costs of maintaining the horse during the probationary period we ask for a \$250 non refundable deposit. All owners must complete the Prospective Therapy Horse Profile (see below). We prefer that owners transport their horse to our center for an on-site evaluation.

If the horse performs successfully, then we accept them into the program and provide them with a loving, working environment to call home. Also at this time we will issue a thank you letter that can be used as a receipt for a tax deduction. There is also a long term lease option available, with no tax deduction. Those that are not suited for our therapeutic program are returned to their gracious owners.

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PROSPECTIVE THERAPY HORSE PROFILE

Initial Data and Screening

Hearts Adaptive Riding Center would like to get to know your horse prior to our first on-site evaluation at our center. Please complete this form and return to our office so that we may begin your horse donation file. You may fax (805)967-6365 or mail it to us. -Thank you

Owner: _____

Email: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Equine's Name: _____ Age: _____ Sex: Mare or Gelding

Height: _____ Breed: _____ Color: _____

Markings/Scars: _____

How long have you owned this horse?

Past Use:

Riding Style:

Has your horse had any medical illnesses in the past year? _____

If yes, please

explain: _____

Has your horse had any type of lameness in the past year? _____

If yes, please explain:

Is your horse on any medication? _____ If yes, please

list: _____

Veterinarian Name: _____ Phone: _____

Please list the latest dates for the following:

Immunizations: Rhino/Flu _____ EWT/Encephalitis _____ Rabies _____

Strangles _____ West Nile _____ Other _____

De-Worming _____ Product _____

Coggins _____ Result _____

Feeding:

Current Grain: _____ Amount: _____

Current Hay: _____ Amount: _____

Supplements: _____ Amount: _____

Farrier Name: _____ Phone: _____

Hoof (bare/shoes): _____ Date: _____

Horse's Likes:

Any Vices(e.g., cribbing, weaving, etc)? - if yes, please explain:

Does your horse: Cross Tie: _____ Lunge: _____ Load: _____

Why do you want to donate this

horse? _____

Would you consider a long term lease option to Hearts for this horse? Yes or no

Office Use Only: Initial Phone Interview Date: _____ On-Site Visitation Date: _____

Date Fee Paid _____ Check or Mastercard/Visa Staff Initials: _____