

# **Grey Bruce Health Services**

# **AODA Multi-Year**

## **Accessibility Plan**

# 2015-2020

Last Reviewed: June 2016

## **Our Commitment**

The Ontario government passed the Accessibility for Ontarians with Disabilities Act (AODA) in 2005. It is the goal of the government of Ontario to make Ontario accessible by 2025. GBHS is committed to this vision. We continuously strive to ensure equal access to our services for persons with disabilities and meet the accessibility needs of those we serve in a timely manner. The regulations associated with the Integrated Accessibility Standards (hereafter referred to as the IASR) require GBHS to establish, implement, maintain and document a multi-year accessibility plan which outlines the organization's strategy to prevent and remove barriers for persons with disabilities.

Under the AODA the following accessibility standards set certain requirements that are applicable to GBHS:

- Customer Service;
- Information and Communications;
- Employment

This multi-year plan outlines GBHS' strategy to prevent and remove barriers to address the current and future requirements of the AODA.

In accordance with the requirements set out in the IASR, GBHS will:

- Post this plan on our website
- Provide this plan in an accessible format, upon request;
- Review and update this plan at least once every five years

### AODA Committee Terms of Reference

Attached are the current terms of reference.



## **Committee Membership**

The following GBHS employees and Community representative(s) represent the membership of the Accessibility Advisory Committee.

| GBHS AODA<br>Committee<br>Member | Department  | Contact Information                                |  |  |
|----------------------------------|---|--|--|--|
| Rebecca Cummings                 | Chief Human Resources Officer                             | 519-376-2121 ext. 2109<br>rcummings@gbhs.on.ca     |  |  |
| Diana Ryman                      | Director, Patient Relations and<br>Safety                 | 519-376-2121 ext. 2311<br>dryman@gbhs.on.ca        |  |  |
| Naomi Vodden                     | Manager, Outpatient Mental<br>Health Services             | 519-376-2121 ext. 2484<br>nvodden@gbhs.on.ca       |  |  |
| Dave Robertson                   | Project Manager, Engineering<br>Services                  | 519-376-2121 ext. 2221<br>drobertson@gbhs.on.ca    |  |  |
| Greg Ott                         | Occupational Therapist,<br>Rehabilitation Program         | 519-376-2121 ext. 2977<br>gott@gbhs.on.ca          |  |  |
| John van Steyn                   | Social Worker, Community Mental Health Team               | 519-376-2121 ext. 2470<br>jvansteyn@gbhs.on.ca     |  |  |
| Mary Margaret<br>Crapper         | Director, Communications and<br>Public Relations          | 519-376-2121 ext. 2806<br>mcrapper@gbhs.on.ca      |  |  |
| Merv Breadner                    | Community Representative                                  | 519-372-5828<br>Mervin.Breadner@investorsgroup.com |  |  |
| Pamela Matheson                  | Manager, Central Registration and Scheduling, Switchboard | 519-376-2121 ext. 6130<br>pmatheson@gbhs.on.ca     |  |  |
| Kate Barnard                     | Learning Coordinator                                      | 519-376-2121 ext. 2105<br>kbarnard@gbhs.on.ca      |  |  |
| Rebecca Brookham                 | Occupational Health and Safety<br>Representative          | 519-376-2121 ext. 2051                             |  |  |
| Jane Keppy                       | Director, Rural, Rehabilitation and Senior's Strategy     | 519-376-2121 ext. 2714<br>jkeppy@gbhs.on.ca        |  |  |

## Types of barriers and barrier-identification methodologies

The GBHS Accessibility Advisory Committee identified the following types of barriers and uses the following barrier-identification methodologies:

#### **Barrier Types:**

Physical, Informational, Communication, Attitudinal, Technological, Systemic (Policy/Practice)

| Methodology                                  | Description  |  |  |
|--|--|--|--|
| Canvas Corporate Leadership Council<br>(CLC) | All managers asked to identify barriers arising on an ongoing basis.                                 |  |  |
| Electronic Incident Reporting System         | Accessibility issues/complaints are submitted in<br>Electronic Incident Reporting System and reports |  |  |

## **GBHS Multi-Year Accessibility Plan**

| Methodology   | Description   |  |  |  |
|---|---|--|--|--|
|   | are generated and reviewed by the GBHS<br>Accessibility Committee.  |  |  |  |
| Accessibility for Ontarians with Disabilities<br>Act (AODA) Survey                      | Survey is available on-line (intranet for employees<br>and the external website) also available in hard<br>copy in all of our Hospitals.                    |  |  |  |
|   | Contact information for the Director, Patient Relations and Safety is posted on our website.  |  |  |  |
| Accessibility-specific questions on patient satisfaction survey                         | Patient satisfaction survey provides for a limited number of unique questions for hospitals.  |  |  |  |
| Capital funding requests for accessibility projects                                     | Requests are reviewed and prioritized through the capital planning and approval process.  |  |  |  |
| Membership on Committee   | Both GBHS and Community representation is welcome on the Accessibility Advisory Committee.  |  |  |  |
| Committee assessment and review   | Committee members review barriers identified to assess best possible solution   |  |  |  |
| Current and ongoing identified barriers list  | Committee members review and prioritize items on<br>an ongoing basis taking into consideration urgency<br>of barrier, time restraints, and funds available. |  |  |  |
| Informal communication with our community, local resources and experts on accessibility | Guests will be invited to discuss concerns with the committee as needed.  |  |  |  |
| Website enhancements  | Our new website has been launched and has made accessibility information easier to find. We continue to monitor and improve this information.               |  |  |  |

## Accessibility Standards for Customer Service

Compliance by: January 1, 2012 Status: Compliant

The Accessibility Standards for the Customer Service Regulation were created to establish accessibility standards for customer service in Ontario. In keeping with this regulation, the organization is committed to providing respectful services that focus on the unique needs of the individual.

In compliance the AODA Customer Service Standard, at GBHS we are committed to the following:

- Services must be provided in a manner that respects the dignity and independence of persons with disabilities
- The provision of our services to persons with disabilities and others must be integrated unless an alternate measure is necessary, whether temporarily or on a permanent basis, to enable a person with a disability to obtain, use or benefit from our services.
- Persons with disabilities must be given an opportunity equal to that given to others to obtain, use and benefit from our services.

#### Action taken to ensure compliance:

All employees, volunteers and affiliates receive training and information on the customer service standards. The training has been incorporated into the employee orientation program and annually reviewed. Policies are in place to meet all of the customer service standards. See Accessibility Policy IV-175 for full details. The following categories are addressed in our policy and training programs.

- Communication principles
- Assistive Devices
- Service Animals
- Support persions
- Interuption of services
- Opportunity for feedback
- Incorporate AODA Customer Service principles into all customer service training opportunities offered at GBHS.
- Strengthen the annual review of Customer Service standards for all staff.

## **Integrated Accessibility Standards**

## **Emergency Procedure, Plans or Public Safety Information**

#### Compliance by: January 1, 2012 Status: Compliant

All employers must provide "individualized" workplace emergency response information to disabled employees if individualized information is necessary based on the type of disability and if the employer is aware of the need for accomodation. Employers must provide this information as soon as practicable after becoming aware of the need for such accommodation. This workplace response information may be shared with a person designated by the employer to provide assistance to the disabled employee if the disabled employee consents. Individualized workplace emergency response information must be reviewed if the disabled employee moves to a different work location in the organization, when his or her overall accommodation needs or plans are reviewed, and when the employer reviews its general emergency response policies.

#### Action taken to ensure compliance:

Workplace emergency response and public safety information is available in an accessible format upon request.

#### **Training** Compliance by: January 1, 2015 Status: Compliant

GBHS is committed to training of all employees, volunteers, physicians and other service providers of GBHS on the laws of accessibility and the Ontario Human Rights Code as it pertains to persons with disabilities. Training will be provided in a way that best suits the duties and responsibilities of the employees, volunteers, physicians and other service providers.

#### Action taken to ensure compliance:

- Accessibility regulations and Ontario Human Rights Code are part of orientation training for new employees, volunteers and physicians.
- Annual training on IASR and the Ontario Human Rights Code is part of the mandatory training program.
- Records of the training and individuals that have participated are maintained by GBHS.

#### Accessibility Policies and Plans Compliance by: January 1, 2013 Status: Compliant

Broader public sector organizations are required to develop, implement and maintain policies on how they achieve accessibility to policies and plans. A statement of commitment and written document must be in place and be made publicly available in an accessible format upon request. AODA regulations require consultation with persons with disabilities or with members of their Accessibility Advisory Committee when updating plans. There is also a requirement to prepare an annual status report on progress with the plan and post the status report on their website.

#### Action taken to ensure compliance:

GBHS policies and plans are posted publicly on our website and available in an accessible format. The AODA Committee meets at least once a quarter and includes members with disabilities representing both employees and community stakeholders. An annual report on progress is provided to the Quality Committee of the Board and posted on the GBHS website.



IV-175 Accessibility for Persons with Disa

#### **Procuring or Acquiring Goods, Services or Facilities** Compliance by: January 1, 2013 Status: Compliant

GBHS is required to incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, whenever it is practicable to do so. When accessibility criteria are not incorporated an explanation will be provided when requested.

#### Action taken to ensure compliance:

Vendors and potential suppliers are asked to tell us about the accessible options the offer. We include accessibility considerations in our evaluation criteria to select vendors.

## Information and Communication Standards

Compliance - Feedback-related provisions by: January 1, 2015 Compliance – Accessible formats and communication support – January 1, 2016 Status: Compliant

GBHS is committed to making our information and communications accessible to persons with disabilities.

Our website and online content conform with the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0, Level A.

#### Action taken to ensure compliance:

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Processes to provide feedback on accessibility are posted on our website. Feedback processes are accessible, accessible formats are available on request and/or our

Director of Patient Relations is available to meet to arrange for additional accommodation.

#### **Recruitment - General** Compliance by: January 1, 2014

Status: Compliant

GBHS is required to notify their employee and the public about the availability of accommodation for applicants with disabilities in their recruitment process.

#### Action taken to ensure compliance:

GBHS specifies the availability of accommodation in our recruitment materials. Recruitment materials are reviewed and modified as required on a regular basis.

## **Recruitment, Assessment and Selection**

Compliance by: January 1, 2014 Status: Compliant

GBHS will notify job applicants, when they are individually selected to participate in an assessment or selection process that accommodations are available upon request in relation to the materials or processes to be used in the assessment/selection process.

#### Action taken to ensure compliance:

Where a selected applicant requests an accommodation, there is consultation with the applicant to arrange for provision of a suitable accommodation.

#### Notice to Successful Applicants Compliance by: January 1, 2014

Status: Compliant

When making offers of employment, GBHS will notify the successful applicants of its policies for accommodating employees with disabilities.

#### Action taken to ensure compliance:

Where a selected applicant requests an accommodation, there is consultation with the applicant to arrange for provision of a suitable accommodation.

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#### **Employee Supports** Compliance by: January 1, 2014 Status: Compliant

GBHS will inform their employees of their policies and any updates to policies used to support employees with disabilities, including information on accommodation.

#### Action taken to ensure compliance:

New employees receive information on available support at orientation. Updated information is shared with employees through our intranet and through annual reviews.

#### **Documented Individual Accommodation Plans/Return to Work** Compliance by: January 1, 2014 Status: Compliant

GBHS has a written process and policy to develop documented individual accommodation plans for our disabled employees. This process is followed to accommodate an employee with a disability and to facilitate an employee's return to work.

#### Action taken to ensure compliance:

Our accommodation and return to work processes are reviewed on a regular basis with stakeholder engagement from employees with disabilities our unions and external stakeholders involved in the accommodation/return to work process.

#### Performance Management, Career Development and Redeployment Compliance by: January 1, 2014 Status: Compliant

GBHS takes into account the accessibility needs of employees with disabilities, as well as individual accommodations plans when using its performance management process; providing career development and/or when redeploying employees with disabilities.

#### Action taken to ensure compliance:

Accommodation and related policies are reviewed on a regular basis to ensure they are compliant and supportive of our employees in need of accommodation. Management and staff are trained on our accommodation practices.

## Barriers that were addressed in September 2014 – August 2016

The GBHS Accessibility Advisory Committee has addressed the following barriers during the past year.

| Barrier  | Objective  | Means to<br>remove/prevent  | Resources                      | Timing         | Responsibility       |
|--|--|---|--------------------------------|----------------|----------------------|
| <i>Wiarton</i><br>Front entrance<br>doors in Wiarton | Widen to<br>allow better<br>access   | Replaced front<br>entrance doors,<br>giving a wider<br>opening for better<br>access                 |                                |                | Eng. Services        |
| <i>Wiarton</i><br>Door accessibility                 | Ensure public<br>doors are<br>accessible<br>with operators   | Added auto openers<br>to two sets of doors<br>in Wiarton  |                                |                | Eng. Services        |
| Owen Sound<br>Accessible<br>Washroom –<br>Owen Sound | Add an<br>accessible<br>washroom on<br>the lower level<br>(currently<br>only one on<br>main level) | Provide<br>accessibility,<br>support<br>independence, and<br>prevent slips and<br>falls.            | Capital<br>funding<br>approved | Summer<br>2016 | AAC/Eng.<br>Services |
| Owen Sound   | Ensure Public<br>Outdoor<br>eating spaces<br>are accessible  | Installed accessible<br>picnic tables on 3 <sup>rd</sup><br>and 4 <sup>th</sup> floor<br>courtyards |                                |                | Eng. Services        |

# Barriers Planned to be Addressed in the Coming Year September 2016 – August 2017

The GBHS Accessibility Advisory Committee has received approval to address the following barriers in the coming year.

| Barrier           | Objective     | Means to       | Resources | Timing | Responsibility |
|-------------------|---------------|----------------|-----------|--------|----------------|
|                   |               | remove/prevent |           |        |                |
| <b>Owen Sound</b> | Improve       |                | Capital   |        | Amb. Care/Eng. |
| Configuration of  | access to     |                | funding   |        | Services       |
| seating in        | seating in    |                | approved  |        |                |
| Ambulatory Care   | Ambulatory    |                |           |        |                |
|                   | Care          |                |           |        |                |
| <b>Owen Sound</b> | Improve       |                | Capital   |        | Communication  |
| Signage and       | signage and   |                | funding   |        | /Public        |
| direction from    | Wayfinding in |                | approved  |        | Relations      |

## **GBHS Multi-Year Accessibility Plan**

| front entrance | the Owen<br>Sound initial |  |  |
|----------------|---------------------------|--|--|
|                | entry                     |  |  |

### **Future Identified Barriers**

| Barrier   | Objective  | Means to<br>remove/prevent                              | Resources   | Timing                       | Responsibility       |
|---|--|---|---|------------------------------|----------------------|
| <i>Owen Sound</i><br>Repair of walkways<br>on Owen Sound<br>hospital property | Ensure level<br>walking<br>services  | Replace or repair                                       | Subject to<br>Capital<br>approval<br>and<br>operating<br>budget | Ongoing<br>as needed         | Eng. Services        |
| <i>Markdale</i><br>Upgrade elevator to<br>remove barriers                     | Braille<br>numbering,<br>adjust height<br>of the buttons<br>and install a<br>phone                 | Support vision<br>impaired<br>individuals               | Subject to<br>Capital<br>approval                               |                              |                      |
| <i>All Sites</i><br>Door accessibility  | Ensure public<br>doors are<br>accessible with<br>operators   | Retrofit existing                                       | Subject to<br>Capital<br>approval                               | Annual<br>Capital<br>Request | AAC/Eng.<br>Services |
| <i>All Sites</i><br>Washroom upgrades   | Installation of<br>grab bars,<br>raised toilet<br>seats and<br>backrests in<br>public<br>washrooms | Provide support to<br>reduce risk of slips<br>and falls | Subject to<br>Capital<br>approval<br>and<br>operating<br>budget | Ongoing<br>as needed         | AAC/Eng.<br>Services |

### **Review and monitoring process**

The Accessibility Advisory Committee will meet quarterly to review progress. At each meeting, the committee will remind staff, either through personal contacts or by email, about their roles in implementing the plan.

Members of the GBHS Accessibility Advisory Committee will also commit to making presentations to the Corporate Leadership Committee, Nursing Practice Council, Occupational Health and Safety and the Board's Quality Committee.

## Communication of the plan

The hospital's accessibility plan will be available through the Administrative offices at each site. On request, the report will be made available electronically, in large print, or in audio format. It is also available on the GBHS website at **www.gbhs.on.ca**.

The plan is available to staff on the Corporation's document management system.

How the plan is communicated to new employees:

- New Employee Orientation (review of AODA Integrated Standards and Accessibility at GBHS)
- Provision of information on how to submit an accessibility concern
- Annual Corporate training

For more information

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or

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