Title:	Accessibility for Persons with	GREY BRUCE Health SERVICES	
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Owner:	Chief Human Resource Office	Last Approved:	30-August-2022

POLICY STATEMENT

Grey Bruce Health Services is committed to all aspects of the Accessibility for Ontarians with Disabilities Act (AODA) and the Human Rights Code. We strive to ensure that all of our hospitals and the services we provide are barrier free and that our policies, practices and procedures are consistent with the core principles of Dignity, Independence, Integration and Equal Opportunity as outlined in the AODA.

The Hospital develops and communicates a Multi-year Accessibility Plan that describes the measures taken and future plans to identify, remove and prevent barriers to persons with disabilities. The development of the Multi-year Accessibility Plan is completed through engagement with appropriate stakeholders including:

- Public Feedback
- Staff, Physician & Volunteers
- Patient and Family Feedback (Complaints and Patient Advisors)

In keeping with the requirements of the Accessibility for Ontarians with Disabilities Act, the Board provides oversight on accessibility plans.

APPLICATION

This policy applies to all GBHS staff, physicians and volunteers.

DEFINITION OF TERMS

Accessible Formats - may include, but are not limited to, large print, recorded audio and electronic formats, Braille and other formats usable by persons with disabilities.

Communication Supports - may include, but are not limited to, captioning, alternative and augmentative communication supports, plain language, sign language and other supports that facilitate effective communications

Disability - is defined, per Section 2 of the Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11 and the Human Rights Code, R.S.O. 1990, c. H.19, as follows:

a. "Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis,

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amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

- b. A condition of mental impairment or a developmental disability
- c. A learning disability or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d. A mental disorder, or
- e. An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997."

Kiosk - an interactive electronic terminal, including a point-of-sale device, intended for public use that allows users to access one or more services or products or both.

Service Animals – are defined, per Section 4(9) of the Accessibility Standards for Customer Service, O. Reg. 429/07, as follows: "An animal is a service animal for a person with a disability:

- a. If it is readily apparent that the animal is used by the person for reasons relating to his or her disability; or
- b. If the person provides a letter from a designated Regulated Health Professional confirming that the person requires the animal for reasons relating to the disability."

Support Person – is defined, per Section 4(8) Accessibility Standards for Customer Service, O. Reg. 429/07, as follows:

"A support person means, in relation to a person with a disability, another person who accompanies him or her in order to help with communication, mobility, personal care or medical needs or with access to goods or services."

- a. Accommodations, Disability-related
- b. Disability
- c. Personal Support Workers
- d. Service Animals
- e. Support Person

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Unconvertible - information or communications are unconvertible if it is not technically feasible to convert the information or communications or the technology to convert the information or communications is not readily available

PROCEDURE

- 1. The Accessibility Advisory Committee will:
 - a. Report on the measures the organization has taken to identify, remove and prevent barriers to people with disabilities.
 - b. Describe the measures in place to ensure that the organization assesses Acts/by-laws, regulations, policies, programs, practices and services to determine their effect on accessibility for people with disabilities.
 - c. Develop processes for feedback from patients, visitors, affiliates and employees on the identification of barriers.
 - d. Describe the measures the organization intends to take in the future to identify, remove and prevent barriers to people with disabilities.
 - e. Describes the training and education that is in place to ensure GBHS employees, volunteers and affiliates are aware of and implement AODA requirements into job responsibilities.
 - f. Make the accessibility plan available to the public.
- 2. The hospital encourages active participation from employees and outside persons/groups with disabilities as it plans for and evaluates the Annual Accessibility Plan.
- 3. The Accessibility Advisory Committee will educate, lobby, and advise on best practices to achieve the objectives of the Act. The Committee will set up the procedures and review input and suggestions to provide for enhanced accessibility. It will report, annually, to the Board as defined in the Act.
- 4. Individual Managers are responsible to assure their services are provided in a manner that is accessible for persons with disabilities.
- 5. The Quality Committee of the Board receives and reviews the Annual Report of the Accessibility Advisory Committee. The Board will receive the Accessibility Plan on an annual basis and provide a Board resolution to endorse the plan.

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TRAINING

All GBHS employees, volunteers, agents, contractors and others receive Accessibility Awareness Training upon hire. This training will promote accessibility awareness and be in adherence to all AODA requirements

Grey Bruce Health Services also provides ongoing training with respect to changes in its policies, practices, and procedures to those individuals who require such training as soon as practical. Records are maintained of the training provided, including training dates and the number of persons trained. It is the manager's responsibility to ensure of staff training compliance.

Service Animals and Support Persons

When a person with a disability is accompanied by a service animal, Grey Bruce Health Services shall ensure that the person is permitted to enter the premises with the animal and keep the animal with him or her unless that animal is otherwise excluded by law from the premises. If the service animal is excluded by law from the premises, Grey Bruce Health Services will provide other measures to enable the person with the disability to obtain, use or benefit from the goods or services.

In certain cases, the hospital may require a person with a disability to be accompanied by a support person for health or safety reasons.

Before making a decision, the hospital will:

- o consult with the person with a disability to understand their needs
- o consider health or safety reasons based on available evidence
- determine if there is no other reasonable way to protect the health or safety of the person or others on the premises

In such a situation, service fees for the support person will be waived

Disruption of Services

When a disruption of a particular facility or service occurs that is used to allow a person with a disability to access the goods or service Grey Bruce Health Services will give notice of the disruption to the public, by posting the reason for the disruption, the anticipated duration of the disruption and describe alternative facilities or services that may be available. This information will be posted in a visible place on the premises or by other methods considered reasonable. If

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the disruption is expected, a reasonable amount of advanced notice of the disruption will be given. If the disruption is unexpected, notice will be provided as soon as possible.

Assistive Devices

If a person with a disability requires assistive devices to access the goods or services of Grey Bruce Health Services, they will be allowed to use such devices. In the event that the assistive device must be excluded, the hospital will provide other measures to enable the person with the disability to obtain, use or benefit from the goods or services.

Workplace Emergency Response Information

GBHS will provide "individualized" workplace emergency response information to disabled employees if individualized information is necessary based on the type of disability and if GBHS is aware of the need for accommodation. This information will be provided as soon as practicable after becoming aware of the need for such accommodation.

The workplace response information may be shared with a person designated by the department manager 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. The manager will review the accommodation needs with the employee and/or designated persons when emergency response practices and policies are reviewed in the department.

Feedback Process

The Committee welcomes feedback from employees, volunteers, physicians, patients and visitors in regards to the accessibility and provisions of goods and services provided at Grey Bruce Health Services. The AODA Survey and Feedback form is available electronically on our website <u>www.gbhs.on.ca</u> and in hard copy as requested. Feedback can also be made via telephone, via email and in person through the Patient Relations department.

Information and Communication Support Standards

Communication and Terminology

When communicating with a person with a disability, employees, volunteers and third party contractors shall do so in a manner that takes into account the person's disability.

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Accessible Websites and Web Content

Internet websites and web content controlled directly by GBHS or through a contractual relationship that allows for modification of the product shall conform to the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0, at Level A and AA in accordance with the schedule set out in the AODA Integrated Accessibility Standards.

Emergency Procedures, Plans and Information

The Hospital shall provide all existing public emergency procedures, plans and public safety information, upon request in an accessible format or with appropriate communication supports in a timely manner.

Employment Standards

Recruitment

The Hospital shall post information about the availability of accommodations for applicants with disabilities in its recruitment process. Job applicants who are individually selected for an interview and/or testing shall be notified that accommodations for material to be used in the process are available, upon request. The Hospital shall consult with any applicant who requests an accommodation in a manner that takes into account the applicant's disability. Successful applicants shall be notified about the Hospital's policies for accommodating employees with disabilities as part of their offer of employment.

Employee Supports

The Hospital will inform employees of the policies used to support employees with disabilities, including policies on the provision of job accommodations that take into account an employee's accessibility needs due to disability. The Hospital will provide this information to new employees as soon as practicable after they begin their employment and provide updated information to all employees whenever there is a change to existing policies on the provision of job accommodations that take into account an employee's accessibility needs due to disability.

Accessible Formats and Communication Supports for Employee

Upon an employee's request, the City shall consult with the employee to provide or arrange for the provision of accessible formats and communication supports for:

- a. Information that is needed in order to perform the employee's job; and
- b. Information that is generally available to employees in the workplace.

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The Hospital will consult with the employee making the request in determining the suitability of an accessible format or communication support.

Documented Individual Accommodation Plans

A written process for the development and maintenance of documented individual accommodation plans shall be developed for employees with disabilities. If requested, these plans shall include information regarding accessible formats and communications supports. If requested, the plans shall include individualized workplace emergency response information.

Return to Work Process

The Hospital shall have in place a documented return to work process for employees returning to work due to disability and requiring disability-related accommodations. This return to work process shall outline the steps that the Hospital shall take to facilitate the return to work.

Performance Management and Career Development and Redeployment

The Hospital shall take into account the accessibility needs of its employees with disabilities as well as any individual accommodation plans when providing career development, performance management and when considering redeployment.

Built Environment Standards

The Hospital shall comply with the AODA Design of Public Spaces Standards (Accessibility Standards for The Built Environment) when undertaking new construction and redevelopment of public spaces.

The Hospital shall ensure that the Accessibility Design Standards reflect the AODA Built Environment Standards.

Related Documents

- OHS Service and Construction Contractor Safety Policy I-80
- ADMIN-700 Pet Visitation
- ADMIN-600 Safety Incident Management
- ADMIN-695 Patient Family Feedback Management
- HR-300 Recruitment Policy
- HR-410 Disability Leaves and Accommodations
- OHS Transitional Return to Function Work VI-10