

**DEEP RIVER AND DISTRICT HOSPITAL  
FOUR SEASONS LODGE  
NORTH RENFREW FAMILY HEALTH TEAM**

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| <b>Policy:</b> Accessibility for People with Disabilities & Multi-year Accessibility Planning   |                                      |
| <b>Original Date:</b><br>2017-12-21   | <b>Policy Manual:</b> Administration |
| <b>Approved by:</b><br><input type="checkbox"/> Board of Directors <input checked="" type="checkbox"/> Chief Executive Officer <input type="checkbox"/> Chief Financial Officer<br><input type="checkbox"/> Chief Nursing Executive |                                      |

**Policy**

Deep River & District Health (DRDH), which includes the Deep River & District Hospital, the North Renfrew Family Health Team, and the Four Seasons Lodge Long-Term Care Home, is committed to continually improving access to health campus facilities and accessibility support for patients, residents, family members, staff, health care practitioners, volunteers and all members of the community. We are committed to meeting the needs of people with disabilities in a timely manner and will do so by working to remove and prevent barriers and meet accessibility requirements outlined by the Accessibility for Ontarians with Disabilities Act and Ontario’s accessibility laws.

We acknowledge that there is a wide range of abilities and disabilities with regards to an individual’s mental, physical and/or emotional capacities and these can vary over time, by context. Individuals with similar impairments may have very different experiences and needs, and at DRDH our goal is to surpass the expectations of our stakeholders while serving those with disabilities. Feedback on how well expectations are being met are welcomed and appreciated as they help to improve the experience and our current processes.

DRDH is committed to fulfilling our requirements under the Accessibility for Ontarians with Disabilities Act. Our Multi-Year Accessibility Plan (**Appendix A**) is prepared bi-annually and outlines the steps DRDH is taking to meet those requirements and to improve opportunities for people with disabilities. The Multi-Year Accessibility Plan outlines actions DRDH has taken to remove and prevent past barriers to accessibility addressing areas such as customer service, information and communications, employment, procurement and training.

**Procedure**

**DRDH Multi-Year Accessibility Planning:**

1. Describes the process whereby we will identify, remove and prevent barriers to people with disabilities.
2. Reviews past initiatives to remove and prevent barriers to people with disabilities.
3. Lists by-laws, policies, programs, practices and/or services that DRDH will review to further identify barriers to people with disabilities.
4. Develop a multi-year work plan to remove and prevent barriers to people with disabilities
5. Describes how DRDH will make the accessibility plan available to the public.

The Accessibility Advisory Council is responsible for carrying out the above mentioned activities. The Accessibility Advisory Council’s Terms of Reference outline the group’s mandate and composition.

The DRDH Multi-Year Accessibility Work Plan can be found in **Appendix A: Multi-Year Accessibility Work Plan 2022-2025**.

## Barrier-Identification Methodologies

The Accessibility Advisory Council uses the following barrier-identification methodologies:

| <i>Methodology</i>                                 | <i>Description</i>  | <i>Current Status - 2022</i>  |
|--|---|---|
| Accessibility Advisory Group tour of DRDH premises | The working group completed a walk-around of all departments in April 2022, noting potential accessibility issues for consideration | Complete and recommendations integrated into Work Plan                                |
| Staff and Public Feedback                          | Process to seek staff and public consultation   | Accessibility Advisory Committee received feedback from staff and public – April 2022 |
| Review of Requirements in Integrated Standards Act | Review of all AODA regulations complete and compliance gaps noted   | Review complete in February 2022; To review next in January 2024                      |
| Accessibility audit / survey                       | A staff, volunteer and physician workplace experience survey in 2021  | Staff & Physician Experience Survey Completed in October 2021                         |

## Past Achievements to Remove and Prevent Barriers

The Accessibility Advisory Council reviews achievements in removing and preventing barriers, including:

- **Barrier-free redevelopment planning:**
  - In accordance with requirements under Section 3.8 -Barrier Free design of the Ontario Building Code, DRDH has undergone several upgrading renovations that have improved access to those with disabilities.
  - Increased functionality of the call bell system, wheelchair access, grading on sidewalks at Main Entrance and North side FHT entrance, and way finding signs are examples of areas where barriers have and continue to be removed to improve accessibility.
- **Policy review and development by Human Resources:**
  - Human Resources continues to annually review and revise policies to ensure all Human Rights and ODA legislative requirements are met
- **Review and make improvements on feedback received:**
  - DRDH continues to monitor all feedback via the electronic patient feedback tracking. The VP Clinical Services / Chief Nursing Executive facilitates a comprehensive review of each concern and identifies corrective measures where appropriate. No feedback related to accessibility have been received.
- **Alternative formats**
  - Alternative formats of DRDH documents are offered on our website.

Organizational policies, patient education and safety materials and forms are available in electronic format in an online document management system, and can be adapted to meet patient accessible needs.

### **Communication of the Multi-Year Accessibility Plan**

The DRDH Multi-Year Accessibility plan will be posted on the organization's website and hard copies will be available from the Administration office. On request, the plan can be made available in alternative formats, such as in large print or in Braille. The plan will also be included within the orientation package to new staff, volunteers and reviewed with all staff annually.

### **Materials and Supplies**

- **Appendix A:** Multi-Year Accessibility Work Plan 2022-2025

### **Definitions**

**Accessibility:** supporting people of all abilities with opportunities to participate fully in everyday life. It is used to describe how widely a service, product, device, or environment is available to as many people as possible. Accessibility can be seen as the ability to access and benefit from a system, service, product or environment.

**Architectural and physical barriers** are features of buildings or spaces that cause problems for people with disabilities. Examples include:

- Doorways and hallways that are too narrow for persons using wheelchairs, walkers or motorized mobility aides
- Counters that are too high for clients to be served in a seated position
- Parking spaces too narrow for safely accommodating wheelchair positioning
- Poor lighting, lack of contrast or high gloss finishes for persons with vision disabilities
- Telephones lacking communication devices for hearing impaired persons

**Attitudinal barriers** are those that discriminate against persons with disabilities. Examples include;

- Assuming a person with a speech impairment can't understand what's being said
- Ignoring persons with disabilities because of the challenge of communication
- Thinking/implying that persons with disabilities are inferior

**Barrier:** Anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

**Disability:** as defined by the Accessibility for Ontarians with Disabilities Act, 2005 and the Ontario Human Rights Code, is:

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

**Information and/or communications barriers:** exist when a person can't easily understand information provided. Examples include:

- Small print for the visually impaired
- Signs that are unclear and/or difficult to understand
- Speaking too loudly to persons with hearing impairments
- Websites that can be accessed by people unable to use a mouse

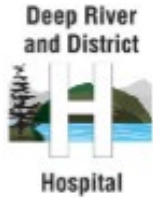
**Organizational barriers:** are organizations, policies, practices or procedures that discriminate against persons with disabilities. Examples include:

- Hiring processes that are not open to qualified persons with disabilities
- Overhead paging and announcements that can't be heard by persons with hearing disabilities
- Holding events and/or meetings in spaces that can't be accessed by persons using wheelchairs or other mobility aides

**Technological barriers:** occur when technology can't be modified to support assisted devices. Examples include:

- Websites that don't support screen-reading software
- Phones that can't be adjusted for volume control

|                     |   |
|---------------------|---|
| Reference Documents | <ul style="list-style-type: none"> <li>• <a href="http://www.ontario.ca">www.ontario.ca</a>, Ontario Human Rights Code, WHO</li> <li>• <a href="https://www.ontario.ca/page/how-create-accessibility-plan-and-policy#">https://www.ontario.ca/page/how-create-accessibility-plan-and-policy#</a>, Accessibility for Ontarians with Disabilities Act: A Comprehensive Guide for Developing Accessibility Policies and Accessibility Plans</li> <li>• <a href="https://www.ontario.ca/laws/statute/05a11">https://www.ontario.ca/laws/statute/05a11</a>, Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11</li> </ul> |
| Acknowledgements    | <ul style="list-style-type: none"> <li>• St. Michael's Accessibility Plan</li> <li>• Queensway Carleton Hospital Accessibility Plan</li> <li>• St. Francis Memorial Accessibility Plan – 2020-2025</li> </ul>   |
| Review Process      | <ul style="list-style-type: none"> <li>• Executive Leadership Team – 2022-05-24</li> <li>• Patient Family Advisory Committee – 2022-05-30</li> <li>• Quality, Risk and Safety Committee – 2022-06-14</li> <li>• Accessibility Advisory Council – 2022-05-19</li> <li>• Board of Directors – 2022-06-28</li> </ul>   |



**Deep River & District Health Accessibility Work Plan: 2022-2025**

DRDH plans to address the identified project and programs between 2022 and 2025 to remove and prevent barriers to people with disabilities in accordance with the Accessibility for Ontarians with Disabilities Act.

| Area                          | Barrier  | Objective   | Plan   | Time Frame | Person Responsible | Progress |
|-------------------------------|--|---|--|------------|--------------------|----------|
| <b>Policies and Practices</b> | <ul style="list-style-type: none"> <li>Procedures for temporary disruption of accessibility elements (i.e.: ramps) not in place</li> </ul>                       | <ul style="list-style-type: none"> <li>Ensure process in place for temporary disruption of accessibility elements</li> </ul>  | <ul style="list-style-type: none"> <li>Develop plan for disruption of elements and post on Policy Medical</li> </ul>   | 2022       | CNE & HRO          |          |
| <b>Technological</b>          | <ul style="list-style-type: none"> <li>Medical bed alarm system has limited capabilities to provide alternative communication methods</li> </ul>                 | <ul style="list-style-type: none"> <li>Ensure staff are able to respond to patient needs through communication devices</li> </ul>   | <ul style="list-style-type: none"> <li>Integrate current Call Bell system, with bed alarms system</li> </ul>   | 2025       | CNE / CFO          |          |
|                               | <ul style="list-style-type: none"> <li>Staff with hearing impairment have difficulty with communication due to procedure masks preventing lip reading</li> </ul> | <ul style="list-style-type: none"> <li>Supports in place for hearing-impaired patients that are not able to lip read due to procedure masks</li> </ul>                                    | <ul style="list-style-type: none"> <li>Review options to support lip reading while meeting IPAC standards</li> </ul>   | 2022       | CNE                |          |
|                               | <ul style="list-style-type: none"> <li>No communication tools for non-verbal patients or those that speak a language that services are not offered in</li> </ul> | <ul style="list-style-type: none"> <li>Ensure alternative communication tools are available for people that are non-verbal or do not speak a language services are provided in</li> </ul> | <ul style="list-style-type: none"> <li>Develop communication board and policy to support use</li> <li>Plan education for use of communication board</li> </ul> | 2024       | CNE                |          |
| <b>Attitudinal</b>            | <ul style="list-style-type: none"> <li>Lack of understanding of</li> </ul>   | <ul style="list-style-type: none"> <li>Increasing understanding and</li> </ul>  | <ul style="list-style-type: none"> <li>Plan for education regarding Charter of Human Rights</li> </ul>   | 2025       | HRO                |          |

|   |  |   |  |         |         |  |
|---|--|---|--|---------|---------|--|
|   | Charter of Human Rights  | awareness of Charter of Human Rights  |  |         |         |  |
| <b>Information &amp; Communications</b> | <ul style="list-style-type: none"> <li>Way finding challenging</li> <li>Patients don't always see signs due to visual clutter</li> <li>Alternative formats for information materials not consistently available</li> </ul> | <ul style="list-style-type: none"> <li>Reduce visual clutter</li> <li>Consider selective use of pictograms for way finding</li> <li>Consider use of QR codes for link to information in alternative languages or text to voice</li> </ul> | <ul style="list-style-type: none"> <li>Consultation vendors re: signage, alternative formats etc.</li> <li>Ensure up to date names plates are in place</li> <li>Lower some signage and/or increase and standardize font</li> </ul> | 2025    | CFO/CNE |  |
|   | <ul style="list-style-type: none"> <li>Plexiglas barriers at Registration in Emergency and the FHT makes it hard to for people on either side to hear</li> </ul>   | <ul style="list-style-type: none"> <li>Decrease impact of IPAC barrier to people that are hard of hearing</li> </ul>  | <ul style="list-style-type: none"> <li>Implement assistive device (i.e.: microphone and speakers) at registration desks</li> </ul>   | 2023    | CNE     |  |
| <b>Employment and/or Training</b>       | <ul style="list-style-type: none"> <li>Using person centered-language to meet the person at their level of need and understanding.</li> </ul>  | <ul style="list-style-type: none"> <li>Increase use of person centered language and communication</li> </ul>  | <ul style="list-style-type: none"> <li>Education on person centered language that meets their level of understanding and needs</li> </ul>  | 2023    | CNE     |  |
|   | <ul style="list-style-type: none"> <li>Decreased awareness that accessibility issues are not just with elderly population.</li> </ul>  | <ul style="list-style-type: none"> <li>Raise awareness that accessibility issues are not just with elderly population.</li> </ul>   | <ul style="list-style-type: none"> <li>Education on how to support younger person's with non-visible disabilities that require support</li> </ul>  | 2023    | CNE     |  |
| <b>Physical/ Architectural</b>          | <ul style="list-style-type: none"> <li>Door Handles round</li> </ul>   | <ul style="list-style-type: none"> <li>Replace with lever handles</li> </ul>  |  | Ongoing | CNE/CFO | <i>Completed as new handles as replaced</i>                            |
|   | <ul style="list-style-type: none"> <li>Lack of automatic door openers</li> </ul>   | <ul style="list-style-type: none"> <li>Install auto door openers where lacking or identify alternative routes</li> </ul>  |  | Ongoing |         | <i>Will be completed as part of capital plan with identified need.</i> |

|                            |  |   |   |         |          |  |
|----------------------------|--|---|---|---------|----------|--|
|                            | <ul style="list-style-type: none"> <li>New buildings and RFP process need to comply with legislation</li> </ul>  | <ul style="list-style-type: none"> <li>Ensure compliance</li> </ul>   |   | Ongoing |          | <i>To be completed as development occurs</i> |
|                            | <ul style="list-style-type: none"> <li>Door for patient bathrooms on Medical floor not accessible</li> <li>Patient bathrooms on Medical floor too small for assistive devices</li> </ul> | <ul style="list-style-type: none"> <li>Increase space in bathrooms and increase width of door</li> </ul>            | <ul style="list-style-type: none"> <li>Bathroom renovations on Medical to meet current Accessibility standards</li> </ul>   | 2025    | CFO      |  |
|                            | <ul style="list-style-type: none"> <li>Waiting room spaces too small for wheelchairs</li> </ul>  | <ul style="list-style-type: none"> <li>Ensure wheelchair accessible waiting space available</li> </ul>              | <ul style="list-style-type: none"> <li>Designated waiting room spot in FHT for wheelchair</li> </ul>  | 2022    | CNE      |  |
|                            | <ul style="list-style-type: none"> <li>Hallway clutter impedes mobility for those with assistive devices</li> </ul>  | <ul style="list-style-type: none"> <li>To keep hallways clear of equipment or clutter</li> </ul>                    | <ul style="list-style-type: none"> <li>Implement rounding routine to ensure hallways are clear of clutter</li> </ul>  | 2022    | CNE      |  |
|                            | <ul style="list-style-type: none"> <li>Unclear visual cues</li> </ul>  | <ul style="list-style-type: none"> <li>Ensure clear visual cues in Four Seasons Lodge and Parking lot</li> </ul>    | <ul style="list-style-type: none"> <li>Implement visual cues on FSL flooring in hallways for visually impaired</li> <li>Rotate accessible parking symbol to align with vehicle parking direction</li> </ul> | 2023    | CFO/CNE  |  |
| <b>Training</b>            | <ul style="list-style-type: none"> <li>Insufficient knowledge on impact of Indigenous culture on care needs</li> </ul>   | <ul style="list-style-type: none"> <li>Increase awareness of Indigenous population care and social needs</li> </ul> | <ul style="list-style-type: none"> <li>In person, focused Indigenous cultural safety and awareness training</li> </ul>  | 2024    | HRO      |  |
| <b>Progress Indicators</b> |  |   |   |         |          |  |
| No Current Action          |  |   | In Progress   |         | Complete |  |