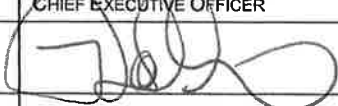




### West Parry Sound Health Centre

|  |   |                                |               |
|--|---|--------------------------------|---------------|
| <b>CORPORATE</b>                       |   |                                |               |
| <b>ACCESSIBILITY AT WPSHC POLICY</b>   |   |                                |               |
| <b>ISSUING DEPARTMENT:</b>             | ADMINISTRATION  | <b>DATE OF ORIGINAL ISSUE:</b> | NOVEMBER 2015 |
| <b>ISSUING AUTHORITY:</b>              | DONALD SANDERSON,<br>CHIEF EXECUTIVE OFFICER                                      | <b>DATE OF LAST REVISION:</b>  | N/A           |
| <b>SIGNATURE OF ISSUING AUTHORITY:</b> |  | <b>DATE OF LAST REVIEW:</b>    | SEP 2018      |
|  |   | <b>NEXT REVIEW DATE:</b>       | SEP 2020      |
| <b>DISTRIBUTION:</b>                   | ALL DEPARTMENTS   | <b>PUBLICATION STATUS:</b>     | APPROVED      |
| <b>KEYWORDS:</b>                       | Accessible, accessibility, customer service                                       |                                |               |

#### 1.0. POLICY STATEMENT

West Parry Sound Health Centre (WPSHC) believes in treating all people in a manner that allows them to maintain their dignity and independence. We support the full inclusion of persons with disabilities as set out in both the Ontario Human Rights Code and the Accessibility for Ontarians with Disabilities Act (AODA).

WPSHC is committed to meeting the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility and meeting accessibility requirements under the AODA.

WPSHC is also committed to providing respectful services that focus on the unique needs of the individual.

WPSHC will ensure that all employees, volunteers, students and others who provide goods or services on behalf of WPSHC are trained in compliance with the Customer Services standard requirements and AODA.

WPSHC is committed to serving people with disabilities who are accompanied by a service animal.

WPSHC is committed to welcoming and serving people with disabilities who are accompanied by a support person and will work with the support person to ensure access to service.

WPSHC will communicate with people with disabilities in ways that take into account their disability.

All agents, contractors, vendors, service providers and anyone else who provides goods or services to clients on behalf of WPSHC is required to do so in a manner that complies with the terms and intent of this policy.

**2.0 DEFINITIONS**

- 2.1 Accessibility:** Customer Service is provided in a manner that is capable of being easily understood or appreciated; easy to get at; capable of being reached; or entered; obtainable.
- 2.2 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 information or communications barrier, a technological barrier, a policy or a practice.
- 2.3 Disability:**
- 2.3.1 Any degree of physical 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, brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impairment, deafness or hearing impairment, muteness or speech impediment, or physical reliance on a guide dog, or other animal or on a wheelchair or other remedial appliance or device.
  - 2.3.2 A condition of mental impairment or developmental disability.
  - 2.3.3 A learning disability, or dysfunctional in one or more of the processes involved in understanding using symbols or spoken language.
  - 2.3.4 A mental disorder.
  - 2.3.5 An injury or disability for which benefits were claimed or received under the insurance plan established under Workplace Safety and Insurance Act, 1997.
- 2.4 Service Animal:** An animal is a service animal for a person with a disability if:
- 2.4.1 It is readily apparent that the animal is used by the person for reasons relating to his or her disability; or
  - 2.4.2 The person provides a letter from a physician or nurse practitioner confirming that the person requires the animal for reasons relating to the disability.
- 2.5 Support Person:** 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.

**3.0 EQUIPMENT**

Assistive devices are available for use by a person with a disability while onsite at WPSHC. See Appendix 8.1 for complete listing.

**4.0 PROCEDURE****4.1 Use of Service Animals**

Staff must ensure that a person with a disability is permitted to enter WPSHC with their service animal unless the animal is excluded by law. Ensure that the service animal admitted to the premises stays with the person with a disability

and remains under that person's control. Where a service animal is excluded by law, WPSHC will seek to employ other measures that will enable the person with a disability to obtain, use and benefit from the WPSHC programs and services. Do not touch the service animal without permission. Where the presence of the service animal poses a risk to the health and safety of another person (e.g. severe allergies), explore options to minimize the risk while still providing access to service. Where there is any question regarding whether or not an animal is fulfilling the role of a service animal, the person with the disability may be asked to supply written confirmation from a physician or nurse practitioner.

#### **4.2 Use of Support Persons**

Staff must ensure that a person with a disability is not prevented from having access to their support person while at WPSHC. Clarify with the client the extent to which personal health information can be shared with or communicated in the presence of the support person.

#### **4.3 Notification of Service Disruption**

Management must ensure processes are in place to provide notice in the event of a planned or unexpected disruption in facilities or services usually used by people with disabilities. Include information about the reason for the disruption, its anticipated duration, and a description of any available, alternate services. Ensure the notice is made conspicuous and may be displayed at the location of the disruption, on the website, or other manner of communication. Depending on the circumstances, other stakeholders may be notified.

#### **4.4 Accessibility Training**

Management will ensure processes are in place to guarantee accessibility training is provided to every person who deals with patients, their families and support persons, or who participates in developing WPSHC policies, practices and procedures governing the provision of programs and services to the public. This training includes staff and volunteers. Service providers, contractors, agents and others who provide service on behalf of WPSHC are required to provide training to their own staff.

Ensure that training includes:

- The purpose of the AODA.
- How to interact and communicate with persons with various types of disabilities.
- How to interact with persons with disabilities who use assistive device(s), or require the assistance of a service animal or support person.
- How to use assistive equipment made available by the organization to help people with disabilities access programs and services.
- What to do if a person with a disability is having difficulty accessing the organization's goods and services.

Management will ensure that training is provided to each person according to his or her needs and duties and as soon as is practicable after he or she is assigned to the applicable duties. Training will be provided on an ongoing basis in connection with changes to policies, practices and procedures governing the provisions of programs and services to persons with disabilities. A record of the dates on which training is provided, names of staff trained and the content of the training program will be kept.

#### **4.5 Feedback Process**

Staff are encouraged to report feedback for persons with disabilities about WPSHC programs and services. Such feedback, complaint, concern from persons with disabilities trying to access WPSHC programs and services should be documented and management informed. Management will investigate feedback, complaint or concern and ensure appropriate follow up and resolution is complete and documented. Methods to improve accessibility will be brought to the attention of Senior Leadership.

#### **4.6 Assistive Devices and Communication**

Staff will accommodate persons with disabilities to use their own assistive devices to help them access WPSHC programs and services. Restrictions may exist if there are concerns for the health and safety of others. If so, determine alternate ways to accommodate the person. Staff will provide access to assistive devices and other available communication services. See Appendix 8.1.

Management will ensure:

- 4.6.1 Staff communicate with people with disabilities in ways that take into account their disability.
- 4.6.2 WPSHC policies, procedures for the programs and services for persons with disabilities and service and support animals are available for the public on the website.
- 4.6.3 Staff know the assistive devices available (magnifying glass, larger print, etc).
- 4.6.4 Staff are trained to communicate with clients over the telephone in clear and plain language, speaking clearly and slowly.
- 4.6.5 Staff utilize other communication services if necessary.
- 4.6.6 Staff provide a copy of a document to a person with a disability, considering the person's ability to access the information and /or provide the document or information contained in the document in a format that meets those needs as agreed upon with the person (eg. hard copy, large print, email).

#### **4.7 Accessibility Plan**

In accordance with AODA requirements, WPSHC will develop, post and implement an Accessibility Plan. See Appendix 8.2.

**4.8 Purchasing**

WPSHC will ensure all items purchased for use, where applicable, will consider accessibility features and functions that can further assist clients when using our programs and services (re: Corporate Policy 0065, "Purchasing Policy").

**5.0 OUTCOMES**

WPSHC meets the needs of all clients using their programs and services.

**6.0 REFERENCES**

N/A

**7.0 RELATED POLICIES**

Corporate Policy 0065 – Purchasing Policy, section 4.2.4 (f)

**8.0 APPENDIX**

**8.1** List of Assistive Devices

**8.2** WPSHC & LLTC Accessibility Plan 2017

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**Assistive Devices - Inventory**  
(updated July 31/14)

| ITEM  | LOCATION   | QUANTITY | HOW TO ACCESS/USE  |
|---|--|----------|--|
| Call Bell - single - large button   | Maintenance - 2 <sup>nd</sup> floor  | 4        | 0700 - 1500 hrs, Page 532;<br>1500 - 0700 hrs, Page 534                    |
| Call Bell - grey/red "cross"<br>(large) with speaker and TV<br>function   | Maintenance - 2 <sup>nd</sup> floor  | 6        | 0700 - 1500 hrs, Page 532;<br>1500 - 0700 hrs, Page 534                    |
| Wheelchairs   | Front Lobby - 3 <sup>rd</sup> floor  | Many     | Open access  |
| Walkers   | Front Lobby - 3 <sup>rd</sup> floor;<br>Rehab Services<br>Reception - 1 <sup>st</sup> floor<br>(under staircase) | Many     | Open access  |
| Pocket Talker (Amplification<br>device)   | Day Hospital - 1 <sup>st</sup> floor   | 1        | Call ext 1302  |
| Canes   | Rehab Services - 1 <sup>st</sup><br>floor (storage room)   | Many     | Call ext 1302 or Clinical<br>Coordinator can access after<br>hours         |
| Pocket Talker (amplification<br>device)   | Rehab Gym - 3 <sup>rd</sup> floor  | 3        | In labeled cupboard, Please<br>write down which<br>room/patient it went to |
| Specialized Call Bells  | Acute Care Clean<br>Supply Rm - 3 <sup>rd</sup> drawer   | 3        |  |
| Photocopier (use zoom function<br>to increase the font size of print<br>to help assist those who may be<br>visually impaired) | Admitting  | 1        |  |
| Magnification sheets  | 3 <sup>rd</sup> Floor, HELP<br>cupboard on Rehab<br>Unit   | 2        | Open access. Please write<br>down which room/patient it<br>went to         |
|   |  |          |  |
|   |  |          |  |
|   |  |          |  |
|   |  |          |  |

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WEST PARRY SOUND  
HEALTH CENTRE



# ACCESSIBILITY PLAN

for

## West Parry Sound Health Centre & Lakeland Long Term Care

2017

Approved by C.E.O.

A handwritten signature in black ink, appearing to read 'Donald Sanderson', written over a horizontal line.

**Donald Sanderson, CEO  
West Parry Sound Health Centre &  
Lakeland Long Term Care**

**OCT 17 2017**

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## **EXECUTIVE SUMMARY**

The purpose of the *Accessibility for Ontarians with Disabilities Act, 2005* (AODA) is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of physical and non-physical barriers to their full participation in the life of the province. To this end, the AODA requires each hospital to prepare an accessibility plan and to make the plan public. This plan is to be reviewed and updated at least once every 5 years.

This plan was prepared by the Accessibility Working Group of West Parry Sound Health Centre (WPSHC). The plan describes:

- the measures that West Parry Sound Health Centre will take in upcoming years to identify, remove and prevent physical and non-physical barriers to people with disabilities who live, work in or use the Health Centre facilities, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

West Parry Sound Health Centre commits itself to:

1. The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community.
2. Ensuring Health Centre by-laws and policies are consistent with the principles of accessibility.

### **1. Aim**

This plan describes:

- The measures that West Parry Sound Health Centre will take in upcoming years to identify, remove and prevent physical and non-physical barriers to people with disabilities who live, work in or use the Health Centre facilities, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

### **2. Objectives**

This plan:

1. Describes the process by which West Parry Sound Health Centre will identify, remove and prevent physical and non-physical barriers for people with disabilities.
2. Reviews past efforts at West Parry Sound Health Centre to remove and prevent physical and non-physical barriers for people with disabilities.
3. Lists the by-laws, policies, programs, practices and services that West Parry Sound Health Centre will review in the coming years to identify barriers for people with disabilities.

4. Describes the measures West Parry Sound Health Centre will take in the coming years to identify, remove and prevent physical and non-physical barriers for people with disabilities.
5. Describes how West Parry Sound Health Centre will make this accessibility plan available to the public.
6. Describes how West Parry Sound Health Centre trains staff to address accessibility issues.

### **3. Description of West Parry Sound Health Centre**

West Parry Sound Health Centre (WPSHC) has always employed an innovative planning approach aimed at integrating services. Faced with the challenges of relative isolation between larger health care providers in southern and northern Ontario, WPSHC has partnered in regional alliances and created internal programming solutions that have benefited patient and family centred care through improvements to primary care, long term care, and acute care service delivery throughout the catchment area, and beyond. What results today is a highly integrated health care organization that includes: Lakeland Long Term Care, a 110-resident home co-located with WPSHC; six primary care Nursing Stations staffed by Nurse Practitioners who work in collaborative practice with a visiting physician; management of the District of Parry Sound land ambulance service (EMS) and Ambulance Communication Service (ACS); and a full range of in-patient and out-patient programs associated with a 70-bed acute care hospital.

WPSHC serves one of Ontario's most popular recreational areas with an approximate year-round population of 24,000 and exceeding 100,000 during the peak summer season.

For more information about the health centre and its partner programs, visit [www.wpshc.com](http://www.wpshc.com).

#### **4. The Accessibility Working Group**

##### **Establishment of Accessibility Working Group**

Donald Sanderson, Chief Executive Officer, formally constituted the Accessibility Working Group in January 2009. The following Terms of Reference were initially adopted for the Accessibility Working Group:

##### **Purpose**

1. To review and determine the requirements for the Health Centre to meet the requirements of the AODA.
2. To develop the Accessibility Plan for WPSHC, to be completed and made public.
3. To develop a mechanism for monitoring implementation of the Accessibility Plan and review/revise it in an ongoing basis including developing the communications plan for making the plan "public".

##### **Reporting**

The Accessibility Working Group is established by and accountable to the Chief Executive

Officer. The plan will be presented to the Quality & Safety Committee for review and recommendation for approval by the Board.

**Coordinator**

Effective 2016, the Chief Executive Officer appointed the Chief Financial Officer & Director of Corporate Services as the Coordinator of the Accessibility Working Group.

Consultations will be held with community groups and other focus groups, as required, which will be identified by the Working Group to meet the legislative requirements for stakeholder input with specific emphasis on persons with disabilities.

**Members of the Accessibility Working Group**

Coordinator, Accessibility Working Group  
Manager, Plant Operations  
Representative, Human Resources  
Manager, Clinical Services  
Manager, Communications & Public Relations  
Representative, Lakeland Long Term Care  
Representative, Community & Patient  
Working Group Resource

**5. Health Centre Commitment to Accessibility Planning**

West Parry Sound Health Centre is committed to accessibility planning. The following commitment has been made:

1. The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community.
2. Ensuring Health Centre by-laws and policies are consistent with the principles of accessibility.
3. The establishment of an Accessibility working Group at West Parry Sound Health Centre.
4. Staff, student and volunteer training.

The Chief Executive Officer authorized the Accessibility Working Group to prepare an accessibility plan that will enable West Parry Sound Health Centre to meet these commitments. The accessibility plan will have Board of Trustee approval prior to its publication.

**6. Barrier Removal Initiatives**

There have been a number of initiatives at the West Parry Sound Health Centre to identify, remove and prevent physical and non-physical barriers to people with disabilities. Examples of some of these initiatives include: automatic door openers, improved external lighting, grab bars in patient

rooms, patient lifts, cordless phones for patients, wheelchair ramps, handicap parking spaces created, raised toilet seats with arms, seating directly inside building entrances, directories to locate departments and additional visitor chairs for patient rooms. Devices to aid in assistance are also available to meet individual needs (i.e. large button call bells, adaptive hearing devices for telephones, vision magnifiers, hearing amplification devices. See Appendix I for detailed listing.

**Nursing Stations**

Argyle, Britt, Moose Deer Point, Pointe-au-Baril, Rosseau and Whitestone – wheelchair ramp access to entrance.

**7. Barriers to be Addressed in Future**

The Accessibility Working Group will address the following barriers during the coming year:

| <b>Barrier</b>  | <b>Objective</b>   | <b>Means to Remove/Prevent</b>              | <b>Timing</b> | <b>Responsibility</b>                     |
|---|--|---|---------------|---|
| Sidewalks need to be wider – not wide enough for a power chair; could also consider separate land for wheelchairs               | To improve safety on site  | \$500,000.00 to \$800,000.00 (cost barrier) | 2020          | Chief Financial Officer                   |
| Cross walk on Ernie Eves Way for Pedestrians  | Signal light installation to be considered   |   | 2020          | Chief Financial Officer                   |
| Nurse call system cords are too short   | Need longer cords so patients can reach if sitting in a chair  | Retractable cords to be trialed             | 2020          | Clinical Manager                          |
| Signage / Symbol Assessment   | Needs to be improved, (i.e. signs in elevators listing department locations); incorporation of international symbol system | Create new signage                          | 2018          | Communications Manager / Clinical Manager |
| Seating in long corridor between Acute and Transitional Care: benches are too low; should be replaced with chairs with armrests | To improve safety on site  | Acquire appropriate seating                 | 2018          | CFO / Clinical Manager                    |

**8. Review and Monitoring Process**

The Accessibility Working Group will meet annually to review progress. The Working Group will remind staff, either through personal contacts or other written means, about their roles in implementing the plan. Members of the Working Group will also commit to making presentations to any committee as deemed necessary. Following each meeting, a report will be presented to the Chief Executive Officer on the status of the plan.

| Item                          | Description  | Strategy for its Removal/Prevention  |
|-------------------------------|--|--|
| Physical/Non-Physical Barrier | Ongoing monitoring will flag any barrier, which requires corrective action based on a need related to life and safety. | Ongoing monitoring and barrier removal if danger to life and limb. Inclusion of accessibility review part of routine health and safety inspections.  |
| Communications                | Need for staff awareness and knowledge on disabilities and adaptive equipment and lifestyles.                          | Staff training as per AODA requirements; feedback/suggestions through management / CEO / website inquiries.  |
| Policies/Procedures           | 1. Corporate Policy 0125: "Accessibility at WPSHC"<br>2. Assistive Devices Inventory                                   | Ensure that all processes reviewed prevent and / or remove barriers; annual policy review.   |
| Parking                       | Maintenance of parking lots is required from time-to-time that involves temporary parking lot closure.                 | When such maintenance is taking place that affects designated accessible parking spaces, the Plant Operations department will ensure alternate accessible parking spaces are available and signage posted. |

**9. Plan Communication**

West Parry Sound Health Centre's Accessibility Plan will be posted on the WPSHC website ([www.wpshc.com](http://www.wpshc.com)). Paper copies will be available from Switchboard and by request from the Administration Office.

On request, the accessibility plan will be made available in alternate formats, such as in large print.

AODA information is currently part of WPSHC's Education Program to staff, student and volunteers.

**10. Definitions**

1. "accessibility standard" means an accessibility standard made by regulation under section 6

2. "barrier" means 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 information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice; ("obstacle")

3. "director" means a director appointed under section 30

4. "disability" means, (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, 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; (“handicap”)**

**APPENDIX I**

**West Parry Sound Health Centre – Accessibility Features**

1. Automatic door openers in many locations
2. Street level exit on 3 of 4 levels; all levels accessible by elevator
3. Disabled parking (in excess of 8 spots)
4. Wheelchair accessible washrooms
5. Baby change stations
6. Patient washrooms with wheelchair access
7. Dual swing doors in certain areas, including patient care
8. Sinks in patient rooms outside of patient washroom (sinks also in patient washrooms)
9. Spare wheelchairs available inside 1<sup>st</sup> and 3<sup>rd</sup> floor entrances
10. Low windows (provides accessibility to natural light)
11. Many new furnishings incorporate accessibility features
12. Nurse call system
13. TV's mounted on walls
14. Ramped sidewalks
15. Improved signage (Font Size Comfortable to Read, Larger Print for Seniors with Low Vision)
16. Improved lighting
17. Colour contrast services (white lettering on dark blue)
18. Lever door handles (not knobs)
19. New patient beds – controls on bed allow easy access to nurse call, lights, TV controls, split rails assist patient transfers
20. Many volunteers – visible and readily available to assist patients/clients/staff
21. Improved services: CT scan; all services now in one location – no outbuildings; majority of health care services located on same level
22. Accessibility highlights of location addressed to all staff during orientation to new facility
23. Indications on pavement (painted crosswalk) and “Pedestrian Crossing” signs installed on Ernie Eves Way to alert drivers of pedestrians crossing street
24. Installed ramps into patient showers for ease of transition into shower regardless of means
25. Installed bench along walkway
26. Painted “wheelchair” symbol on pavement of disabled parking spots
27. Adaptive hearing devices purchased to attach to phones to meet needs of those with hearing impairments
28. Physician are able to access the Electronic Health Record (EHR) in the Family Physician Records from within the Health Centre
29. Website meets the WCAG 2.0 standard, Level A

