



WOODSTOCK
HOSPITAL

Multi –Year Accessibility Plan

Woodstock Hospital 2013-2017

Submitted by:
***Woodstock Hospital
Accessibility Committee***

*This publication is available on the Hospital's website at: www.wgh.on.ca.
Alternative formats available upon request.*

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Executive Summary

The Ontarians with Disabilities Act (ODA), 2001 was enacted to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the community. The ODA requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) builds on and enhances the ODA by further defining standards and detailing measures of enforcement in order to build a fully accessible Ontario by 2025. Hospitals must comply with the first of four standards, the Customer Service Standard, Regulation 427/07 by January 1, 2010. These requirements were addressed in 2009-2010. The Integrated Accessibility Regulation 191/11 combines the following standards: information and communication, employment, transportation and has now been enacted and has a multi-year implementation plan. The Built Environment standard is under review.

To fulfill the requirements of the Integrated Accessibility Standards Regulations (IASR), the Woodstock Hospital (WH) has created a multi-year Accessibility Plan to ensure the intent of the legislation is being met, or exceeded. This Accessibility Plan provides an overview of WH and its commitment to accessibility planning. Woodstock Hospital recognizes that people with disabilities have a right to expect the same access to health services as everyone else.

The plan is prepared by the Accessibility Working Group of the WH in consultation with the Woodstock Hospital Accessibility Advisory Committee.

Policy Statement

The purpose of the Ontarians with Disabilities Act (ODA) is to “improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province” (ODA, 2001). The purpose of the Accessibility for Ontarians with Disabilities Act (AODA) is “accessibility for all by 2025” through the development of standards and enforcement mechanisms.

To fulfill this purpose, WH has created an Accessibility Plan to improve accessibility for people living with a disability in a consistent manner throughout our organization and to ensure compliance with the legislation.

Aim

This plan describes the measures that WH has taken in the past and the measures that WH will take during the next five year period (2013-2017) to identify, remove and prevent barriers to people with disabilities who live, work in or use the hospital, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

Definitions

Within this document, the term:

“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 communication barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

“disability” means:

- 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 coordination, 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; (handicap)

Objectives

WH's plan summarizes:

1. The process by which WH identifies, removes and prevents barriers to people with disabilities;
2. The measures that WH has taken to date, to fulfill the accessibility requirements within the Customer Service Standard and IASR;
3. The measures WH will take within the next three years to meet the minimum requirements set out by the IASR legislation;
4. The ways that WH will make this accessibility plan available to the public.

Description of Woodstock Hospital

A 178 bed capacity, full-service community hospital, we provide primary care to a population of 55,000 people and offer specialized care to nearly 110,000 within the County of Oxford. Our hospital is dedicated to delivering the highest standard of patient-focused medical care with:

- a workforce of over 800 and growing
- over 100 doctors including those with courtesy and consulting privileges
- 180 volunteers

We strive to have first class qualified health care professionals and support staff, to be responsive to health needs of our community, to be a leader in working with others to improve the health of our community, to be a developer of innovative, high quality services which support a coordinated Oxford County health system, and to be cooperative in the integration of District health services.

We promote compassionate, ethical, respectful patient care. We encourage creativity, are continually innovative and strive to be fiscally responsible. We also encourage personal growth and environmental awareness. We are proud of what we do.

MISSION

We are:

A progressive community hospital, delivering compassionate patient care and quality services by exceptional people.

VISION

We will:

- ~ Respond to the evolving healthcare needs of our community
- ~ Ensure patient safety in an environmentally responsible and sustainable facility
- ~ Implement high quality, accessible, fiscally accountable programs and services
- ~ Attract and retain qualified, dedicated health care professionals
- ~ Collaborate with our regional partners for the benefit of our community

VALUES

We are:

- ~ **C**ompassionate and caring
- ~ **A**ccountable and ethical
- ~ **R**espectful and nurturing
- ~ **E**nthusiastic about what we do

Commitment to Accessibility Planning

Woodstock Hospital is committed to accessibility planning. The following commitments have been made:

- The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, healthcare practitioners, volunteers and members of the community
- The participation of people with disabilities in the development and the review of the multi-year accessibility plans
- Ensuring WH by-laws and policies are consistent with the principles of accessibility
- To ensure training and awareness regarding Woodstock Hospital's Accessible Customer Service Policy Accessibility for Ontarians with Disabilities Act (AODA) 2005
- The Accessibility Working Group was formed to ensure common elements in developing and monitoring the accessibility plan were addressed, coordinated and consistent to provide operational efficiencies and cost savings.

Woodstock Hospital Accessibility Committee

The Accessibility Working Group is comprised of:

Deb Almost - Director Speech Pathology
Darlene Chesney - Registered Nurse
Linda Oosterveld - Staff Educator
Janis Humeston- Director of Housekeeping/MDRD (Chair)
Kim Osmond - Director of Human Resources/IPC/OH&S
Wendy Abbas - Director Complex Continuing Care/Inpatient Rehabilitation
Arlene Whitehead - Director Ambulatory Rehabilitation
Perry Lang – Chief Operating Officer
Kelly Danford – Supervisor Pt. Registration/Switchboard
George Pankiw - Honeywell Services
Bonnie West – Administrative Assistant

It is recognized that input from agencies and associations supportive of persons with disabilities needs to be obtained as the accessibility plan is further developed. Such agencies will include, but will not be limited to the CNIB, MS Society, Canadian Mental Health Association, Canadian Paraplegic Association, Canadian Hearing Society, Woodstock and District Developmental Services (WDDS) and Parkwood Hospital.

The Accessibility Working Group approved the establishment of an Accessibility Advisory Committee in 2003. The committee's responsibilities range from providing a forum for persons with disabilities to raise issues and concerns to providing advice and guidance to the Woodstock Hospital Board of Trust on matters related to policies, practices and programs in the hospital.

Members of the Accessibility Advisory Committee include:

Donna Burleigh - Woodstock Accessibility Advisory Committee
Jennifer Harrington - Woodstock Accessibility Advisory Committee
Judy Crane - Resident Woodingford Lodge
Representative - County of Oxford Accessibility Advisory Committee

A detailed Terms of Reference for the Accessibility Working Group and Accessibility Advisory Committee are attached (see Appendix 1 and Appendix 2).

Recent Barrier Identification Methodologies

Woodstock Hospital underwent a major redevelopment project throughout the years 2000-2010. The focus of the project was to plan, construct and relocate to a brand new facility. Throughout the planning phase the accessibility committee was extremely involved in the plans to ensure that barriers faced at the old site were removed once the hospital relocated. The hospital relocated to the new site on November 20th 2011.

Barriers identified by patients, employees, members of the public, advocacy groups, etc. can provide such feedback through our Accessibility Chair via email, telephone, mail, fax, or in person. Currently compliments/complaints are welcomed to ensure that we are continuously improving our processes and services, doing so in a manner which is equitable and accessible for all.

The chair of the Accessibility Working Group will be notified of any complaints received related to accessibility issues and will be responsible to request action be taken by the appropriate functional area within the organization. Such feedback will form the content of the Accessibility Plan, within the following areas: Customer Service, Information and Communication, Employment, and Built Environment.

Another method for patients to share their opinions, concerns regarding potential barriers at WH is through the SHoPPS survey. The following questions appear on the survey:

1. Did you encounter a barrier?
2. Physical barrier (doors, washrooms, ramps)?
3. Physical barrier (obstructions, reach)?
4. Physical barrier (equipment, furnishings)?
5. Communication barrier (telephones, televisions, assistive devices)?
6. Communication barrier (with staff, understanding instruction)?
7. Attitudinal barrier (respect, understanding needs)?
8. Technology barrier (use of nurse call, care equipment provided)?
9. Information barrier (access to information)?

Recent Barrier Removal Initiatives at WH (Under OAD and Customer Service Standards)

Category of Barrier	Identified Barrier or Opportunity	Means to prevent or Address Barrier	Timeline/Status
Built Environment	New hospital Construction	November 2011 hospital relocated to brand new state of art facility. Planning committee included Accessibility advisory committee in planning stages of facility (early 2000).	Complete
Built Environment	Identified areas in new building that were difficult for people with physical disabilities to maneuver	Additional automatic door openers were installed in the following areas: 2100 (complex continuing care) Courtyard. Washroom in ER waiting area. Washroom in main corridor.	Complete
Built Environment	No tables in cafeteria labeled for persons with disabilities	Signage added to newly purchased adjustable table in cafeteria denoting it is wheelchair accessible.	Complete
Customer Service	Creation of an AODA Policy	Policy created and approved through Accessibility Advisory Committee and Board of Trust.	Complete
Customer Service	Customer Service Training (according to AODA regulations) required.	Customer Service Training provided to all Hospital Staff, Physicians, Board Members, Volunteers.	Complete
Customer Service	Annual training on Customer Service Standards annually at our award winning Amazing Race	All staff are required to complete Amazing Race. Questions about Customer Service and IAR asked on test.	On-going
Customer Service	All newly hired staff members receive Customer Service training as part of our orientation workshop	Staff receive a pamphlet and quiz about Customer Service.	On-going
Customer Service	Ensure Notification of Cancellation or	Posted on our Website.	Complete

	disruption to services due to inclement weather or mechanical malfunction under Customer Service Standard		
Information/ Communication	To obtain timely feedback on accessibility issues	Implement an accessibility questions, SHOPPS Survey.	Ongoing
Information/ Communication	Improve on exiting feedback mechanisms to meet the AODA requirements	The feedback process is posted on our website under Patients & Visitors – Accessibility.	Complete
Information/ Communication	To provide information in formats that meet the needs of persons with disabilities	Revise website and pamphlets. Intranet – Artery amended to reflect alternate formats available.	Ongoing

Integrated Accessibility Standards Regulation (IASR) Work plan

Based on the requirements of the Integrated Accessibility Regulation 191-11 and the Accessibility Committee the following initiatives are recommended:

AODA Requirements	Deliverables	ACTION PLAN	Compliance Date
O. Reg. 191/11 s. 3 Establish Policies	Implement accessibility policies	Policy established and posted, provided in alternative format upon request.	January 1, 2013
Reg. 191/11 s.4 Establish multi –year accessibility Plan	Establish & implement multi-year accessibility plan, meeting requirements under the regulation. Post the plan on website. Review and update the accessibility plan at least once every 5 years. Review and update plans in consultation with persons with disabilities.	Create plan, involving applicable departments and Accessibility Working Group. Consult with Woodstock Hospital Accessibility Advisory Committee on plan. Post on website. Provide report in an accessible format upon request. Post annual status updates on website.	January 1, 2013
Reg. 191/11 s. 5 Procuring or acquiring goods, services or facilities	Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities. (unless not practical to do but must be able explain why not if requested)	1. Notify Purchasing 2. Add language in our RFP templates 3. Communicate requirement to Managers who may be in charge of putting out RFPs and vendor selection	January 1, 2013
Reg.191/11 s. 6 Self-Service Kiosks	Incorporate accessibility features when designing, procuring or acquiring self-service kiosks.	Train staff making procurement decisions on accessibility criteria that needs to be considered.	January 1 st 2013
Reg. 191/11 s. 7 Training	Provide training on the requirements of accessibility standards and on Human Rights Code as it pertains to persons with disabilities.	Through orientation/Amazing Race, train all employees and volunteers using the tools offered on accessforward.ca and OHA.	January 1 st 2014
Reg. 191/11 s. 11 Feedback	Ensure processes for receiving and responding to feedback are accessible to persons with disabilities, upon request. Notify public about the availability of accessible formats.	Post on website the availability of accessible formats for receiving and responding to feedback. Upon request, and in consultation with requester, accommodate process for receiving and responding to feedback.	January 1 st 2014
Reg. 191/11 s. 13 Emergency Procedure, plans and public safety	Provide emergency procedures, plans and public safety information in an accessible format as soon as practicable, upon request.	Upon request, emergency procedures will be made available in alternate formats, with consultation of requester.	January 1st, 2012
Reg. 191/11 s.14 WCAG 2.0 Level A	All new Internet websites and web content must conform with WCAG 2.0 Level A (excluding live captioning and pre-recorded audio descriptions)	Establish a procedure that all new websites created cannot be published unless meeting the WCAG 2.0 Level A requirements.	January 1st, 2014 In Progress

		Train web designers of the WCAG requirements.	
Reg . 191/11 s. 22 Recruitment	Notify Employees and Public about the availability of accommodation for applicants with disabilities in recruitment processes.	Statement on all job postings, internally and externally.	
Reg . 191/11 s. 23 Recruitment	Notify applicants once selected in assessment process that accommodations are available upon request in relation to materials or processes to be used. If requested, consult with applicant and provide arrangement that accounts for the applicant's accessibility needs.	When inviting all applicants for interview, notify that accommodations are available, if requested assess each request on an individual basis to accommodate.	January 14 2014
Reg . 191/11 s. 24 Recruitment	When making offers of employment, notify successful applicant of its policies for accommodating employees with disabilities	Add notification to list of offer details (offer letters) HR sends out.	January 1st, 2014
Reg. 191/11 s. 25 Informing employees of supports (Accommodation)	Every employer shall inform its employees of policies used to support employees with disabilities, including policies on the provision of job accommodations that take into account accessibility needs. Provide this information as soon as practicable after they begin their employment. Employers shall provide updated information to its employees whenever there is a change to existing policies on the provision of job accommodation	Add duty to accommodate policies in orientation. Notify employees of any changes/updates to the policy.	January 1st, 2014
Reg. 191/11 s. 26 Accessible formats & Communication supports for employees	When requested, consult the needs and provide in accessible format: a)information needed in order to perform the employee's job b)information generally available to employees in the workplace	If requested, all duty outlines and job descriptions will be made available in appropriate formats (based on consultation). Intranet – Artery amended to reflect alternate formats available.	January 1 st 2014
Reg. 191/11 s. 27 Workplace emergency response information	Provide individualized workplace emergency response information to employees who have made aware to their employer the need for accommodation	Individualized work plans have been created by Occ. Health to accommodate those employees who have made aware of their need.	January 1 st 2012
Reg. 191/11 s. 28 Documented individual accommodation plan	Update policy for developing documented individual accommodation plans (IAP)for employees with disabilities	Update HR policy.	January 1 st 2014

Reg. 191/11 s. 29 Return to Work Policy	Update & document a return to work (RTW) policy for those who have been absent from work due to a disability and require disability-related accommodations in order to return to work. RTW shall include steps employer will take to facilitate RTW, and use the individualized accommodation plans	As employees are in process of RTW, Occ. health & HR will work with employee to create IAP and help the employee to get back to work.	
Reg. 191/11 s.30 Performance Management	Take into account the accessibility needs of employees with disabilities, as well as individual accommodation plans, with using its performance management process	Add a statement within PEP (Personal Excellence Program) that managers have taken into account accessibility needs.	December 2013
Reg. 191/11 s. 31 Career Development and Advancement	Take into account the accessibility needs of employees with disabilities as well as any IAP's when providing career development and advancement to its employees with disabilities.	All internal job postings will state accessibility needs will be taken into consideration during selection process.	January 1 st 2014

Review and Monitoring Process

The Accessibility Committee will meet at a minimum on a bi-annual basis to review progress. Dates and times will be flexible. Minutes of the meetings and the Accessibility Plan will be provided to the Senior Management Team.

Communication of the Plan

The Hospital's Accessibility Plan is posted on the WH intranet (Artery). It will also be posted on the WH website www.wgh.on.ca. On request, the plan is available in alternate formats.

Appendix 1

Accessibility Working Group Terms of Reference

Purpose

- To ensure a formalized approach to accessibility planning;
- To provide leadership and direction in addressing accessibility issues and accessibility initiatives within Woodstock Hospital.

Responsibility of Accessibility Working Group

- To recognize and support accessibility initiatives within the hospital;
- To ensure organizational compliance with the requirements of the Accessible Customer Service standard of the Accessibility for Ontarian with Disabilities Act (AODA);
- To create awareness and to ensure compliance with the Policy and the Accessibility Standards for Customer Service and IASR;
- To maintain a multi-year accessibility plan as required in the Integrated Accessibility Standards Regulation (191/11);
- To provide the President & CEO and the Board of Trust with an annual accessibility plan status update. To provide feedback to external stakeholders as appropriate;
- To collaborate with other committees including the Woodstock Hospital Accessibility Advisory Committee and teams as appropriate;
- Document and respond to accessibility feedback received from internal and external stakeholders.

Reporting Structure

The Accessibility Working Group reports to the President & CEO through the Chief Operating Officer.

Membership

The Accessibility Planning Working Group will be comprised of representatives from but not limited to:

- Senior Team
- Facilities Services
- Environmental Services
- Human Resources
- Nursing
- Physiotherapy/Occupational Therapy
- Speech language pathology
- Communication/patient registration
- Staff Development
- Capital Planning (Resource)

Membership will be reviewed every three years.

Meetings

Meetings held bi-annually and as required at the call of the chair.

Appendix 2

Accessibility Advisory Committee Terms of Reference

Purpose

- To promote public awareness and sensitivity about accessibility issues for persons with disabilities;
- To encourage co-operation among all service and interest groups;
- To identify and document relevant issues and concerns;
- To recognize that the needs of all persons are constantly changing, growing and in need of refinement.

Responsibilities

- To provide input to the multi – year Accessibility Plan, providing feedback on an annual basis;
- Advise the Accessibility Working group of barriers identified within community;
- Report on work completed by City of Woodstock Accessibility Advisory Committee as it might pertain to Woodstock Hospital.

Membership

- Members for the committee are to be drawn from the City of Woodstock and County of Oxford;
- Members from the City of Woodstock Accessibility Advisory Committee;
- Membership will be reviewed annually;
- Members will serve a 2 year term with the possibility of renewal.

Meetings

- Joint meetings will be held with the Accessibility Planning Working Group bi-annually or at the call of the chair.