

niagarahealth

Extraordinary Caring. Every Person. Every Time.

Accessibility Plan for Niagara Health

2016-2021



Prepared by:

NH Accessibility Advisory Committee

Updated by: Quality, Patient Safety and Risk Department

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Executive Summary

On June 13, 2005, the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) received Royal Assent and is now law. The purpose of the AODA 2005 is to benefit all Ontarians by developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with disabilities by 2025. Standards will be developed by the Government of Ontario in collaboration with persons with disabilities, representatives of industries and of various sectors of the economy. Both the public and private sectors that provide goods and services to people in Ontario will have to meet certain accessibility standards in five important areas; Customer Service (O. Reg. 429/07), Information and Communications, Employment Standards, and Transportation Standards (O. Reg. 191/11 – Integrated Accessibility Standards (IASR)), and pending Built Environment Standard.

Public sector organizations including government ministries, municipalities, hospitals, public transportation organizations, school boards, colleges and universities are required to continue to prepare and make public annual accessibility plans as their legal obligations under the Ontarians with Disabilities Act, 2001 (ODA) remain in force until such time that the Act is repealed.

Communities are changing throughout the Province of Ontario as the population ages. Approximately 20% of Ontarians are likely to have a disability in 20 years. A mandate to remove barriers by 2025 will allow communities to fully accommodate an aging population, persons with disabilities; everyone.

Like other organizations in Ontario, the NH Accessibility Plan is prepared to address any issues and barriers preventing persons with disabilities from participating fully in the life of the community. Ultimately, the Accessibility Plan is intended to identify, remove and prevent all barriers that may impede patients, staff, contractors, volunteers and visitors from accessing and using health care services within the responsibility of the Niagara Health System.

Definitions for “disability” and “barrier” as they appear in the Accessibility for Ontarians with Disabilities Act (AODA) and Ontarians with Disabilities Act (ODA):

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”).

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, information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice; (“obstacle”).

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 barriers to enable their full participation in the life of the province. To this end, the Act requires each hospital to prepare an annual accessibility plan; to consult with persons of disabilities in the preparation of the plan; and to make the plan public.

The AODA builds on the Ontarians with Disabilities Act, 2001 by defining the standards and enforcement measures to realize full accessibility in Ontario by 2025. Under this legislation, there exists the Standards Development Process to provide guidance to all public organizations with responsibilities under the legislation. The five Accessibility Standards are:

- Customer Service
- Transportation
- Information and Communication
- Built Environment
- Employment

Niagara Health is committed to continual improvement, of access to hospital facilities, policies, programs, and services for patients, employees, volunteers, physicians, agents/contractors, and members of the community. This plan reviews the ongoing activities, of the hospital to remove and prevent barriers to accessibility, as well as the plans for the coming years. It also establishes the requirement to review by-laws, policies, programs, and services to identify improvements necessary to meet the standards. Niagara Health will make the accessibility plan available on its website along with contact information for any questions related to the plan or availability in accessible formats.

Niagara Health has established an Accessibility Advisory Committee to address accessibility issues and compliance of the standards. In addition to this the advisory structure includes an Executive Sponsor - Vice-President, Patient Services and Strategy, and the Senior Executive Team that provides oversight to ongoing activities.

Description of Niagara Health

Niagara Health (NH) is a multi-site hospital amalgamation comprised of five sites serving 434,000 residents across the 12 municipalities making up the Regional Municipality of Niagara.

- Douglas Memorial Site
- Greater Niagara General Site
- Port Colborne Site
- St. Catharines Site
- Welland Site

Niagara Health provides a wide range of inpatient and outpatient clinics and services; including Acute Care, Surgical Care, Emergency and Urgent Care, Kidney Care, Complex Care, Mental Health and Addiction, Long Term Care and Cancer Care.

Niagara Health has approximately 4,800 employees, 600 physicians and 850 volunteers, with an annual operating budget of approximately \$550 million.

Our Purpose

Extraordinary Caring. Every Person. Every Time.

Our Vision

A Healthier Niagara

Our C.O.R.E. Values

Compassion in Action
Driven by Optimism
Achieving Ambitious Results
Extraordinary

Aim

The 2016 - 2021 Accessibility Plan reviews the ongoing accessibility initiatives at the Niagara Health, builds on the measures that have been addressed in past years and includes improvement planning for the coming years. Included is a status report of the activities undertaken to identify, remove and prevent barriers to people with disabilities who live, work in or use our facilities and access our hospital services. The 2016 - 2021 plan details measures to be taken in the coming years to identify and address further barriers.

Objectives

The 2016-2021 Accessibility Plan for the Niagara Health System:

- Identifies the activities that have been completed to remove and prevent barriers to accessibility within Niagara Health, and plans for the coming years;
- Identifies the by-laws, policies, programs and services we are required to review to make improvements necessary for equal access to people with disabilities to our health care services;
- Describes how Niagara Health will make the accessibility plan available to the public.

Refer to Appendix C – Barrier Identification, Removal and Prevention Strategies.

Niagara Health Accessibility Advisory Committee

Niagara Health has an established Accessibility Advisory Committee (AAC) that will ensure compliance with the legislative requirements, and address any accessibility issues and concerns.

The overall response to the accessibility legislation is overseen by an Executive Sponsor - Vice-President of Quality, Community Development, Mental Health & Addictions, and the Niagara Health Executive Leadership Team.

Refer to Appendix A – Accessibility Advisory Committee Terms of Reference.

Refer to Appendix B – Accessibility Legislation Compliance Review.

Review and Monitoring Process

The Accessibility Plan shall include a review of actions taken and strategies to be taken in the following years to continue progress toward accessibility of Niagara Health. All plans will be submitted through the Executive Leadership Team, Resource and Audit Committee, and Board of Trustees.

Communication Strategy

Niagara Health will use the following avenues (or others as appropriate) of communication to inform stakeholders of planned changes to barriers and our successes in barrier removal.

- Intranet
- Website
- Online learning management platform for staff and partners (LERNH)
- Orientation – New Leaders and New Employees (in person and online)
- Presentations to groups – e.g., Site Leadership, Community Groups, Department meetings, Unions, Vendors/Contractors, etc.
- Hospital Newsletters – Foundation Newsletter, Niagara Health This Week, etc.
- Patient / consumer satisfaction surveys
- Local news media
- Physician Groups – e.g., Medical Advisory Committee, Department of Family Practice, etc.
- SharePoint Portal
- Flyers in waiting areas
- Bulletin boards
- Admission and pre-admission process
- Promotional materials and advertising through Recruitment
- Communication of initiatives through existing publications or through newly created brochures specifically designed to address accessibility issues

The 2016-2021 Accessibility Plan for the Niagara Health System is posted on the Niagara Health website at <https://www.niagarahealth.on.ca/site/about-us/accessibility>.

Requests may be made for alternate formats through Patient Relations.

ACCESSIBILITY ADVISORY COMMITTEE

<p>Mandate</p>	<p>The legislation requires all public hospitals to develop an accessibility plan with the end goal of full accessibility by 2025. The Niagara Health Accessibility Advisory Committee is instituted to assure commitment to accessibility planning and to meet the hospital’s obligations under the <i>Ontarians with Disabilities Act, 2001</i> (ODA) and the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> (AODA).</p>
<p>Duties and Responsibilities</p>	<p>The <i>Integrated Accessibility Standards Requirements, 2011</i> (IASR) requires that organizations “establish, implement, maintain and document a multi-year accessibility plan, which outlines the organization’s strategy to prevent and remove barriers and meet its requirements under this regulation”.</p> <p>The purpose of the AAC is to:</p> <ol style="list-style-type: none"> 1. Ensure that Niagara Health complies with the requirements of the ODA, AODA, and IASR through the development of a documented and published accessibility plan. 2. Report on the measures the organization has taken to identify, remove and prevent barriers for people with disabilities. 3. Describe the measures in place to ensure that the organization assesses its regulations, policies, programs, practices and services to determine their effect on accessibility for people with disabilities. 4. Draft the policies, programs, practices and services that the organization will review in the coming year to identify barriers to persons with disabilities. 5. Describe the measures the organization intends to take in the coming year to identify, remove and prevent barriers to persons with disabilities. 6. Make the accessibility plan available to the public. 7. NHS encourages active participation from employees and community representatives with disabilities as it plans for and evaluates the Annual Accessibility Plan. 8. Identify roles and responsibilities relating to each facility, the delivery of service to patients and as an employer.

ACCESSIBILITY ADVISORY COMMITTEE **TERMS OF REFERENCE**

<p>Membership and Terms of Office</p>	<p>Membership of the Accessibility Advisory Committee includes but is not limited to the following:</p> <ul style="list-style-type: none"> • Corporate Communications • People and Organizational Development • Occupational Health and Safety • Information and Communications Technology • Quality, Patient Safety and Risk Management • Health Records and Admitting • Capital Planning and Redevelopment • Complex Care and Alternate Level of Care • Welland Hospital Site, Regional Medicine • Patient Relations • Community Member/Organization Representatives • Program Representatives <p>All community representative members will have a two-year term, giving four months' notice of intent to continue serving prior to the expiry of the term to allow for solicitation of replacement representatives if required.</p> <p>Applications for community representatives shall be reviewed every two years.</p> <p>Some members will be identified as permanent members of the committee and become part of the individual's portfolio of responsibility:</p> <ul style="list-style-type: none"> • Occupational Health and Safety, • Director of Patient Centered Care, • Rehabilitation Services, • Director of Quality, Patient Safety and Risk
<p>Chair</p>	<p>The Accessibility Advisory Committee is chaired by the Emergency Management Specialist or a designate appointed by the Director of Quality, Patient Safety and Risk.</p>
<p>Frequency of Meetings and Manner of Call</p>	<p>The Accessibility Advisory Committee as a whole will meet on a bi-monthly basis to review the progress of their annual plan. Working groups will meet as required.</p>
<p>Quorum</p>	<p>Quorum will be considered to be met when 50% +1 of the specific roles listed in the membership section above are represented at a meeting.</p>
<p>Commitment</p>	<p>In fulfilling the AAC responsibilities, its membership and the organization in which they are responsible will strive at all times to provide its goods and services in a way that respects the dignity and independence of our patients and internal and external community partners.</p> <p>All people within the community will have equal opportunity to access the goods and services provided in a way that reflects the uniqueness of our community members.</p>

ACCESSIBILITY ADVISORY COMMITTEE **TERMS OF REFERENCE**

<p>Guiding Principles</p>	<ol style="list-style-type: none"> 1. To support the continual improvement of access to our facilities, policies, programs, practices and services for the patients and their family members, staff, health care practitioners, volunteers and members of our community. 2. To provide opportunity for the participation of persons with disabilities or those who represent persons with disabilities in the development and review of the Niagara Health System’s annual accessibility plan. 3. To ensure that the Niagara Health Systems by-laws and policies are consistent with the principles of the <i>Accessibility for Ontarians with Disabilities Act (2005)</i> Customer Services Standard and the Integrated Accessibility Standard. 4. Ongoing communication and education of annual accessibility plan to all stakeholders and implementation of the plan and its status. 5. To ensure the identification of barriers and the remediation of these barriers with regard to the following: <ol style="list-style-type: none"> a. Physical b. Architectural c. Informational d. Attitudinal e. Technological f. Policies and practices
<p>Reporting</p>	<p>The AAC is responsible to Quality Council / Executive Leadership and ultimately to the Board of Directors.</p> <ol style="list-style-type: none"> 1. All Programs and Departments are accountable to the AAC for the initiations that are outlined within those areas. 2. It is the membership’s responsibility to monitor progress about the implementation of the identified plan. Monitoring will be done in partnership with the identified Most Responsible Person (MRP) within the organization that has been given the specified task to review, revise and implement the identified components of the yearly plan. 3. Regular presentations will be given to the Executive Leadership Team and the Quality Committee of the Board annually and/or when requested. 4. An annual report will be given to Executive Leadership and the Quality Committee of the Board on an annual basis.
<p>Approval Date</p>	<p>03 August 2018</p>
<p>Last Review Date</p>	<p>06 April 2018</p>

NHS Accessibility Legislation Compliance Review

Accessibility for Ontarians with Disabilities

STATUTE / ACT	Summary	Regulatory Requirements	NHS Most Responsible Group (ex: Privacy, QPSR, HR)	Evidence of Compliance (i.e. policy)	Gaps and Action Plan	Timeline
				Compliant		
				In Progress		
				Non-Compliant		
Accessibility for Ontarians with Disabilities Act	<p>The purpose of the Act is to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises on or before January 1, 2025, through the development, implementation and enforcement of accessibility standards.</p> <p>The Act sets out the legal framework for these standards, including</p> <ul style="list-style-type: none"> - The manner by which the accessibility standards are established, - An obligation to comply with the standards, - Inspection powers of the applicable Ministry, - Offences and penalties for violations. 	<p>Compliance with Standard "...shall comply with the standard within the time period set out in the standard" 2005, c. 11, s. 13</p>	QPSR AAC	As per each standard		
		<p>Accessibility Report "...shall file an accessibility report annually..." 2005, c. 11, s. 14 (1)</p>	QPSR	Filed every 2 nd year as per ministry (2019 is a reporting year)		
		<p>Report available to public "...shall make report available to the public..." 2005, c 11, s. 14 (2)</p>	Communications QPSR	Report published on www.niagarahealth.on.ca		
		<p>Form "...report shall be in the form approved by the Minister..." 2005, c. 11, s. 14 (3)</p>	QPSR	Filed in accordance with standard		
		<p>Content "an accessibility report shall contain such information as may be prescribed" 2005, c. 11, 2. 14 (4)</p>	QPSR AAC	Filed in accordance with the standard		

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		Certification of accessibility report “report shall include a statement certifying that all information required to be provided in the report under the Act has been provided and that the information is accurate and the statement shall be signed” 2005, c. 11, s. 15 (1)	QPSR AAC	Certified in accordance with the standard. Executive Vice President of Quality, Community Development and Mental Health and Addictions legally binds the organization to the report.		
Ontario Regulation 429/07 – Accessibility Standards for Customer Service	Note: For the purposes of this compliance review, NHS is defined as a designated public sector organization as per the Accessibility Standards for Customer Service Provides for standards for serving customers, including: - Establishment of policies, practices and procedures governing the provision of goods and services to persons with disabilities,	Establishment of policies, practices and procedures “...shall establish policies, practices and procedures governing the provision of its goods or services to persons with disabilities” “...shall use reasonable efforts to respect the dignity and independence; must be integrated; equal opportunity..”	AAC QPSR	Policy 360-020-008		Updated November 2019

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				Non-Compliant		
	<ul style="list-style-type: none"> - Use of service animals and support persons, - Posting of notices of temporary disruptions, - Training of every person who deals with members of the public or third parties on behalf of the good/service provider and every person who participates in developing provider's policies, practices and procedures, - The feedback process for providers of goods and services. 	<p>"...polices must deal with the use of assistive devices...."</p> <p>"when communicating.. shall do so in a manner that takes into account the person's disability"</p>				
		<p>Use of service animals and support persons</p> <p>"...shall prepare documents describing its policies, practices and procedures with respect to the matters governed...."</p>	IPAC QPSR	Existing Policy 360-020-009 to be superseded by new policy: "Animals at Niagara Health" 2020.		
		<p>Notice of temporary disruptions</p> <p>"...shall give notice..."</p> <p>"...shall give reason...and provide alternate facilities or services..."</p> <p>"...post the information..."</p> <p>"...shall prepare a document that sets out the steps to be taken in connection with a temporary disruption"</p>	QPSR Facilities Management	Policy 360-020-009		

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				Compliant		
				In Progress		
				Non-Compliant		
		<p>Training for staff, etc. "...shall ensure training to any person who deals with the public; develops policies.." "...must include purpose of the Act; how to interact with persons with a disability.." "...training must be provided as soon as practical.." "training on an on-going basis as policies change.." "...training policy includes summary of training contents; when training is to be provided..." "...training records shall be kept..."</p>	QPSR HR	Policy 360-020-009 Access Forward online Training modules for all staff and leaders		
		<p>Feedback process for providers of goods or services "...shall establish a process for receiving and responding to feedback..."</p>	QPSR Patient Relations	Policy 360-020-009		

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				Compliant		
				In Progress		
				Non-Compliant		
		And shall make process readily available to the public” “...shall prepare a document describing its feedback process..”				
		Notice of availability of documents “...shall notify person using goods or services that documents required under this Act are available...” “...by posting on website..”	QPSR Patient Relations	Policy 360-020-009		
		Format of documents “...shall give documentation or information contained in document in a format that takes into account the person’s disability”	QPSR Corporate Communications Patient Relations	Policy 360-020-009		
Ontario Regulation 191/11 –	Note: For the purposes of this compliance review, NHS will be defined as a designated public sector organization	Establishment of accessibility policies “...shall develop, implement and maintain policies governing how to	QPSR AAC	Policy 360-020-008		Due Jan 1, 2013

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				Non-Compliant		
Integrated Accessibility Standards	<p>Provides for information and communication standards, and transportation standards including:</p> <ul style="list-style-type: none"> - The development, implementation and maintenance of policies governing how the organization achieves or will achieve accessibility and accessibility plans, - The procurement or acquisition of goods, services or facilities, - The design, procurement or acquisition of self-service kiosks, - The training of all persons who provide goods, services or facilities on behalf of the organization and every person who participates in developing the organization's policies, - The provision of emergency procedure, plan or public safety information in an accessible 	<p>achieve accessibility in accordance to this regulation..."</p> <p>"...shall include a statement of organizational commitment..."</p> <p>"...shall make the policies available..."</p>				
		<p>Accessibility plans</p> <p>"..shall establish, implement, maintain and document a plan outlining strategies to prevent and remove barriers..."</p> <p>"...post plan on website"</p> <p>"...review and update at least once every 5 years"</p>	QPSR AAC		Accessibility Plan for the NH 2016-2021 posted on NH external website.	Jan 29, 2016-21
		<p>Procuring or acquiring goods, services or facilities</p> <p>"..shall incorporate accessibility criteria and features when procuring or acquiring goods and services..."</p>	AAC Materials Management		Policy statement on all RFPs	Jan 1, 2013

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				Compliant		
				In Progress		
				Non-Compliant		
	format or with appropriate communication supports, - The recruitment process, notice to successful applicants, notice to employees of supports, workplace emergency response information, documented individual accommodation plans and return to work process.	If not practicable to do so, organization must provide an explanation upon request.				
Self-service kiosks “..shall incorporate accessibility features when designing, procuring or acquiring self-service kiosks”		Patient Registration	Any new kiosks implemented on a go-forward basis will comply with the regulations.		Jan 1, 2013	
Training “...training is provided to all employees, volunteers, persons developing policies, all other person providing goods and services” “Training shall be appropriate to the duties of the person, and provided as soon as practicable, when changes to policies; records will be kept		AAC HR	Policy 360-020-009		Due Jan 1, 2014	
Information and Communications Standards						
		Feedback “feedback processes are accessible by providing or	AAC Patient Relations Communications	Policy 360-020-009		Due Jan 1, 2014

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				Compliant		
				In Progress		
				Non-Compliant		
		arranging for the provision of accessible formats...” “...shall notify the public about availability of accessible formats”				
		Accessible formats and communication supports “upon request provide or arrange for the provisions of accessible formats and communications supports for person with disabilities” - Timely manner - At a cost no more than what is charged to another person - In consultation with person to determine suitability of accessible format - Notify the public about availability of accessible formats and communication supports	QPSR	Policy 360-020-012		Due Jan 1, 2015
		Emergency procedure, plans or public safety information		n/a – information is not available to the public – internal procedures only		

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				Compliant		
				In Progress		
				Non-Compliant		
		Accessible websites and web content "shall make internet websites and web content conform with the WWW Consortium Web Content Accessibility Guidelines"	AAC Communications	Website meets regulatory requirements		Jan 1, 2014
		Educational and training resources and materials		n/a		
		Training to educators		n/a		
		Producers of educational or training material		n/a		
		Libraries or educational and training institutions		n/a		
		Public libraries		n/a		
Employment Standards						
		Recruitment "every employer shall notify employees and public about the availability of accommodation for applicants with disabilities in recruitment process"	HR	In accordance with the Accessibility for Ontarians with Disabilities Act, 2005 and the Ontario Human Rights Code, The NHS will provide accommodations throughout the recruitment and selection process to applicants with disabilities. If selected to participate in the recruitment and		Jan 1, 2014

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				Compliant		
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				Non-Compliant		
				selection process, please inform Human Resources of the nature of any accommodation(s) that you may require in respect of any materials or processes used to ensure your equal participation.		
		Recruitment, assessment or selection process -advise that accommodations are available upon request within assessment or selection process - consult with applicant if accommodation is requested to determine suitability	HR	Recruitment is adding communication to their invitation to the interview process that will include the statement above as well as posting the statement to the NHS Careers web page.		
		Notice to successful applicants “shall notify successful applicant of policies or accommodating employees with disabilities”	HR	When making offers of employment Recruitment notifies the successful applicant of its policies for accommodating employees with disabilities in the offer letter.		

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		<p>Informing employees of supports “shall inform employees of policies used to support employees with disabilities, including provision of job accommodation “provide this information to new hires as soon as practicable” “advise staff of change to these policies”</p>	HR	Employee’s Health and Abilities (EHA’s) has a program to support workers with disabilities and the need for Accommodation. This is highlighted to employees at New Hire Orientation and information is also located on our Source Net Web page under Return to Work where there are brochures and our Return to Work/Accommodation Policy. EHA’s consultant’s deal directly with the employee and managers. Any changes in practice are communicated Organizationally through the Occ. Health Dept. via email and updates to our Web page.		
		<p>Accessible formats and communication supports for employees</p>	HR	When an employee with a disability so requests it, the employee’s Manager shall consult with the employee		

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		<p>“employer shall consult with employee to provide or arrange provision of accessible formats</p>		<p>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. O. Reg. 191/11, s. 26 (1). (2) The manager shall consult with the employee making the request in determining the suitability of an accessible format or communication support</p>		
		<p>Workplace emergency response information “shall provide individualized workplace emergency response info to employees with a disability” “with employees consent, provide individualized</p>	HR		Accessibility Coordinator works with HR to provide customized plans on a case-by-case basis	Jan 1, 2012

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		emergency plan to designated person” “review plan when the employee moves to different location, needs change, review general emergency response plans”				
		Documented individual accommodation plans “shall have written process for the development of documented individual accommodation plans for employees with disabilities	HR	On Sourcenet under the Occupational Health and Safety tab under Return to Work you will find the RTW/Accommodation Policy for the NHS.		
		Return to work process “shall have return to work process who have been absent from work due to disability and require accommodation	HR	We have a RTW/Accommodation Policy.	SourceNet	
		Performance management “shall take into account the accessibility needs of employees with disabilities, including	HR	Managers may adapt the performance management process to take into account the accessibility needs of employees with disabilities as well as individual accommodation		

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		individual accommodation plans”		plans in respect of employees with disabilities with the goal of facilitating employee success as required.		
		Career development and advancement “shall take into account the accessibility needs of its employees with disabilities and individual accommodation plans..”	HR	In accordance with the Accessibility for Ontarians with Disabilities Act, 2005 and the Ontario Human Rights Code, The NHS will provide accommodations throughout any career development and advancement taking into account the accessibility needs of the employee with the disability as well as any individual accommodation plan.		
		Redeployment “shall take into account the accessibility needs and individual accommodation plans”	HR	Standard practice – duty to accommodate. Signed letter of understanding.		
Transportation Standards						
	N/A	N/A				

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				In Progress		
				Non-Compliant		
Ontarians with Disabilities Act 2001	The Act sets out requirements for the purpose of improving opportunities for persons with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation, including the preparation of an accessibility plan and consultations with persons with disabilities and others in preparing the plan and the permissibility of joint accessibility plans in certain circumstances.	15.(1) each year the NHS shall: a) prepare an accessibility plan; and b) consult with persons with disabilities and others in preparing the plan (2) the plan shall report on measures taken to identify, remove and prevent barriers; Measures in place to ensure that NHS assesses its proposals for by-laws, policies, programs, practices and services to determine their effect on accessibility; List of by-laws, policies, etc that the NHS will review in the coming year in order to identify barriers; Measures that NHS intends to take to remove barriers in the upcoming year (4) make the accessibility plan available to the public	AAC QPSR	2016-2021 plan available on public website www.niagarahealth.on.ca	Consultation with persons with disabilities as community representative members of the Niagara Health AAC began in December 2017. Meetings for 2018-onward are currently scheduled bi-monthly.	Dec 2017

NHS Accessibility Legislation Compliance Review

Accessibility for Ontarians with Disabilities

STATUTE / ACT	Summary	Regulatory Requirements	NHS Most Responsible Group (ex: Privacy, QPSR, HR)	Evidence of Compliance (i.e. policy)	Gaps and Action Plan	Timeline
				Compliant		
				In Progress		
				Non-Compliant		

ACCESSIBILITY PROJECTS

Date	Site	Dept.	Project	Comments	Completed
2015-02	PCG	Facility	Fire Alarm Addressable, Audio and Strobes	Patient and Staff accessibility	✓
2015-04	DMH	Facility	Fire Alarm Addressable, Audio and Strobes	Patient and Staff accessibility	✓
2016	PCG	Exterior Spaces	Repair of ramp etc.	W/C access	✓
2016	Multi	Public Spaces	WHS, PCG, Allied Health elevator refurbishing	Refurbished elevators at multiple sites	✓
2016	WHS	Public Spaces	Replaced flooring and installed hand rails	Installed hand rails where none existed previously	Ongoing
2016-06-16	SCS	Surgical Services	ADO on door into Surgical Services Area Level 2	Patient and visitor accessibility	✓
2016-10-28	GNG	Cafeteria	ADO on cafeteria door	Patient and visitor accessibility	✓
2016-12-12	SCS	Mental Health	Modify Tub Room to Ligature Free Shower Room	Accommodate unsupervised access	✓
2016-12-12	PCG	Patient Registration	ADO installed	Patient accessibility	✓
2017-02	GNG	Emergency	ADO See and Treat	Patient accessibility	✓
2017-02-15	WHS	MacLean Building	ADO entrance MacLean Mental Health Lobby	Patient accessibility	✓
2017-02-15	SCS	Oncology	Patient Queuing in Reception Area	Improvement in patient waiting room	✓
2017-02-15	WHS	Diagnostic Imaging	New ceiling lift CT suite	Patient treatment	✓
2017-02-17	SCS	OBSP	ADO for OBSP dept. and patient washroom	Accessibility	✓
2017-03-06	SCS	Medical Day Clinic	Install delayed action door closer	Allow door to remain open longer for patients with mobility issues.	✓
2017-03-21	SCS	ED	Install door hold opener on doors to Triage and UCC	Wheelchair patients easier access	✓
2017-11-02	GNG/WH	ADO	ADO to courtyard	Allow for wheelchair patients to access outside courtyard.	✓
2017-11-03	GNG/WH	Patio Furniture	W/C accessible patio furniture installed	Allow for wheelchair patients to sit in the courtyard.	✓
2018-05-09	GNG	Therapeutic Day Room and Shower Room	Door widening	Allow for wheelchair to access rooms	✓
2018-05-09	SCS	Volunteer Services	ADO Volunteer Services Area	Allow for wheelchairs to access area	
Date	Site	Dept.	Project	Comments	Completed

2018-05-09	SCS	Loading Dock	ADO	Form of accessibility for vendors	✓
2018-03-31	PCG	UCC	Handrails installed in PCG UCC corridor	Assist patients	✓
2018-05-14	SCS	Patio Furniture	W/C accessible patio furniture for Terrace at SCS	Allow for wheelchair patients to sit in the outside courtyard	✓
2018	WHS	Diagnostic Imaging	Installed new handrails and flooring		✓
2018	DMH	Exterior spaces	Install new ADO for exterior doors (courtyard)	Access to outside	✓
2018	DMH	Cafeteria	ADO installation	w/c access easier	✓
2018	WHS	Complex Care	Install new handrails and flooring in corridors and installed new accessible washroom fixtures in patient washrooms		✓
2018	PCG	2W	ADO installation	ADO installed to assist w/c patients	✓
2019	WHS	Public Spaces	Refinish main public washrooms	Awarded and start date is August 29, 2019	Underway
2019-03-22	SCS	Nephrology	Installation of door friction hold opens on door 3A15.051-D.01 and 3A15.037-D.02 to make it accessible		Underway
2019-04-16	Welland Avenue	Addictions	New facility designed and constructed at 264 Welland Avenue in St. Catharines	Facility was designed and constructed to meet accessibility code.	✓
2019-07-10	WHS	Woolcott Staff Washroom	Update staff washroom with accessible stall	Remove former shower	Out for Tender
2019-09-18	SCS	CTU	ADO	Accessibility for students and others	Underway
2019-09-27	WHS	Kitchen (main)	Install new nonslip floor		Underway

