THE MIDDLESEX HOSPITAL ALLIANCE

Strathroy Middlesex General Hospital and Four Counties Health Services

Multi-Year Accessibility Plan

November 2021 – October 2026

Submitted to

Todd Stepanuik, President and Chief Executive Officer

Plan submitted and reviewed by AODA Committee: Laurie McGill (Chair) Occupational Therapist; Alasdair Smith VP Finance & CFO; Ryan Whitney, Manager Facilities & Maintenance Service; Wes Suhonos, Manager Information Services & Technology; Steph Ouellet, VP Strategic Partnerships

The Publication is available at www.mhalliance.on.ca
and is available in alternate formats upon request
Anyone wishing to provide feedback regarding this plan may contact the hospital by
Phone 519-245-1550 ext 5941
Or
Email patientrelations@mha.tvh.ca

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Background and Summary

The purpose of the Ontarians with Disabilities Act, 2001 (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. To this end, the ODA requires each organization to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

With the introduction of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the subsequent Integrated Accessibility Standard Regulations (O. Reg. 197/11); the requirement to create, maintain and communicate a multi-year accessibility plan replaced the annual plan requirement. This document is the multi- year accessibility plan for the Middlesex Hospital Alliance (hereinafter referred to as "MHA"). The plan builds on previous years plans and includes measures that the MHA will take in the upcoming years to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of the MHA. The Plan will be reviewed annually and updated as barriers are identified and/ or eliminated.

At the MHA we are committed to improving access to our facilities, services and care for patients, their families, visitors, staff and volunteers.

MHA is committed to:

➢ the continual improvement of access to hospital facilities, policies, programs, practices and services for patients, their family members, staff and volunteers
➢ the participation of persons with disabilities in the development and review of its annual plan
➢ the provision of quality services to all patients, their family members, and members of the community with disabilities

Middlesex Hospital Alliance

The Middlesex Hospital Alliance (MHA) is comprised of two partner sites, Strathroy Middlesex General Hospital (SMGH) and Four Counties Health Services (FCHS) with a combined operating budget of $60M. The hospitals serve approximately 78,000 residents in Middlesex, Lambton, Elgin and Kent Counties. SMGH operates 54 beds and is a full service family-centred community hospital providing 24/7 emergency care and a comprehensive range of diagnostic and ambulatory services, surgical services and Obstetrics, as well as both primary and secondary care. FCHS operates 12 beds and is a primary care facility providing 24/7 emergency care, diagnostic services, inpatient acute care as well as ambulatory and physiotherapy clinics. Within our Middlesex Hospital Alliance family, over 675 physicians and specialists, employees and volunteers care for the patients in our communities.

Mission, Vision and **Principles**

Our Renewed Mission

To provide the healthcare we would expect for our own families.

Our Vision

Exceptional Care by Exceptional People

Our Principles

We are committed to providing the highest standards of quality care to all of our patients and families. In our commitment to champion excellent health services for our community, our actions are guided by five core principles:

S	**E**	**R**	**V**	**E**
Safety for our patients, staff and visitors	Excellence in our performance	Respect for everyone all the time	Value in all that we do	Enthusiasm as our way of life

Introduction to Plan

The Ontario government's goal is a fully accessible Ontario by 2025. In 2001, the Ontarians with Disabilities Act (ODA) was passed. This was followed in 2005 by the Accessibility for Ontarians with Disabilities Act (AODA), and in 2008 with the Accessibility Standard for Customer Service, Ontario Regulation 429/07. The Integrated Accessibility Standards, Ontario Regulation 191/11 is the latest standard issued under the AODA 2005 and became law on June 3, 2011. It covers accessibility standards in information and communication, employment, transportation and the design of public spaces. In 2016 the Accessibility Standard for Customer Service became part of the Integrated Accessibility Standards, Ontario Regulation 191/11.

The preceding Ontarians with Disabilities Act, (ODA 2001) remains in force until retracted. The purpose of this Act 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." This Act mandates hospitals and other identified public sector organizations to write, approve, endorse, submit, publish, and communicate their accessibility plans. The Middlesex Hospital Alliance (Four Counties Health Services) and (Strathroy Middlesex General Hospital) is committed to providing an environment free of barriers for people with a disability.

A "Barrier" is defined as:

a)   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, a policy or a practice.

A Disability is defined as:

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

The MHA has undertaken projects throughout the years to enhance the accessibility of the hospital, and its services. The sites of the MHA will continue to do so with the goal of eliminating any barriers to access, communication and service for those with disabilities.

Accessibility Planning at the Middlesex Hospital Alliance

Accessibility Planning was initially the responsibility of the Joint Occupational Health and Safety/Environment Team at each individual site. In October 2012, this responsibility moved to the MHA Facilities Management Department in consultation with senior leadership. A working group was established to ensure the involvement of staff and persons with disabilities in the review of this accessibility plan moving forward. In 2015, the responsibility of Accessibility Planning transitioned to an Occupational Therapist with continued consultation with Senior Leadership and the working group.

Staff, volunteers, third party contracts, and physicians have received training on the accessibility standards and have reviewed the corresponding policies as part of our plan to enhance accessibility to customer services at the MHA.

The accessibility working group is dedicated to identifying, removing and preventing barriers to people with disabilities. Furthermore, the physical environment is an area of focus that is part of our Senior Friendly Care strategy. The accessibility plan is available on the Middlesex Hospital Alliance Corporate Website, and in hard copy including a large print version, upon request.

Identification of barriers

We believe that it is the responsibility of all staff to be on the alert for barriers within the organization, and to bring the existence of the barrier to the attention of Administration and the Accessibility Working Group. To facilitate this, staff, volunteers and physicians are encouraged to report potential barriers and a possible solution if known. As well, in keeping with Accreditation standards of Patient/family engagement, we encourage our patients to identify any barriers.

Integrated Accessibility Standards Compliance Plan

IASR Requirement	Status	Timing
General		
Create accessibility policies that demonstrate the organization's commitment to becoming more accessible	Compliant	Policies are reviewed every 3 years as per MHA policy review.
Create a multi-year accessibility plan that outlines what you will do to remove and prevent barriers in your organization	Compliant	Plan to be reviewed annually and updated as required.
Post the multi-year accessibility plan on the organization's website	Compliant	5 year cycle – next review 2026
Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so.	Compliant	Complete
Incorporate accessibility features in the design, procurement and acquisition of self-serve kiosks	Parking Kiosks (not owned by MHA) have been reviewed. Consideration will be made for other kiosks as indicated.	Complete
Ensure training is provided on the requirements of the accessibility standards referred to in the IASR and in the Human Rights Code as it pertains to persons with disabilities to employees, volunteers, persons developing the organization's policies and others who provide goods or care on behalf of the organization	Training program exists for staff, Physicians, volunteers, clergy, auxiliary members and leadership.	Training reviewed in 2021. Training is issued to new hires and students through Learning Management System

Information and Communication Standards		
Have process for receiving and responding to feedback and ensure the process is accessible	Occurrence Management system is available for staff to provide feedback. Patients, visitors and volunteers can send feedback by phone or email	Complete
Upon request, provide or arrange the provision of accessible formats and communication supports for persons with disabilities	Available upon request	Complete
If an organization makes emergency procedures, plans or public safety information available to the public it is required to be in accessible formats or with communication supports	Emergency information available on website	Complete
New internet and intranet websites and web content must conform to WCAG 2.0 Level AA, other than captions and audio descriptions	New External Website (internet) is compliant	Complete
All internet websites and web content must conform to WCAG 2.0 Level AA other than captions and audio descriptions	Internet content conforms	Complete

Employment Standards		
Notify employees and members of the public of the availability of accommodation for applicants with disabilities in our recruitment processes	Compliant - Accommodation noted on job posting page	Complete
Notify applicants when they are selected to participate in assessments or selection processes that accommodations are available upon request in relation to the processes or materials being used	Compliant - Individuals coming for interview are asked if they require accommodation	Complete
Applicants are notified of policies accommodating employees with disabilities	Compliant - Postings indicate that accommodation is available for applicants with disabilities.	Complete
Inform employees of policies used to support employees with disabilities including provision of job accommodations that take into account accessibility needs due to disabilities	Compliant	Complete
Provide information required under this section to new employees as soon as practicable after they begin their employment	Compliant - New employees receive AODA training and review the policies through e - learning upon commencement of employment	Complete
Provide updates to employees when there is a change to existing policies on the provision of job accommodations	Compliant - This is done as required	Complete

Upon request by an employee, provide or arrange for the provision of accessible formats and for communication supports for: ➢ Information that is needed to perform the employee's job ➢ Information that is generally available to employees in the workplace The employer consults with the employee making the request to determine the accessible format or communication support required	Compliant	Complete
Provide individualized workplace emergency response information to employees with disabilities, if the disability is such that the information is necessary, and the employer is aware of the need of accommodation due to the employee's disability	Compliant	Complete
Develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities	Compliant	Complete
Develop and document a return to work process for employees who have been absent from work due to a disability and require disability related accommodations to return to work	Compliant	Complete
Performance management shall take into account the accessibility needs of employees with disabilities, as well as accommodation plans	Compliant	Complete

Employers that provide career development and advancement to its employees shall take into account the accessibility needs of its employees with disabilities as well as individual accommodation plans	Compliant	Complete
Redeployment shall take into account the accessibility needs of employees with disabilities as well as accommodation plans	Compliant	Complete
Transportation Standards		
Organizations that are not primarily in the business of transportation, but that provide transportation services shall provide accessible vehicles or equivalent services upon request	Non- Emergency Patient Transportation is a contracted service that meets accessibility requirements.	
Design of Public Spaces		
Ensure that new and redeveloped exterior paths of travel follow technical requirements as set out in the standard	Complete – ie front entrances accessible as are ED entrances	Complete
Ensure that when building or making major changes to existing outdoor public eating areas at least 20%, and no fewer than 1, of the tables are accessible to people using mobility aids, that the ground leading to and under the accessible tables is level firm and stable and that, enough space is clear around the accessible tables so people using a mobility aid can approach the tables	Ongoing review	Will be considered with any modification after 01/16
Ensure that new or redeveloped parking spaces are created according to the technical requirements as set out in the standard	Compliant	Complete

When making changes to or adding new service counters ensure that at least one service counter is accessible to people who use mobility aids as per the technical requirements set out in the standard	Ongoing review	Will be considered with any modification after 01/16
When building or making changes to queuing guides ensure that the queuing area is wide enough for people using a mobility aid and people with vision loss can detect the queuing area with a cane	Ongoing review	Will be considered with any modification after 01/16
When constructing or make major changes to waiting areas ensure that 3% of the seating is accessible and that no fewer than 1 seating space is accessible	Ongoing review	Will be considered with any modification after 01/16
Ensure that the accessibility plan contains preventive and emergency procedures for accessible parts of public spaces, such as posting when regular maintenance occurs and letting people know about alternatives	Compliant	Complete
Ensure that procedures for handling temporary disruptions in service when an accessible part of your public spaces stops working, such as putting up a sign explaining the disruption and outlining an alternative	Compliant Policy reviewed 2021	Complete
Customer Service Regulation		
Implement policies, practices and procedures on providing goods and services to people with disabilities	Compliant	Complete
Execute a policy on allowing people to use their own personal assistive devices to access goods and services, and provide information about any other means offered by the hospital (assistive devices, services etc.) to allow them access to goods and services	Compliant	Complete

Ensure hospital policies, practices and procedures are in line with the core principles of independence, dignity, integration and equality of opportunity	Compliant	Complete
Communicate with a person having a disability in a manner that takes into account his or her disability	Compliant	Complete
Train staff, volunteers, contractors and other people that interact with the public or other third parties on the hospital's behalf on the topics outlined in the customer services standard, and record all training including the dates the training occurred and names of the individuals trained	Compliant	Complete
Train staff and any other people involved in developing hospital policies, practices and procedures on the requirements regarding goods or services as outlined in the customer service standard	Compliant	Complete
Allow people with disabilities to be accompanied by their guide dog, service animal or support person in areas of the premises unless the animal or person is restricted for health reasons, or by law	Compliant	Complete
Provide information on any admission fees that may be charged for a support person, with as much advance notice as possible	Compliant	Complete
Provide notice when services, goods, or facilities used by people with disabilities are temporarily disrupted	Compliant	Complete
Establish a process for people to provide feedback on the hospital's method of providing goods and services to people with disabilities and how you will respond to any feedback, and take action on any complaints, ensuring information about how the hospital will provide feedback should be readily available to the public	Compliant	Complete
All policies, practices and procedures that govern accessible customer service and associated requirements must be documented	Compliant	Complete

Provide notice to customers that documents required under the customer service standard are available upon request	Compliant	Complete
Ensure the documents required under the customer service standards are available when requested,	Compliant	Complete

Achievements in Accessibility since 2017

For Achievements in Accessibility prior to 2017 see Appendix A

Barrier	Objective	Strategy	Performance Criteria	Responsibility
SMGH - No accessible washroom in DI area	Provide accessible bathroom for DI patients and families	Washroom renovated during DI upgrades	Completed 2018	Facilities Management
SMGH – no handrails in DI suite	Improve patient safety and access in DI suite	Install handrails throughout suite	Completed 2018	Facilities Management
SMGH – Technology updates needs to ensure patients personal devices can access WI-FI	Patient/family have access to technological supports are necessary	MHA Wi-Fi compatible so patients can bring their own devices	WI –FI 2015	Facilities Management / Information Systems and Telecommunications
SMGH - Voice annunciation for passenger elevators	Aide visually impaired persons with elevator operation	Upgrade elevator controls to include voice annunciation	Completed 2021	Facilities Management
MHA external website requires upgrades	Prepare for a fully accessible external website(internet)	Review of current intranet site to determine gaps to compliance with WCAG 2.0 Level AA	External Internet site to has been updated	Information Systems and Telecommunications
SMGH - Relocate Info desk or redesign front lobby	Improve visibility & accessibility of info desk for all patients and families	Explore redesign, colour options, location	Completed 2019	Facilities Management

Lack of equipment specifically for bariatric patients	Provide necessary equipment to meet the needs of this population	Investigate best equipment options and strategies to best practice care for bariatric patients	As part of capital equipment process, bariatric equipment included as per clinical team review	Patient Care Managers Team
Wayfinding – signage review	Ensure wayfinding is understandable	Patient feedback – 'simulated' patient tracers	Review wayfinding feedback and update signage – in progress	Senior Friendly Care Steering Committee
Aphasic patients have difficulty communicating	Improve communication strategies for patients with aphasia or other language barriers	Implementation of communication binder		Speech-Language Pathology/Patient Care Managers
Communication with Hearing impaired patients without hearing aids	Improve communication for hearing impaired individuals	Portable hearing amplifiers available on inpatient units	Purchased 2018	Speech-Language Pathology/Patient Care Managers
SMGH - One of the patient parking lots lower than accessible entrance	All patients with mobility issues can use this parking lot	Ramp installed to allow direct access to main entrance of hospital	Completed 2017	Parking lot is maintained by 3rd party
Involvement from peoples with disabilities in the review and development of policies /procedures annually	Ensure that disabled community members have input to policies / procedures	Patient/Family engagement	Patient and family input considered for improvement projects, Senior Friendly care strategies	VP Clinical Services/CNO Patient Care Managers
FCHS - Ramp access into new "dentist" building required replacement	Improve safety and access to new building	Existing ramp replaced	Completed 2021	Facilities Management

Future Accessibility Opportunities for Middlesex Hospital Alliance

Barrier	Objective	Strategy	Performance Criteria	Responsibility
FCHS - Installation of automatic door operators for barrier free washroom in emergency department lobby area	Improve ease of access		Current washroom has been reviewed. Not currently feasible for modification. Will be included in any future renovations	Facilities Management
Review the new Health Care Accessibility Standards when available	Determine how standards are being met or where there are gaps	Engage Patients, clinical staff in review process	To be determined	Senior Leadership
SMGH - Review accessibility of washrooms identified as accessible	Improve accessibility within washrooms that are identified as accessible.	Review current building standards for accessible washrooms and upgrade current set-up	Design and installation will meet standards as much as physical space allows. Receive feedback from patients.	Facilities Management
MHA Intranet site not currently in accessible format	Prepare for a fully accessible internal website(intranet)	Review of current intranet site to determine gaps to compliance with WCAG 2.0 Level AA	Intranet redesign on capital plan. Dependent on funding	Information Systems and Telecommunications

Communication of the Accessibility Plan

The MHA accessibility plan is posted for our patients/families and community on the MHA web site (www.mhalliance.on.ca). Copies are available from the Administrative offices at both SMGH and FCHS. On request, the report can be available in alternate formats.
The plan is posted for staff on the MHA Intranet – The Insider.

Appendix A

Achievements in Accessibility prior to 2017

Barrier	Objective	Strategy	Performance Criteria	Responsibility
SMGH - Installation of automatic door operator for barrier free washroom in lobby area	To improve ease of access to barrier free washroom	Automate operator	Completed 2015	Facilities Management
SMGH - Newly redeveloped front entrance nontraditional door layout creates barrier for visually impaired	To create easily identifiable pathway through entrance	Installed visible marking tape in vestibule to indicate pathway.	Completed 2013	Facilities Management
SMGH - Installation of accessible entrance signage that had been removed during renovations	To identify which entrances are accessible	Install appropriate signage	Completed 2016	Facilities Management
SMGH - Hand rails for main corridor to Ambulatory Care and Diagnostics Imaging	Railings to aid persons with mobility issues	Installed railings	Completed 2013	Facilities Management
FCHS - Create barrier free washroom in Adult Day Centre at Four Counties Health Services	Provide accessible facilities for adult day program participants	Renovate and repurpose space to create new accessible washroom	Completed 2014	Facilities Management
SMGH - Barrier Free Pathway to Fountain	Create an accessible pathway and sitting area	Design pathway, gardens, seating area etc. to create gathering space	Completed 2014	Facilities Management / SMGH Auxiliary
Parking services Kiosk (not owned by MHA)	Ensure that parking services Kiosk is accessible		Kiosks have been moved to front lobby. Parking	Foundation / Parking Services Vendor

			services indicates kiosks are accessible	
FCHS - Improved Fire Alarm signaling devices	Replace or augment fire alarm bells with strobe devices for persons with hearing impairment	Review current system, engineer solution and install	Completed 2014	Facilities Management
SMGH - Improved access to front entrance (handrails)	Railing to aid persons with mobility issues	Install a hand rail towards the sidewalk	Handrails are installed where possible. Not able to install directly in front of main entrance due to radiant heat in cement pad	Facilities Management