



THE MIDDLESEX HOSPITAL ALLIANCE

Strathroy Middlesex General Hospital and Four Counties Health Services

Multi-Year Accessibility Plan

November 2013- October 2016

Submitted to

Todd Stepanuik, President and Chief Executive Officer

This publication is available on the following website:

www.mhalliance.on.ca

and will be made available in alternative formats upon request

Anyone wishing to provide feedback on customer service may provide via mail at 365 Carrie Street, Strathroy, ON N7G 3J4
Or call (519)245-5295 ext. 5941



Table of Contents

Our Mission	4
Our Vision	4
Our Principles	4
Executive Summary	5
Introduction	6
Requirements under the AODA 429/07 Customer Service Regulation	8
Middlesex Hospital Alliance	10
Statement of Commitment	10
Accessibility at Middlesex Hospital Alliance	11
Identification of barriers	11
Barriers identified and addressed at the Middlesex Hospital Alliance	12



Future identified barriers for the Middlesex Hospital Alliance	17
Integrated Accessibility Standards Compliance Plan	21
Communication of the Accessibility Plan	29



Our Mission

To provide the healthcare we would expect for our own families

Our Vision

The Middlesex Hospital Alliance will be the best place for patient centered care; providing excellence in quality, people, service and financial performance.

Our Principles

The Middlesex Hospital Alliance is guided by our principles;

Ssafety 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



Executive 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

Introduction

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 to be 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. There is a phased-in approach to compliance, with deadline dates for each standard being based upon organization type and size, primarily ranging between January 1, 2012 and January 1, 2017.

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 the disabled.

A "Barrier" is:



- 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:

- 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.



Requirements under the AODA 429/07 Customer Service Regulation

The Act requires that we:

- 1) Implement policies, practices and procedures on providing goods and services to people with disabilities
- 2) 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
- 3) Ensure hospital policies, practices and procedures are in line with the core principles of independence, dignity, integration and equality of opportunity
- 4) Communicate with a person having a disability in a manner that takes into account his or her disability
- 5) 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
- 6) 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
- 7) 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



- 8) Provide information on any admission fees that may be charged for a support person, with as much advance notice as possible
- 9) Provide notice when services, goods, or facilities used by people with disabilities are temporarily disrupted
- 10) 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
- 11) All policies, practices and procedures that govern accessible customer service and associated requirements must be documented
- 12) Provide notice to customers that documents required under the customer service standard are available upon request
- 13) Ensure the documents required under the customer service standards are available when requested, by a person with a disability, in a format that takes into account the person's disability



Middlesex Hospital Alliance

Formed in 1999 the MHA is made up of two partner sites: Four Counties Health Services and Strathroy Middlesex General Hospital. The hospitals have agreed to operate cooperatively, but maintain their independent corporate status.

Four Counties Health Services (FCHS) is a twelve bed rural community hospital, with an active Emergency Department, several outpatient clinics, and community services available.

Strathroy Middlesex General Hospital (SMGH) is a fifty-four bed community hospital, with an active Emergency Department, and many outpatient clinics.

This accessibility plan builds on previous site accessibility plans in place at Four Counties Health Services and Strathroy Middlesex General Hospital. The planning and implementation of changes occurs over a period of time, keeping in mind the operational, and in some cases capital costs of implementation.

Statement of Commitment

The MHA is committed to continual improvement of facilities access, policies, programs, practices and services for patients and their family members, health care practitioners, volunteers and members of the community with disabilities; the participation of people with disabilities in the development and review of its accessibility plan; and the provision of quality services to patients and their family members and members of the community with disabilities.



Accessibility at the Middlesex Hospital Alliance

Accessibility Planning was previously the responsibility of the Joint Occupational Health and Safety/Environment Team at each individual site. In October 2012 this responsibility was 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 annual review of this accessibility plan moving forward.

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. The resulting accessibility plan is available on the Middlesex Hospital Alliance Corporate Website, and in hard copy, including 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, a designated space is available for staff, volunteers and physicians to report the barrier, and a possible solution if known.



Barriers identified and addressed at the Middlesex Hospital Alliance

Barrier	Objective	Means to remove/ prevent	Performance Criteria	Responsibility
Grab Bars	To improve better positioning and fit of current grab bars	Assess and properly size and position replacement grab bars	Completed – Spring 2011	Facilities Management
SMGH - Redevelopment of front entrance	To improve access for persons with mobility challenges	Improved grade to entrance area and added radiant heating to concrete to prevent slippery surfaces	Completed – October 2011	Facilities Management



FCHS - Improved lighting at entrances	To increase lighting levels	Installed LED wall mounted lighting at all entrances	Completed – Summer 2011	Facilities Management
SMGH - Access to wheelchairs	To ensure wheelchairs are available as required for persons with mobility challenges	Lean wheelchair team formed and studied wheelchair needs and implemented changes in process to ensure wheelchairs are identified and available as required	Completed - 2012	Lean Wheelchair Team
Review of Draft Integrated Accessibility Standard	Develop understanding of draft currently out for review	Ensure future planning / projects include review of 191/11 as part of design process	Completed – Summer 2012	Facilities Management



<p>SMGH - Improve access to Facilities Management for persons with disabilities</p>	<p>To ensure customers entering the department are not subject to barriers</p>	<p>Renovated existing area ensuring pathways and office spaces were sized to accommodate persons in wheel chairs</p>	<p>Completed – Fall 2012</p>	<p>Facilities Management</p>
<p>Lack of leadership/ direction for AODA sustainability</p>	<p>Ensure facilities are continually reviewing and addressing accessibility concerns</p>	<p>Responsibility for leadership and compliance with AODA act and regulations moved from JHSEC to Director, Facilities Management</p>	<p>Completed – October 2012</p>	<p>Facilities Management</p>
<p>SMGH - Installation of automatic door operator for barrier free washroom in lobby area</p>	<p>To improve ease of access to barrier free washroom</p>	<p>Automate operator</p>	<p>Completed - 2013</p>	<p>Facilities Management</p>



<p>SMGH - Newly redeveloped front entrance nontraditional door layout creates barrier for visually impaired</p>	<p>To create easily identifiable pathway through entrance</p>	<p>Installed directional marking tape in vestibule to indicate pathway.</p>	<p>Completed - 2013</p>	<p>Facilities Management</p>
<p>SMGH - Installation of accessible entrance signage that had been removed during renovations</p>	<p>To identify which entrances are accessible</p>	<p>Install appropriate signage</p>	<p>Completed - 2012</p>	<p>Facilities Management</p>
<p>Involvement from peoples with disabilities in the review and development of policies / procedures annually</p>	<p>Ensure that disabled community members have input to policies / procedures</p>	<p>Establish working group in fall of 2012</p>	<p>Completed - 2012</p>	<p>Facilities Management</p>



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
--	--	--------------------	-------------------------	-----------------------



Future identified barriers for the Middlesex Hospital Alliance

Barrier	Objective	Means to remove/ prevent	Performance Criteria	Responsibility
FCHS - Installation of automatic door operators for barrier free washroom in emergency department lobby area	Improve ease of access		To be completed in 2014 (funding dependent)	Facilities Management
SMGH - Patient assistance technology for ambulatory care and the emergency department			Technology need to be reviewed with concurrent technology projects in progress (Funding and resource dependent)	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	To be completed in 2015 funding dependant	Facilities Management



SMGH - Hand rails for corridor between Ambulatory Care and Diagnostics Imaging	Railings to aid persons with mobility issues	Add railing to opposite side of corridor	To be completed in 2014	Facilities Management
Patient registration kiosks	Improve access for patients and visitors	Install fully accessible kiosks for self registration	Planning underway for trial Kiosk with full implementation by 2015	Materials Management / Information Systems and Telecommunications
Planning for re-launch of MHA Intranet site in accessible format	Prepare for a fully accessible internal website	Review of current intranet site to determine gaps to compliance with WCAG 2.0 Level AA	To be complete for 2015	Information Systems and Telecommunications
MHA website upgrades	Prepare for a fully accessible external website	Review of current website to determine steps to ensure that it will be compliant with WCAG 2.0 Level AA	Planning to be complete by 2016	Information Systems and Telecommunications



SMGH - Relocate Info desk or redesign front lobby	Improve visibility of info desk (available assistance) for visually impaired persons	Explore redesign, colour options, location to aid visually impaired persons when entering the facility	Review to be complete in 2014	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	To be complete in 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	To be complete in 2014	Facilities Management / SMGH Auxiliary
Improved access to front entrance (handrails)	Railing to aid persons with mobility issues	Install a hand rail towards the sidewalk	To be completed in 2015	Facilities Management



Parking services Kiosk (not owned by MHA)	Ensure that parking services Kiosk is accessible	Review required by parking services	Review to be completed in 2014	Foundation / Parking Services Vendor
FCMS - Improved Fire Alarm signaling devices	Replace or augment fire alarm bells with strobe devices for persons with hearing impairments	Review current system, engineer solution and install	To be completed in 2014	Facilities Management



Integrated Accessibility Standards Compliance Plan

IASR Requirement	Status	Timing
General		
Create accessibility policies that demonstrate the organization's commitment to becoming more accessible	Compliant	Policy to be reviewed annually
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. A status report will be completed by the working group and provided to SLC in January 2015 and 2016
Post the multi-year accessibility plan on the organization's website	Compliant	3 year cycle



<p>Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so.</p>		<p>Complete</p>
<p>Incorporate accessibility features in the design, procurement and acquisition of self-serve kiosks</p>	<p>Kiosks (not owned by MHA) are to be reviewed</p>	<p>Complete by 12/14</p>
<p>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</p>	<p>Training program exists for staff, physicians, volunteers, clergy, auxiliary members and leadership.</p>	<p>Training updated in 2012</p>
<p>Information and Communication Standards</p>		
<p>Have process for receiving and responding to feedback and ensure the process is accessible</p>	<p>Currently RL Solutions is utilized for feedback. A survey form and contact information will be added to the website</p>	<p>Complete by 01/14</p>



Upon request, provide or arrange the provision of accessible formats and communication supports for persons with disabilities	Some methods are accessible and support currently available. Notice of this service needs to be posted on the website	Complete by 01/15
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 is not currently made public	TBD
New internet and intranet websites and web content must conform to WCAG 2.0 Level AA, other than captions and audio descriptions	IST reviewing	TBD
All internet websites and web content must conform to WCAG 2.0 Level AA other than captions and audio descriptions	IST reviewing	Complete by 01/21
Employment Standards		
Notify employees and members of the public of the availability of accommodation for applicants with disabilities in our recruitment processes	Under review	Complete by 01/14



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	Under review	Complete by 01/14
Applicants are notified of policies accommodating employees with disabilities	Under review	Complete by 01/14
Inform employees of policies used to support employees with disabilities including provision of job accommodations that take into account accessibility needs due to disabilities	Under review	Complete by 01/14
Provide information required under this section to new employees as soon as practicable after they begin their employment	Under review	Complete by 01/14
Provide updates to employees when there is a change to existing policies on the provision of job accommodations	Under review	Complete by 01/14



<p>Upon request by an employee, provide or arrange for the provision of accessible formats and for communication supports for:</p> <ul style="list-style-type: none"> • Information that is needed to perform the employee’s job • Information that is generally available to employees in the workplace <p>The employer consults with the employee making the request to determine the accessible format or communication support required</p>	<p>Under review</p>	<p>Complete by 01/14</p>
<p>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</p>	<p>Compliant</p>	
<p>Develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities</p>	<p>Under review</p>	<p>Complete by 01/14</p>



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	Under review	Complete by 01/14
Performance management shall take into account the accessibility needs of employees with disabilities, as well as accommodation plans	Under review	Completed by 01/14
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	Under review	Completed by 01/14
Redeployment shall take into account the accessibility needs of employees with disabilities as well as accommodation plans	Under review	Completed by 01/14
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	New transportation provider under contract	Completed 06/13



Design of Public Spaces		
Ensure that new and redeveloped exterior paths of travel follow technical requirements as set out in the standard	Under review	Completed by 01/16
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	Under review	Completed by 01/16
Ensure that new or redeveloped parking spaces are created according to the technical requirements as set out in the standard	Under review	Completed by 01/16
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	Under review	Completed by 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	Under review	Completed by 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	Under review	Completed by 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	Under review	Completed by 01/16
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	Under review	Completed by 01/16



Communication of the Accessibility Plan

The MHA accessibility plan will be made available on the MHA web site (www.mhalliance.on.ca) and copies will be available from the Administrative offices at each site. On request, the report will be made available in alternate formats.

The plan is also available to staff on the MHA Insider.