



Halton Healthcare

**HALTON HEALTHCARE SERVICES  
MULTI-YEAR ACCESSIBILITY PLAN  
(2013-2015)**

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## Background

The *Ontarians with Disabilities Act, 2001* (ODA) was proclaimed on September 30, 2002. The purpose of the Act was to improve opportunities for people with disabilities. In addition, it provided for their involvement in the identification, removal and prevention of barriers to their full participation in life.

On June 13, 2005, Bill 118, "*Accessibility for Ontarians with Disabilities Act (AODA), 2005*" was passed with the purpose of strengthening accessibility legislation in the province. The purpose of the AODA is to benefit Ontarians by,

- a) *developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodations, employment, buildings, structures and premises on or before January 1, 2025; and*
- b) *providing for the involvement of persons with disabilities, of the government of Ontario and of representatives of industry and various sectors of the economy in the development of accessibility standards (2005,c.11,s.1).*

## Aim and Objectives of the Plan

This plan is intended to continue to move Halton Healthcare Services (HHS) towards its vision of accessibility and describes the actions HHS will take to identify and remove barriers, and the time lines for completion.

HHS will provide the opportunity for all patients and their family members, staff, potential staff, health-care practitioners, volunteers and members of the community to identify their needs related to disabilities and ensure that those needs are accommodated in a manner that supports the dignity of the individual. This will be reflected by integrating accessibility throughout HHS's policies and practices and ensuring that policies are consistent with the following principles:

- dignity
- independence
- integration, except when alternate measures are necessary to meet the needs of people with disabilities
- equal opportunity.

The plan is intended to ultimately ensure that:

- people with disabilities are able to enter the Hospital and reach their destinations without encountering barriers,
- people with disabilities are able to receive services they require without encountering barriers,
- people with disabilities are able to work at HHS without encountering barriers;
- accessibility is accepted as everyone's responsibility.

## Halton Healthcare Services' Commitment to Accessibility

Halton Healthcare Services (HHS) is committed to providing accessible service to all persons with disabilities and to meet the standards outlined within the Accessibility for Ontarians with Disabilities Act (AODA) 2005, the Accessibility Standards for Customer Service, Ontario Regulation 429/07 and the Integrated Accessibility Standards, Ontario Regulation, 191/11.

In fulfilling its mission, HHS strives at all times to provide care and services in a way that respects the dignity and independence of people with disabilities. We are committed to giving people with disabilities the same opportunity to access and benefit from our services as other individuals would have.

Of note, the Hospital continues with a major capital redevelopment project at the "New Oakville Hospital". In addition to the New Oakville Hospital, HHS also has two other redevelopment projects – the expansion of the Georgetown Hospital Emergency and Diagnostic Imaging Department and the expansion of the Milton District Hospital. To that end, the Hospital has consulted extensively with experts in the area of accessibility.

### HHS Accessibility Planning Committee

An **accessibility working group** came together in 2005 to develop and implement the accessibility plan at HHS. In 2012, a formalized **Diversity & Accessibility Committee** was established by the Executive Vice-President that reports, through the Co-Chairs, to the Executive Vice-President.

The purpose of the Diversity & Accessibility Committee is to work in partnership internally (staff, physicians, volunteers) and externally with people with disabilities, community groups and consumer groups. The Committee is to identify, recommend and initiate strategies involving accessibility, diversity, and cultural sensitivity to enhance the patient and workplace experience. The Committee also collaborates with the redevelopment project teams to ensure that the hospital redevelopment projects will be built to the required accessibility standards.

The Committee consists of inter-professional leaders (formal and informal) from a cross-section of clinical and non-clinical departments across the organization. This includes:

- Director, Quality & Patient Relations (Co-Chair)
- Director, Total Rewards & Organizational Development (Co-Chair)
- Patient Relations Advisor
- Director, Facilities, Engineering & Maintenance
- Manager, Occupational Health & Safety
- Public Relations Officer
- Director, Human Resources or delegate
- Chief Operating Officer, Milton site
- Professional Practice Clinician, Milton site
- Representative from Georgetown site
- Manager, Rehabilitation & Geriatrics program

- Volunteer Services representative
- Director, Medical Affairs
- Halton Multicultural Council representative
- Senior Administrative Assistant, Quality & Patient Relations (recorder)

The Committee includes external community members with disabilities and members representing diverse communities on ad hoc basis for consultation.

## **Barrier Identification Methodology**

“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 Diversity and Accessibility Committee will identify barriers which will be removed or addressed over a three year period. The Committee uses the following barrier identification methodologies:

- Routine identification of potential accessibility issues as part of the concerns-resolution process, through the Patient Relations Department
- Comments and trends identified in the Patient Satisfaction reporting process
- Issues identified through Human Resources
- Issues identified by members of the Diversity and Accessibility Committee as well as Occupational Health and Volunteer Services
- Feedback received from both staff and volunteers throughout the organization
- Informal feedback from Security and Parking Services
- Consultation with persons with disabilities, where possible.
- Recommendations and best practices from other organizations
- Environmental assessment at all three sites on an ongoing basis

## **Accessibility in the New Oakville Hospital**

Halton Healthcare Services is currently building a new hospital in Oakville, expanding the Emergency and Diagnostic Imaging Departments at Georgetown Hospital and has begun planning for a significant expansion at Milton District Hospital. These redevelopment projects have been designed and are being built to comply with the required AODA Accessibility Standards.

## **How HHS is meeting the AODA Standards**

HHS will continue to evolve its policies and procedures in compliance with the AODA and its standards for customer service, employment, transportation, environment, and information and communication.

## Customer Service Standard

HHS has established policies so that care and service are provided in a manner that respects the dignity and independence of all persons with disabilities and that they are given an opportunity to obtain, use or benefit from the services provided by and on behalf of the organization equal to that given to others.

For further information please see our [Accessibility – Customer Services Policy](#) or contact our Patient Relations office at:

### E-mail

[patientrelations@haltonhealthcare.on.ca](mailto:patientrelations@haltonhealthcare.on.ca)

### Telephone:

905-845-2571 ext. 4138

### Website:

[www.haltonhealthcare.com](http://www.haltonhealthcare.com)

“Patient Feedback”

### In person or by letter

#### **Georgetown District Hospital**

1 Princess Anne Drive  
Halton Hills, Ontario  
L7G 2B8  
905-873-0111

#### **Milton District Hospital**

7030 Derry Road  
Milton, Ontario  
L9T 7H6  
905-878-2383

#### **Oakville-Trafalgar Memorial Hospital**

327 Reynolds Street  
Oakville, Ontario  
L6J 3L7  
905-845-2571

## **Accessibility –Customer Service Policy**

HHS has established policies for providing patient centered care to people with disabilities in compliance with AODA. Our policies, practices and principles are consistent with the principles enumerated under the Accessibility Standards for Customer Service.

## **Training Resources**

As set out in our *Accessibility – Customer Service Policy*, all HHS employees, physicians, volunteers, contractors and any other people who interact with the public or other third parties on behalf of the organization shall receive mandatory training on providing customer service to people with disabilities and the content of the Policy. The training includes:

- A review of the purposes of the Accessibility for Ontarians with Disabilities Act, 2005 and the requirements of the Customer Service Standard;

- Tips on how to interact and communicate with people with various types of disabilities;
- Tips on how to interact with people with disabilities who use an assistive device or require the assistance of a service animal or a support person;
- How to use the assistive equipment or devices e.g. wheelchairs, lifts etc. available on our premises;
- What to do if a person with a particular disability is having difficulty in accessing our services;
- HHS policies, practices, and procedures relating to the Customer Service Standard.

A variety of training methods are used including:

- an education booklet, *Guidelines for Delivering Accessible Customer Service: HHS Accessibility Training – Phase 1*;
- a brochure entitled *Commitment to Accessibility: Customer Service*;
- e-learning, in-service education and training as appropriate to individual job descriptions and/or department functions;
- orientation to new employees, physicians and volunteers;
- newsletters (i.e., *Abbreviations* (Attachment #4)); and
- safety events within the organization (i.e., poster presentation at the Safety Expo 2012).

Accessibility training is monitored as follows:

- At the launch of the training program in 2009, a record of staff completing the program was kept at the office of Quality and Patient Relations.
- In March of 2010, the Accessibility training was converted to eLearning within the HHS Learning Management System (LMS).
- Staff access their learning modules on the LMS which tracks completion of their training requirements.
- The Accessibility training module is automatically assigned to new staff upon being hired.
- Volunteer Training is recorded through Volunteer Resources Office. Volunteers are trained at orientation and are asked to read the HHS accessibility training manual and return the sign off sheet to the Volunteer Resources Office to file.
- Physician training is recorded through the Medical Staff Office. All new physicians coming on staff are required to complete the Accessibility training and as part of the application process. The signed completion forms are retained in the Physician's credentials file.

## **Communication to Public**

HHS employs a number of different methods to notify the public that documents required under the Customer Service Standards are available upon request. The accessibility documents required under the Customer Service Standards are posted by HHS on its public website and as such, are available to members of the public, including patients and families. See HHS' website at [www.haltonhealthcare.com](http://www.haltonhealthcare.com) Patients and families may request any information by contacting the Patient Relations Department at HHS.

- HHS works with members of the public, including patients and families to provide documents required under the Customer Service Standard in an accessible format, upon request.
- Hospital policies and procedures, including those pertaining to accessibility are available to all staff, physicians and volunteers via our intranet (Connections) and an online system entitled Hospital Organization and Policies and Procedures (HOPP).

## **Providing Documents in Accessible Formats**

HHS is pleased to work with patients, families and members of the public to provide relevant information in an accessible format or with appropriate communication supports, as soon as practicable, upon request. As set out on HHS' Accessibility website page, information can be received by contacting Patient Relations. Patient Relations may be contacted in person, in writing, by e-mail or telephone.

HHS is currently in the process of developing a new, accessible external website which will conform to the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0 Level A compatibility on or before January 1, 2014 and Level AA on or before January 1, 2021. The new website will be launched in early 2013.

## **Feedback Policy and Process**

HHS welcomes feedback from patients, families and visitors as part of its commitment to the continuous improvement of patient care and Patient Feedback process. The process is applicable to any information, feedback, or inquiries regarding accessibility. Feedback relating to the accessibility of services gathered through the Patient Relations Department is forwarded to the Diversity and Accessibility Committee for consideration in the accessibility planning process.

## **Notice: Disruption of Service**

HHS makes reasonable efforts to provide advance notice of any disruption to its services to the public, including information about the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if any, that may be available. The notice is made available by various methods - posting the information on the premises, posting on the HHS external and internal websites, including information in HHS



newsletters, advertising in local newspapers, utilizing media releases to local news outlets or by such other method as is reasonable under the circumstances.

## Integrated Accessibility Standards

The Integrated Accessibility Standards Regulation (ISAR) is now in effect and the work plan includes plans to begin the process of compliance with the mandatory requirements as detailed in the regulation.

### Multi- year Plan to meet Hospital Requirements under the Integrated Accessibility Standards Regulation (O. Reg. 191/11)

Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
<b>PART I - GENERAL</b>				
<b>Establishment of Accessibility Policies (s. 3)</b> a) Prepare one or more written documents describing policies; and b) Make the documents publicly available, and provide in an accessible format upon request.	Policies are developed and established.  Policies are available on HHS website or in accessible format upon request.	January 2010	Complete  Complete	January 1, 2013
<b>Accessibility Plans (s. 4)</b> a) Establish, implement, maintain and document a multi-year accessibility plan  b) Post accessibility plan on website, if any, and provide the plan in an accessible format upon request  c) Establish, review and update accessibility plans in consultation with persons with disabilities and have	This Plan is posted on HHS website. It is a working document which will be revised and updated regularly as the organization grows and expands.  HHS will provide the Plan in an accessible format upon request.  The Plan has been established in consultation with the Diversity and Accessibility committee and persons with disabilities.	December 2012	Complete  Complete  Complete	January 1, 2013

Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
<p>established an accessibility advisory committee, must consult with the committee</p> <p>d) Review and update the accessibility plan at least once every five years</p>	<p>The plan will be reviewed and updated in consultation with the Diversity and Accessibility Committee and persons with disabilities, as required.</p>	<p>Ongoing</p>	<p>Ongoing</p>	
<p><b>Procuring or Acquiring Goods, Services or Facilities (s. 5)</b></p> <p>Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable</p>	<p>HHS has Shared Services West (SSW) as the shared service provider, allowing for the full continuum of Supply Chain Services. SSW will be working on the following:</p> <p><b>Procurement Documentation and Agreements</b>  Include in all procurement documentation (e.g., RFPs, RFQs, etc.) and all vendor agreements language that requires vendors, who are providing goods, services or facilities to hospitals, to comply with all relevant requirements of the AODA and its regulations. The template agreements used by Shared Services West currently include language related to the AODA.</p> <p><b>Accessible Procurement Documents.</b> Shared Services West and its members and clients ensure that any documents posted in respect of competitive procurement processes are accessible to individuals with disabilities, upon request.</p> <p><b>Training.</b> All representatives of SSW are required to</p>	<p>January 2013</p> <p>January 2013</p> <p>January 2013</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>	<p>January 1, 2013</p>

Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
	attend training sessions related to the AODA and the IAS Regulation. Training on the AODA and its regulations will allow contract specialists and negotiators to recognize situations in which the AODA is relevant and explain to vendors the importance of AODA compliance with respect to the provision of goods, services or facilities to members and customers. SSW maintains records in respect of when training sessions are provided and to whom.			
<p><b>Self-Service Kiosks (s. 6)</b>            Incorporate accessibility features when designing, procuring or acquiring self-service kiosks</p>	<p>HHS currently has ATM banking machine and prepaid parking kiosk which meet the accessibility criteria. Our process for kiosk procurement ensures incorporation of accessibility in the redevelopment projects.</p>	<p>January 2013</p>	<p>Complete</p> <p>Ongoing for the New Oakville Hospital and Milton and George Town Hospital Redevelopment projects</p>	<p>January 1, 2013</p>
<p><b>Training (s. 7)</b>            Provide training on the requirements of the accessibility standards and on the Human Rights Code</p> <p>Training provided to: all employees, volunteers, persons who provide goods, services, facilities on behalf of HHS</p>	<p>Mandatory training is provided on the Customer Service Standard for all staff, physicians, volunteers and persons who provide goods, services on behalf of HHS. The training is also included in the orientation programs for all new staff, physicians and volunteers.</p> <ul style="list-style-type: none"> <li>• Ongoing education and reminders through corporate intranet and weekly corporate newsletter.</li> <li>• Have established an</li> </ul>	<p>January 2012</p>	<p>Complete</p>	

Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
	<p>Accessibility Section on HHS Intranet which will be enhanced and updated by Patient Relations on a regular basis to increase ongoing awareness and promote accessibility initiatives.</p> <ul style="list-style-type: none"> <li>• Continue to run short Accessibility Customer Service tips in weekly newsletter on a regular basis.</li> <li>• Review current training program and resources and revise/update to meet Integrated Accessibility Standard requirements.</li> <li>• Roll-out revised training program to employees, physicians, volunteers and 3rd party employees who provide goods and services.</li> </ul>	January 2013-December 2013	Ongoing	January 1, 2014
<b>PART II – INFORMATION AND COMMUNICATIONS STANDARD</b>				
<p><b>Emergency Procedure, Plans or Public Safety Information (s. 13)</b></p> <p>Any emergency procedures, plans or public safety information and made available to the public must also be provided in an accessible format or with appropriate communication supports, as soon as practicable, upon request.</p>	<p>HHS emergency plans are not made available to public. HHS is pleased to work with patients, families and members of the public to provide relevant information in an accessible format or with appropriate communication supports, as soon as practicable, upon request. Information can be received by contacting Patient Relations in person, in writing, by e-mail or telephone.</p>	January 2012	Complete	January 1, 2012



Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
	<p>Manager when they are admitted to HHS or when they receive a service at the Hospital.</p> <p>HHS works with members of the public, including patients and families to provide documents required under the Customer Service Standard in an accessible format, upon request.</p> <p>Hospital policies and procedures, including those pertaining to accessibility are available to all staff, physicians and volunteers via our intranet (Connections) and an online system entitled Hospital Organization and Policies and Procedures (HOPP).</p>			
<p><b>Accessible Formats and Communication Supports (s. 12)</b></p> <p>a) Shall upon request provide or arrange for the provision of accessible formats and communication supports for persons with disabilities</p> <p>b) Shall notify the public about the availability of accessible formats and communication supports</p>	<p>Available upon request as noted above</p>	<p>January 2012</p>	<p>Complete</p>	<p>January 1, 2015</p>
<b>PART III – EMPLOYMENT STANDARD</b>				
<p><b>Workplace Emergency Response Information (s. 27)</b></p> <p>Provide individualized workplace emergency response information to employees who have a</p>	<p>HHS has emergency preparedness plans and programs in place to ensure that critical and essential</p>	<p>December 2011</p>	<p>Complete</p>	<p>January1, 2012</p>

Requirement	Action Plan/Evidence	HHS Time frame for completion	HHS Status	Legislated Compliance Date
disability, where necessary	<p>services continue for our patients and community.</p> <p>Employees are asked to identify their accessibility needs and if they require assistance/accommodations during an emergency. HHS captures this information for all newly hired employees, as well as employees that have modified work plans.</p> <p>HHS annually surveys all employees to self disclose/identify any needs to be assisted/accommodated during an emergency, as part of the Corporate Emergency Preparedness Program.</p>			
<p><b>Recruitment and Selection (ss. 24-26)</b> Employer must establish processes to ensure:</p> <ul style="list-style-type: none"> <li>• accessibility in recruitment processes</li> <li>• Job related information provided in accessible format</li> <li>• employees accessibility needs are considered for employment opportunities</li> </ul>	<ul style="list-style-type: none"> <li>• Review current policies and processes.</li> <li>• Revise policies to meet requirements</li> <li>• Inform/education for managers and supervisors</li> </ul>	December 2013		January 1, 2014
<b>PART IV – TRANSPORTATION STANDARD</b>				
<p><b>Public Sector Organizations (s. 76)</b> Designated public sector organizations (including hospitals) that are not primarily in the business of transportation, but that provide transportation services, shall provide accessible vehicles or equivalent services upon request.</p>	HHS does not provide transportation, however when we arrange to transport patients either between sites or to other facility we ensure that the arranged transportation services meets patient's needs.			

## **Communication of Plan**

The Halton Healthcare Services Multi-Year Accessibility Plan will be posted to both the HHS internal and external web sites. In addition, hard copies and alternate formats of the Plan will be available upon request.

HHS will also develop a comprehensive communication plan to announce and promote the plan across the organization and engage its staff, physicians and volunteers in establishing a barrier-free work environment by providing them with the training and resources to serve persons with disabilities as well as a process to identify and voice concerns regarding any barriers to the HHS Accessibility Committee.

The Multi-year Accessibility Plan is a working document which will continue to be updated based on current best practices and feedback as HHS responds to new information and as the organization grows and expands.

If you have any questions or concerns, or if you identify a barrier --physical, technical, communication, attitudinal or other, please contact: Patient Relations at 905-338-4138.