



# Scarborough Health Network (SHN) Accessibility Plan

2020-2023

This publication is available on the hospital's website and in alternative formats upon request.

[www.SHN.ca](http://www.SHN.ca)

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## Purpose of the Accessibility for Ontarians with Disabilities Act

In 2005, the Government of Ontario passed the Accessibility for Ontarians with Disabilities Act (AODA), with the primary goal of an accessible Ontario by 2025. The purpose of the AODA is to develop, implement and enforce standards for accessibility for Ontario employers, related to ensuring that goods, services, facilities, employment, accommodation and buildings are accessible and inclusive. To this end, the AODA mandates that each hospital prepare an annual accessibility plan.

The AODA highlights the following five standards:

- 1. Customer Service Standard-** The provision of service to the public and training of employees in accessibility.
- 2. Information and Communication Standard-** Communication to the public of information through uses of print, electronic devices, telephone or in person to ensure accessibility information for all.
- 3. Employment Standard-** Ensuring equal opportunities for hiring and retaining employees and providing all required measures to ensure equitable employment experiences.
- 4. Transportation Standard-** Transportation methods to accommodate persons with disabilities, with an emphasis on seamless access.
- 5. Design of Public Spaces Standard-** Accessibility as provided to the physical environment (examples include ramps and automatic doors).

The AODA standards are part of the Integrated Accessibility Standards Regulation (IASR). The IASR highlights the following general requirements:

1. Provide training to staff and volunteers
2. Develop an accessibility policy
3. Create a multi-year accessibility plan and update it at least once every five years
4. Consider accessibility in procurement and when designing or purchasing self-service kiosks

For additional information, you can access the AODA website, <https://www.aoda.ca>.

## Definitions

**Accessibility:** Giving people of all abilities opportunities to participate fully in everyday life.

**Barrier:** As defined by the Accessibility for Ontarians with Disabilities Act, anything that prevents a person with a disability from fully participating in all aspects of society because of his/her disability. It includes a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

Type of Barrier	Definition	Example
<b>Physical &amp; Architectural</b>	Occurs in the environment and prevent access for people with disabilities	Workstations that obstruct the view of a person in a wheelchair, or doorways that are too narrow for a person using a mobility aide
<b>Information &amp; Communication</b>	Arise when a person with a disability cannot easily access, receive, or understand information that is available to others	Website not available to someone with a vision impairment
<b>Attitudinal</b>	May result in people with disabilities being treated differently than people without disabilities	Not addressing a person with a physical, mental, cognitive or developmental disability directly, or forming ideas about a person because of stereotypes or lack of knowledge
<b>Systemic</b>	Occur when policies, procedures, or practices unfairly discriminate and prevent individuals from participating fully	Language in a job posting that prevents a person with a disability from applying where education, experience, or duties are not bona fide requirements for the position
<b>Technological</b>	Occur when technology, or the way it is used, does not meet the needs of people with disabilities	Phones not available for persons with a hearing impairment

**Disability** – As defined in Section 2 of the Act, 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 coordination, blindness or visual impairment, deafness or hearing impairment, muteness or speech impediment, or physical reliance on a guide dog or other service 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”).

The definition includes disabilities of different severity, visible as well as non-visible disabilities, and disabilities the effects of which may come and go.

## Our Commitment to Accessibility

### A Message from Elizabeth Buller, President & CEO

At Scarborough Health Network, we strive to provide an accessible and inclusive environment for all patients, staff, family members, and those who work, volunteer, or partner with us.

We are committed to ensuring equal access and participation for people of all abilities, to ensure that everyone can receive quality, exceptional care in a way that respects each individual's dignity and independence. This extends to every aspect of personal identity, as it relates to language, race, sexual orientation, religion, and more, so that we may honour the diversity and intersectionality of people with disabilities.

On the road to create a more equitable and accessible hospital, we are identifying more opportunities to widen access every day, and further fulfill our obligations to enhance the lives of all those that use our services.

Scarborough is a vibrant and unique community, and when we actively remove barriers, the possibilities and potential are truly endless.

## About Scarborough Health Network

In April 2016, Ontario's Minister of Health and Long-Term Care announced support for the implementation of the recommendations of The Scarborough/West Durham Panel Report, which included the amalgamation of a few hospitals. The Scarborough Hospital (TSH) consisted of two sites: General and Birchmount. The Rouge Valley Health System (RVHS) also consisted of two hospitals: Centenary and Ajax-Pickering. Both hospitals served the large and diverse Scarborough community. In addition, RVHS – Ajax-Pickering served the Durham Region. On December 1, 2016, Scarborough and Rouge Hospital (SRH) was formed from the amalgamation of the Birchmount and General hospitals of TSH and the Centenary hospital of RVHS, creating a single hospital corporation in Scarborough. On this same date, the Ajax-Pickering hospital of RVHS was transferred to Lakeridge Health in Durham Region.

Two years later, our organization officially became Scarborough Health Network (SHN). SHN consists of three hospitals and eight satellite locations. With more than 5,100 employees, over 700 active physicians and budget of ~\$650 million, it is the third largest community hospital in Ontario; offering full-service emergency departments, diagnostic, surgery, rehabilitation and geriatric care, specialty paediatric, mental health, oncology, and advanced birthing centres for mothers and newborns. SHN also has one of North America's largest nephrology programs and Regional Community-Based Cardiovascular Rehabilitation Service.

At SHN, most of our buildings are approximately 35 to 65 years old. To ensure we can continue to deliver vital services to the community, our infrastructure requires immediate rehabilitation. Updating infrastructure for all three hospitals is a priority.

3RD LARGEST COMMUNITY HOSPITAL IN ONTARIO BASED ON BUDGET  
5,100 STAFF | 828 BEDS | 186,000 ED VISITS | 43,000 DISCHARGES | 6,400 BIRTHS



BIRCHMOUNT HOSPITAL  
3030 BIRCHMOUNT ROAD



GENERAL HOSPITAL  
3050 LAWRENCE AVE EAST



CENTENARY HOSPITAL  
2867 ELLESMORE ROAD

#### CLINICAL PROGRAMS AND SUPPORT SERVICES

Nephrology Services (Regional), Post-acute Care, Palliative Care, Mental Health Services, Diagnostic Services, Ambulatory Care Clinics, 24/7 Emergency Departments, Critical Care, Obstetrical and Paediatric Services, General Medicine and surgical services, Cardiac Services (Regional), Cancer Care Services

### Why Accessible Health Care is Important

With one in seven individuals living with a disability, it is important that our services, products and environment are accessible. Using the AODA as a guide, SHN is striving to go beyond expectations and ensure that we serve patients, employees, professional staff, volunteers and community members in the best way possible.

An accessible SHN means:

- Persons with disabilities receive services and goods in ways that meet their individual needs;
- Information and communications are available in accessible formats to all patients, employees, professional staff, volunteers, visitors and people using the services of SHN;
- Persons with disabilities who are employed or volunteer at SHN are able to participate fully;
- Persons with disabilities are able to physically access spaces at SHN; and,
- All persons are able to provide feedback to SHN on their experiences and concerns related to issues of accessibility.

SHN has an unwavering commitment to improving accessibility and inclusion by removing barriers for people with both visible and invisible disabilities. SHN demonstrates this by continually examining ways in which we can better serve our community. We are committed to creating a welcoming, barrier-free environment for patients, employees, professional staff, volunteers and the community. We are also committed to increasing awareness on accessibility issues and providing accessibility supports to persons with disabilities.

## Accessibility Plan Objectives

SHN has established, implemented, maintained and documented a multi-year accessibility plan outlining the strategies under AODA and the supporting standards to meet its requirements in preventing and removing barriers for persons with disabilities. SHN's multi-year accessibility plan builds on previous years' plans. The plan includes measures that SHN will take to identify, remove and prevent barriers to people with disabilities who work or use the facilities and services at SHN, which includes review of policies, programs, practices, and services. We will review and update the plan annually as we identify and address barriers.

The 2020-2023 accessibility plan is based on input from SHN employees, professional staff, volunteers, patients, visitors, community members and stakeholders. The plan incorporates and addresses the standards and general requirements of the AODA.

## The Accessibility Advisory Committee (AAC)

The Accessibility Advisory Committee (AAC) prepares the multi-year accessibility plan on behalf of the organization and with input from stakeholders. The AAC was established in 2003 at our legacy organizations with representation from hospital staff, patients, and community partners. The purpose of this committee is to ensure accessibility for all individuals living with disabilities while working, or accessing services, at SHN. This is done by identifying, establishing, and implementing appropriate accessibility measures by removing barriers to full participation. These measures are taken in accordance with the requirements of the AODA and any standards arising from the AODA. The creation of a refreshed and harmonized SHN Committee is an achievement since our last plan. The Committee includes a Vice-President as Executive Sponsor and reports to the Senior Leadership Team. Corporately, operating and capital budget allocations will be identified based on accessibility needs and recommendations of the AAC.

## **AAC Mandate**

1. To establish a three-year Accessibility Plan, aligning with the timeline of our strategic plan, that contains:
  - a. A report on the status of measures that SHN has taken to remove barriers and implement measures for improved accessibility, and
  - b. A breakdown of recommended initiatives and changes that will remove and prevent accessibility barriers for individuals with disabilities.
2. To develop an annual work plan that reflects the requirements noted above and oversee implementation of the plan.
3. To review the SHN accessibility policy and procedures every three years, or as needed, to ensure the alignment of legislation and current practices.
  - The accessibility policy establishes accessibility standards at SHN in accordance with the Ontario Human Rights Code and the Integrated Accessibility Standards Regulation (IASR) created under the Accessibility for Ontarians with Disabilities Act (2005). This policy applies to all employees, agents, volunteers, physicians, students, patients, families and contracted service staff of SHN. Refer to Appendix A for SHN's *Accessibility Policy, 'Accessibility for People with Disabilities – Integrated Accessibility Standards Regulation'*. This policy was reviewed and approved in December 2019.
4. To ensure that a training protocol (including current legislation, policies and practices) is established for current and new employees, leaders and physicians, and those returning from a leave of absence.
5. To stay abreast of best practices from other organizations, through knowledge translation of best practices and by sharing information and expertise. Currently, SHN is part of the Ontario Healthcare Network of Accessibility Professionals (OHCNAP), whose aim is to provide those with responsibility to implement AODA in their organizations an opportunity to seek each other's support, by sharing information and expertise.

## **AAC Roles and Responsibilities**

The AAC identifies, removes and prevents barriers for persons with visible and invisible disabilities, including patients, employees, professional staff, volunteers, visitors, and community members, by conducting this following activities:

1. Review by-laws, policies, programs, practices and services that cause or may cause barriers to people with disabilities and make recommendations for improvement.

2. Monitor the implementation and ongoing compliance with the five standards outlined in the *Accessibility for Ontarians with Disabilities Act, 2005*.
3. Identify, review, prioritize and remove barriers to accessibility.
4. Review feedback received internally and externally regarding barriers and respond accordingly.
5. Disseminate information to appropriate groups in order to prevent the inclusion of accessibility barriers in remodeled or newly constructed areas.
6. Raise organizational awareness and education on accessibility issues, barriers and government legislation.
7. Develop communications designed to promote staff understanding and sensitivity to the accessibility issues of people with disabilities.
8. Prepare the Accessibility Plan and ensure availability to internal and external stakeholders.
9. Promote the work of the Accessibility Advisory Committee.

## AODA Compliance Achievements

The following table outlines specific AODA requirements and the implementation deadline. SHN is compliant with all requirements. SHN strives to go beyond the requirements of the AODA within our comprehensive accessibility planning work.

AODA Requirement	Implementation Deadline	SHN Status
Training <ul style="list-style-type: none"><li>Provide accessible customer service training for staff and volunteers to serve customers of all abilities and keep a written record of training</li></ul>	January 1, 2010	Compliant
Feedback <ul style="list-style-type: none"><li>Create accessible ways for people to provide feedback</li></ul>		
Transportation <ul style="list-style-type: none"><li>Provide accessible transportation services</li></ul>	July 1, 2011	N/A. SHN does not manage or provide transportation services
Employment <ul style="list-style-type: none"><li>Provide accessible emergency and public safety information</li><li>Provide accessible emergency information to staff</li></ul>	January 1, 2012	Compliant
Policy <ul style="list-style-type: none"><li>Create an accessibility policy and make the policy public</li><li>Create a multi-year accessibility plan to help achieve accessibility goals and make the plan public</li></ul>	January 1, 2013	Compliant
Procurement <ul style="list-style-type: none"><li>Buy goods, services or facilities that are accessible to people with disabilities – where possible accessibility design, criteria and features are included in bid requirement documents and other methods of purchasing new goods, services or facilities</li></ul>		

AODA Requirement	Implementation Deadline	SHN Status
<p><b>Self-Service Kiosk</b></p> <ul style="list-style-type: none"> <li>Include accessibility features when purchasing or designing self-service kiosks (including any interactive electronic terminals that people use to pay parking fees, validate tickets, or access information)</li> </ul>		
<ul style="list-style-type: none"> <li>Make it easy for people with disabilities to provide feedback</li> <li>Train all employees and volunteers on accessibility requirements that apply to their job duties and policies and procedures</li> <li>Ensure new websites or old websites being significantly updated are accessible</li> </ul> <p><b>Employment</b></p> <ul style="list-style-type: none"> <li>Make employment practices accessible, including how SHN hires, retains, and provides career development opportunities</li> <li>Document processes for developing individual accommodation plans and return-to-work plans</li> </ul>	January 1, 2014	Compliant
<ul style="list-style-type: none"> <li>Make public information accessible when requested</li> </ul>	January 1, 2015	Compliant
<p><b>Design of Public Spaces</b></p> <ul style="list-style-type: none"> <li>Make new or redeveloped public spaces accessible</li> </ul>	January 1, 2016	Compliant
<ul style="list-style-type: none"> <li>File accessibility reports based on stated deadlines in the AODA</li> </ul>	December 31, 2020	Compliant
<p><b>Accessible Websites and Web Content</b></p> <ul style="list-style-type: none"> <li>The Integrated Accessibility Standard requires that SHN's websites meet criteria for accessibility.</li> </ul>	January 1, 2021	Compliant

## Our Actions to Achieve Excellence in Accessibility

SHN is taking the following actions to drive excellence in accessibility to meet or exceed the five accessibility standards.

### 1. Customer Service Standard

*The customer service standard outlines requirements for service providers to make their goods, services, and facilities accessible for customers or patrons with disabilities.*

SHN ensures that accessibility training is administered to all staff, professional staff, volunteers, agents, students, contractors and others who deal with the public or other third party vendors on behalf of SHN, as well as to those who are involved in the development and approval of accessibility policies, practices and procedures.

Mandatory training is provided to new hires during SHN's employee orientation, and all other individuals are required to complete a web-based training module at minimum, every two years. Training records are maintained for all participants and leaders are accountable for promoting compliance.

The content of the training outlines relevant accessibility standards and regulations, Ontario Human Rights Code and how to serve persons with various disabilities and service needs (such as individuals who are deaf, deafblind; individuals with intellectual and learning disabilities, mental health, mobility, speech impairments, vision loss; and individuals who require support persons and/or assistive devices).

### Other Customer Service Initiatives

#### Patient Assistance Program – Call Ahead Volunteer Assistance (CAVA)

- Patients or visitors can call to reserve a volunteer up to 24 hours before their hospital visit. Patients call a dedicated phone extension number prior to their arrival at the hospital to arrange for a volunteer to meet them at the entrance and assist them in navigating the hospital for their appointment. Accreditation Canada identified this initiative as a leading practice in December 2016.
- More recently, this program includes an option for departments to call ahead for a volunteer to support inpatients in navigating to the exit when leaving the hospital.

#### Service Animals

- SHN is committed to welcoming people with disabilities who are accompanied by service animals (dogs) to all areas of the hospital unless excluded by law or public health concern (Appendix A - SHN Accessibility Policy, Section 18.1).

## **Interpreter Assistance**

- Dual-handset interpretation phones have been installed at the Information Booths at the General and Centenary hospitals to allow volunteers to assist patients and families with language barriers. Interpretation phones are also available in the clinical areas of all three hospitals.
- We have increased the number of on-site face-to-face interpreters at all three hospitals to provide language support to our patients with language barriers.
- Additionally, we have an Employee Assistance Program vendor with increased language capability for staff and families.

## **2. Information and Communication Standard**

*The Information and Communications Standards lists rules for organizations to create, provide, and receive information and communications that people with disabilities can access. The standard gives all people an equal chance to learn and be active in their communities.*

### **Telecommunications**

There have been a number of improvements in Telecommunications at SHN that support enhanced accessibility. For example, at the Centenary hospital, pay phones are installed at a lower height for wheelchair access. In addition, closed-circuit television sets are mounted in public areas for public information announcements related to health issues.

Telephones are volume controlled for the hearing impaired across our three hospitals. We have TTY phones available on certain clinical units, or through switchboard for patient use. Patient phones now have larger buttons and volume control for hearing impaired persons.

Interpretation Services are available to deaf patients and families, as well as persons who do not speak English.

### **Communications and Public Affairs**

Following the merger of our three legacy hospitals, we developed a micro website in 2017 for what was then "Scarborough and Rouge Hospital (SRH)" while continuing to maintain our legacy hospital websites. After establishing our permanent organization name, as an interim Phase 1 solution, the SRH microsite was rebranded as "Scarborough Health Network (SHN)" and expanded to serve as our primary, single website. In 2019, content was migrated from the legacy websites, which were subsequently closed down.

Our temporary Phase 1 SHN public website follows AODA Communication

Standards and Web Content Accessibility Guidelines (WCAG) 2.0. Level AA.

SHN launched our new shared intranet site in 2019, known as MyNetwork. The site was created with Microsoft 365 SharePoint, and includes accessibility features that make it easier for people with disabilities to use.

### **Communication and Format of Documents**

Upon request, SHN will provide or arrange for the provision of accessible formats and communication supports for persons with disabilities:

- In a timely manner that takes into account the person's accessibility needs due to disability;
- At a cost that is no more than the regular cost charged to other persons;
- In consultation with the person making the request in determining the suitability of an accessible format or communication support; and,
- By notifying the public of available accessible formats and communication supports.

### **Notice of Availability of Documents:**

SHN will provide the public notice of the availability of the documents, required by the Accessibility Standards for Customer Service, (Ontario Regulation 429/07) upon request. Notice of availability will be provided on the website and through other printed methods.

### **Other Information and Communication Initiatives**

#### **Information and Technology Devices**

- End user computer systems are deployed with ease of access software built in, to aid in making the work environment more accessible. This includes, but is not limited to: Screen Magnifier; High Contrast Mode; On-Screen Keyboards; and, Speech recognition (limited use).
- Staff can also request additional accommodations that the Information Technology department (H.I.T.S) will evaluate for use and compatibility with hospital systems.

#### **Improving Accessibility in Public Spaces**

- Appropriate signage has been developed to ensure that patients who are in wheelchairs are aware of an accessible entrance near the Emergency Departments at all three hospitals.

## **Communications Plan**

- Our Communications Plan is updated on a regular basis. The goal of the Communications Plan is to promote awareness and inform patients, families, staff and visitors regarding available accessibility services.
- SHN has created a channel for feedback from stakeholders. SHN will, upon request, provide or arrange for accessible formats for persons with disabilities. This includes our feedback process. If the client/patient has a specific requirement, they can contact us at [communications@shn.ca](mailto:communications@shn.ca)

## **Format of Communication**

- Printed and online communications materials are appropriately designed to meet accessibility standards, including colour, fonts, language, etc. Upon request, SHN will provide accessible documents, materials or information in alternate formats to our patients.

## **Planned Initiatives 2020-23**

- Our Phase 2 website redevelopment project is underway and is scheduled to be completed in fall 2021. This website redevelopment includes an accessibility review and testing to ensure technical compliance of WCAG 2.0 Level AA. SHN is working with a web vendor and consultant, Sandbox Software Solutions, who have extensive experience with accessible website design and testing — and have built the websites for both the Canadian Helen Keller Centre and the Deafblind Network of Ontario.

## **3. Employment Standard**

*The Employment Standard requires that employers must make their workplace and employment practices accessible to potential or current employees with disabilities.*

SHN is committed to providing an employment environment that ensures people with disabilities are able to participate fully as applicants and employees of SHN.

Workplace Health and Safety continue to develop exit plans for employees when their disability could potentially affect their ability to safely exit the building during an emergency. These plans are reviewed and updated, as needed, when updated medical confirms any change in their medical condition.

## **Exit Plans for Emergencies and Exit Plans for Accommodation Review Process**

- An Exit plan is a written document that outlines the employee's restrictions, barriers to safe exit and the specific strategies in place to assist the employee with safely exiting the building during an emergency.

- The document is signed by all parties (Employee, Union, Human Resources, Manager and Workplace Health and Safety) at the accommodation / exit plan meeting.
- Accommodations and Exit plans are reviewed on regular (annual) basis.

### **Other Employment Initiatives**

- Review/revision of policies related to employment and harmonization of employment policies across all three hospitals
- Policies on code of conduct and workplace harassment and violence have been reviewed and updated with a diversity and inclusion lens
- SHN has invested in online training on how to conduct workplace investigations including those matters covered by the Ontario Human Rights Code.
- An initial cohort of leaders and staff has completed workplace mental health training and plans are underway to extend this training to a larger group.
- A Diversity, Equity and Inclusion Strategy is under development.

### **4. Transportation Standard**

*The Transportation Standard requires transportation service providers to make the features and equipment on routes and vehicles accessible to passengers with disabilities.*

SHN is committed to meeting the transportation needs of people with disabilities. Although SHN does not provide any transportation services to those with disabilities, the hospital has taken the following measures to facilitate patient access to transportation.

SHN provides telephones with a direct line to a taxi company at no charge. The service is self-pay and provides access to a car or van provided by the taxi company.

Volunteer assistance is available to those who are unable to use or access a telephone line.

### **5. Design of Public Spaces Standard**

*The design of public spaces standard outlines the need for newly constructed or redeveloped public spaces to be accessible for people with disabilities.*

This standard helps remove barriers in buildings and outdoor spaces for people with disabilities. SHN will comply with this standard when undertaking any new construction and redevelopment of public spaces in the following areas:

- Parking;
- Intersections from a pedestrian perspective; and,
- The maintenance of the spaces.

In addition, SHN ensures that accessibility is a key consideration in the hospital's master planning process and is a priority in the design of new builds. Partnering with the Government of Ontario, we are working through the stages of approval for these projects:

- New Emergency Departments at our Birchmount and Centenary hospitals;
- New Diagnostic Imaging Concourse at our General hospital; and
- Revitalized Chronic Kidney program across Scarborough with the Bridletowne Neighbourhood Centre (a central hub for the community).

With the expansion of the Emergency Departments, families in the community will have faster access to care that meets their growing needs, close to home. Our goal is to maintain continued investment in each of our hospitals and to deliver the best care for all the residents of Scarborough.

## **Other Design of Public Spaces Initiatives**

### **Automated Doors**

- Automated doors were installed in select locations at our Centenary and Birchmount hospitals to promote safe entry and exiting.

### **Rest Areas**

- Rest areas are in place in public spaces across all three hospitals. Cafeteria seating is configured to allow wheelchair access.

### **Patient Rooms**

- Wheelchair accessible showers and elevated tubs were installed in several locations across our hospitals and ceiling mounted lifts were installed, or portable lifts were made available, in select inpatient care areas.

### **Accessible Washrooms**

- More wheelchair accessible washrooms were installed to promote accessibility for patients. Automatic door operators were added to the Birchmount hospital, and existing ones have been replaced. We continue to improve accessibility of washrooms by installing L type grab bars in all hospitals.

### **Staxi Chairs**

- The number of staxi chairs was increased at General and Birchmount hospitals to meet the needs of our patients.

### **External**

- Accessible parking spaces are maintained at all three hospitals, exceeding the standard. Designated parking spots for pregnant women were created at

Centenary hospital. Leveling of the ramps has been completed for all three hospitals (from the parking lot to the front entrance sidewalks).

## Elevators

- Recent upgrades to elevators include braille, light up numbering and voice activation.

## Wayfinding

- Accessibility was a key consideration in the hospital's master planning process and is a priority in the design of new builds at SHN.
- Starting in December 2020, a pilot project will be initiated at Birchmount whereby patients and visitors will access a QR code to maps and wayfinding instructions to destinations within the hospital. This is a web-based tool developed by Volunteer Services to provide a virtual option to assist with easy navigation. This tool is a temporary interim measure to improve wayfinding until the corporate wayfinding project is complete.
- SHN is working with an external consultant to develop a new and consistent wayfinding system for all three hospitals to improve accessibility for patients and visitors. This will improve the patient experience at our hospitals by providing straightforward, intuitive and clear directions when navigating through the hospitals (expected completion date for this project is April 2022).

## Planned Initiatives 2020-23

- In addition to requirements under the Act, SHN will address wayfinding signage and perform annual audits to determine future planning requirements for accessibility.
- In any new capital projects involving major renovations, accessible washrooms are included in the design. In the upcoming Diagnostic Imaging Redevelopment project, there will be a new universal washroom constructed on the concourse level of the General Hospital West Wing (expected completion by 2023).
- Accessible washrooms will also be included in the upcoming major expansions of the Emergency Departments at the Birchmount and Centenary hospitals (expected completion by 2024).

Overall, these accessibility improvements mean that patients and visitors with disabilities receive better services through inclusion efforts. These individuals would likely be more willing to visit and receive care at SHN knowing that it is a safe, barrier-free and accessible environment.

## Communication of Our Accessibility Plan

SHN makes its Accessibility Plan available to employees, medical staff and the community.

*Internally:* Posting the Accessibility Plan on SHN's intranet site, which enables all employees and medical staff to consult or refer to the plan. The Accessibility Plan will also be shared with Leadership Forum via email and shared in a corporate newsletter.

*Externally:* Posting of the most recent plan on SHN's website, to ensure that patients, families and the community at large have access to the plan.

## Accessibility Work Plan 2020-23

This proposed high-level work plan uses the five AODA standards as a framework to outline SHN's Accessibility Plan 2020-2023. This plan will be adapted as needed to respond to organizational or legislative requirements.

Standard	Initiatives	Lead	2020 -21	2021 -22	2022 -23
<b>Customer Service Standard</b>	-Accessibility training to all physicians, leaders, employees	Human Resources and Organizational Development; Health Equity, Patient and Community Engagement; Communications	x	x	x
<b>Information and Communication Standard</b>	-Phase 2 website redevelopment -Wayfinding	Communications	x x	x x	x
<b>Employment Standard</b>	-Policy review -Workplace investigation training -Workplace mental health training -Diversity, Equity and Inclusion Strategy	Human Resources and Organizational Development	x x x x	x x x x	x
<b>Transportation Standard</b>	N/A to SHN				
<b>Design of Public Spaces Standard</b>	-Wayfinding -Oversee major capital projects	Facilities Planning, Redevelopment and Project Management Office	x x	x x	x x
<b>Other</b>	-Implement Accessibility Plan -Activate the harmonized AAC -Explore lessons learned during COVID-19 and how persons with disabilities were impacted; identify improvement opportunities	AAC & Lead departments  People & Transformation  People & Transformation		x x x	x x x

## APPENDIX A

# SHN Accessibility Policy



## Corporate and Administrative Manual

Category: Subject:	Corporate Administration Accessibility for People with Disabilities – Integrated Accessibility Standards Regulation	Policy Number: Date:	SHN-ADMIN-AD-012 2019/01
Issued By:	Vice President, Performance, Strategy and Innovation	Revision Date (s):	
Approved By: Rescinded Policies:	Senior Leadership Team TSH: 1.10.002; RVHS: ADMIN-AD-160	Page	Page 1 of 10

NOTE: A PRINTED COPY OF THIS DOCUMENT MAY NOT REFLECT THE CURRENT, ELECTRONIC VERSION ON SRH INTRANET. ANY COPIES APPEARING IN PAPER FORM SHOULD ALWAYS BE CHECKED AGAINST THE ELECTRONIC VERSION PRIOR TO USE.

### PURPOSE:

Scarborough Health Network (SHN) is committed to providing a respectful, positive, welcoming and inclusive environment to serve persons with disabilities. Our organization strives to provide a barrier-free environment where people with disabilities have the same opportunities to access our care and services.

This policy establishes accessibility standards at SHN in accordance with the Ontario Human Rights Code and the Integrated Accessibility Standards Regulation (IASR) created under the Accessibility for Ontarians with Disabilities Act (2005). This policy applies to all employees, agents, volunteers, physicians, students, patients, families and contracted service staff of SHN.

### POLICY STATEMENT:

SHN is dedicated to becoming fully accessible by 2021 by ensuring full compliance of accessibility standards in six areas: general requirements, customer service, information and communication, employment, transportation and design of public spaces.

Goods and services will be provided in a manner that respects the dignity and independence of all customers. The provision of services and communications to persons with disabilities will be carried out in a manner that takes into account specific and individual needs. Persons with disabilities will be given an opportunity equal to that given to others, to obtain, use or benefit from the goods and services provided by and on behalf of the organization.

### DEFINITIONS:

**Accessibility:** Giving people of all abilities opportunities to participate fully in everyday life.

**Assistive Device:** An assistive device is any device that is designed and/or adapted to assist a person to perform a particular task. Assistive devices include specialized aids and devices that enable people with disabilities to carry out their everyday activities. These include, but are not limited to, wheelchairs, hearing aids, adaptive computer technologies, ventilators, walkers, crutches and personal sound amplification devices. An assistive device may be their own personal devices, or one supplied by SHN.

**Barrier:** As defined by the Accessibility for Ontarians with Disabilities Act, 2001, anything that prevents a person with a disability from fully participating in all aspects of society because of his/her disability. It includes a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

**Disability:** As defined in Section 2 of the AODA Act, Disability means:

- Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or

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visual impairment, deafness or hearing impairment, muteness or speech impediment, or physical reliance on a guide dog, or other animal or on a wheelchair or other remedial appliance or device;

- A condition of mental impairment or a developmental disability;
- A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- A mental disorder; and/or
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.
- The definition includes disabilities of different severity, visible as well as non-visible disabilities, and disabilities the effects of which may come and go.

**Guide Dog:** A dog trained as a guide for a blind person and having the qualifications prescribed by the regulations: R.S.O. 1990, c. B.7, s. 1(1). Additionally, the Blind Persons Rights Act, defines a guide dog as a dog that has been trained at one of the facilities listed in Ontario Register 58 under the *Blind Persons' Rights Act* to act as a guide dog for people who are blind.

**Integrated Accessibility Standards Regulation (IASR):** Standards that build upon the Accessibility for Ontarians with Disabilities Act (2005) and contain six areas of focus to make Ontario accessible by 2025: General Requirements, Customer Service, Information and Communication, Employment, Transportation and Design of Public Spaces. As defined by the Ministry of Economic Development, Trade and Employment, the IASR establishes the compliance framework for obligated organizations. The IASR applies to all public, private and not-for-profit organizations, with at least one employee.

**Support Person:** A support person is an individual hired or chosen by a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs, or access to goods or services. The support person could be a paid personal support worker, a volunteer, or friend or family member. He or she does not necessarily need to have special training or qualifications.

### PROCEDURE:

#### Section 1: Providing Goods & Services to People with Disabilities

SHN will ensure people with disabilities will be provided with equitable access to goods, services, engagement opportunities, facilities and/or employment provided by SHN taking into account the person's disability. All documents related to the purchasing of goods and services for the organization include clauses that incorporate accessibility considerations in accordance with Plexus Procurement policy/procedure.

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### Section 2: Procurement

SHN will incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities through a variety of methods including asking potential suppliers about accessible options they offer and incorporating accessibility considerations (in accordance with Plexxus/Procurement) in all sourcing documents where applicable e.g. Request for Proposals, Request for Quotations.

### Section 3: Kiosks

SHN will incorporate accessibility features when designing, procuring or acquiring self-service kiosks.

### Section 4: Communication and Format of Documents

Upon request, SHN will provide or arrange for the provision of accessible formats and communication supports for persons with disabilities:

- in a timely manner that takes into account the person's accessibility needs due to disability;
- at a cost that is no more than the regular cost charged to other persons;
- in consultation with the person making the request in determining the suitability of an accessible format or communication support; and
- will notify the public of the availability of accessible formats and communication supports, upon request.

Examples of Accessible Formats and Communication Supports (not limited to):

- HTML or MS Word formats;
- Read, write or draw;
- Assistive listening devices;
- Sign Language interpreters;
- Large print;
- Braille;
- Accessible audio formats;
- Captioning or audio description; and
- Repeating, clarifying or restating information.

### Section 5: Notice of Availability of Documents

SHN will provide the public notice of the availability of the documents, required by the Accessibility Standards for Customer Service, (Ontario Regulation 429/07) upon request. Notice of availability will be provided on the website and through other printed methods.

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### Section 6: Accessible Internet Websites and Content

SHN's internet websites and web content will conform with the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0 Level A and Level AA in accordance with the schedule set out in the integrated accessibility standard. (no later than January 2021).

### Section 7: Notice of Temporary Disruptions

SHN will provide notice to the public in the event of planned or unexpected disruptions in the facilities or services usually used by people with disabilities. These notices will include information about:

- the reason for the disruption
- how long the disruption is expected to last
- a description of any available alternative facilities, services or resources

All disruptions to accessibility services must be reported to the Facilities Department so that a notice of temporary disruption can be issued. Disruptions of a serious or prolonged nature must be reported to the Government Relations and Communications department. Notices of Temporary Disruption may be:

- Posted in large print in key areas of the hospital, such as at public entrances and on service counters, as determined by Government Relations and Communications.
- Posted on SHN's public website (if public disruption) or communicated via intranet or email (if internal disruption) so staff are aware and can appropriately guide individuals with disabilities to alternative services, if available.
- Issued to the local media through news releases in the case of serious and longer term disruptions in accessibility services.
- Notices communicating a temporary disruption to SHN service will be in:
  - a. English, Tamil and Chinese
  - b. suggested use of Arial font style
  - c. at least 24-point size
  - d. high contrast colours such as black and white and easy to read

### Section 8: Inclusive Meetings

SHN will strive to ensure all meetings are organized, co-ordinated, and planned to accommodate persons with disabilities and will arrange for appropriate requests based on the individual's disability.

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### Section 9: Telephone Services

SHN will provide accessible telephone service, including, but not limited to, TTY and relay services and will train all applicable employees, volunteers and others working with the public on how to communicate over the telephone in clear and plain language.

### Section 10: Assistive Devices

SHN provides assistive devices to assist persons with a disability to access the goods and services at the organization. SHN will ensure that relevant staff members know how to access and use the assistive devices that are available that there are instructions available for these devices. These include, but are not limited to:

- Staxi Chairs are available at both main campuses.
- Accessible washrooms are available at all of our locations.
- TTY and access to sign language are available for deaf, deafened, and hard of hearing patients.
- Uniphone 1000 TY (for patient's room)
- Hearing Stickers
- Pocket Talker Pros/Stetoclip Headsets with Adapters
- Call Alert 100
- Neck Loop
- In-Line Phone Amplifier
- Alert Master 6000 (for labour and delivery)

If units/departments require assistive devices, the Canadian Hearing Society ([www.chs.ca](http://www.chs.ca)) can be contacted at 416-964-9595 to place an order. Units/departments will be responsible for any charges/fees related to ordering any assistive devices.

### Section 11: Feedback Process

SHN will ensure that the process is accessible to persons with disabilities by providing or arranging for the provision of accessible formats and communication supports upon request. It is the responsibility of SHN staff and physicians to respond to patient, family and visitor complaints. Complaints are best resolved by those most closely associated with the patient and their family. The Patient Relations department is also available to assist programs in the resolution and/or response to complex issues.

Individuals with compliments, concerns or complaints may access the hospital's public website's Patient Relations webpage:

Birchmount and General sites: [www.tsh.to](http://www.tsh.to) → under the "Contact" section, click on the link to the "Patient Feedback Form."

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- Centenary site: <http://www.rougevalley.ca/SHN> → under the "Contact" section and scroll to the "Patient information" section

### Section 12: Emergency Procedures, Plans or Public Safety Information

SHN will make information about emergency procedures, plans or public safety information available to the public in an accessible format upon request, as well include on the hospital webpage to ensure their safety when at the hospital. Accessible formats of requested documents will be provided in a format that meets the needs of the requested individual.

### Section 14: Workplace Emergency Response

SHN will provide individualized workplace emergency response information to employees who have self-identified a disability.

### Section 15: Employment

SHN will meet the requirements as set out in the schedule of the Integrated Accessibility Standard Regulation for all areas of employment.

### Section 16: Multi-Year Accessibility Plan

SHN will establish, implement, maintain and document a multi-year accessibility plan outlining SHN's strategy under AODA and the supporting standards to meet its requirements in preventing and removing barriers for persons with disabilities. The multi-year plan will be posted on the hospital's public website for the public to have access, as well the intranet site for staff to view.

### Section 17: Accessibility Training

SHN will provide and ensure training is administered to all staff, volunteers, agents, students, contractors and others who deal with the public or other third party on SHN's behalf, and those who are involved in the development and approval of accessibility policies, practices and procedures.

Mandatory training will be provided to new hires during SHN's employee orientation, and all other individuals will be requested to complete a web-based training module at minimum, every 2 years. Training records will be kept for all participants.

Content of training will outline relevant accessibility standards and regulations, the Ontario Human Rights Code and how to serve persons with various disabilities and service needs (such as individuals who are deaf, deafblind, intellectual and learning disabilities, mental health, mobility, speech impairments, vision loss and those who require support persons and assistive devices).

### Section 18: Use of Service Animals (Dogs), Safety and Support Persons

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### 18.1 Service Animals (Dogs)

We are committed to welcoming people with disabilities who are accompanied by service dogs to all areas of the hospital unless excluded by law or public health concern. Exclusions at SHN include: the Intensive Care Unit (ICU), Operating Room (OR), Coronary Care Unit (CCU), Acute Medical Unit (AMU), Acute Surgical Unit (ASU), Hospital laboratories, dialysis, burn units, kitchens, isolation rooms for infectious illness and colonization with an antibiotic resistant organism, labour and delivery, medication preparation areas, nurseries, sterilization areas (SPD) and clean or sterile supply storage areas.

When people with disabilities are accompanied by a service animal, the following must be noted:

- The service dog must have current vaccinations and the owner of the animal may be asked to provide a certificate of vaccination.
- The service dog must be free of any parasites, fleas/ticks, diarrhea and exposed skin lesions.
- The service dog must have recently been bathed.
- Patients with service dogs cannot be placed in a room with another patient who has an allergy to the service animal.
- Persons who object to a service dog being in close proximity will be provided with alternative arrangements so as not to negatively impact access to services requested.
- Service dogs may be evicted or excluded from SHN from its owner only for the following reasons:
  - if the dog's behavior poses a direct threat to safety towards other patients or staff members
  - if contraindicated by the attending physician for sound medical and/or safety reasons
- If a patient must be removed from his/her service dog while in the Hospital, the health care provider must contact the owner's next of kin, support person or emergency contact to come to the Hospital and assume responsibility of the service dog. Appropriate arrangements must be made to address the patient's needs in the absence of the service dog.
- If a person with a disability is prevented from accessing their support animal, the hospital will, where appropriate and available, arrange an alternate service to allow that person to access hospital services.

#### 18.1.1 Responsibilities

- Owner:
  - a. People accompanied by service dogs are responsible for the care and supervision of their service dogs.
  - b. SHN will not accept responsibility for service dogs' care while the animal is on the premises. It is the owner's responsibility to make arrangements for their dogs' care.

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- Area Charge Person:

- Charge persons are responsible to ensure they inform staff of the role of the service dog, and how to interact with the patient and dog.
- Patients, visitors and other staff and volunteers working on the unit should be notified of the service dog's presence and address any concerns (e.g. allergies).
- Instructions as to how the service dog should be fed, cared for and handled should be discussed with the owner and staff members.

- Staff (including physicians):

- Staff members are obligated to allow the service dog to accompany the patient at all times except where noted otherwise (see above).
- Actions such as talking, toileting, interacting, feeding, touching or making eye contact with a service dog should be avoided at all times as dogs are working and need to stay focused.
- Staff members should remember to never separate the patient from the service dog. If uncomfortable providing care to the patient with a dog support, finding an alternative professional who will provide that care and document this in the patient's health record is advised.

### 18.2 Safety

If a staff member is reportedly bitten, scratched or injured by a service dog, a safety report must be completed in the electronic incident reporting system detailing the name of the injured, circumstances and nature of the injury. The Occupational Health and Safety Department must be notified and if necessary, staff should be assessed in the Emergency Department.

If a patient is reportedly bitten, scratched or injured by a service animal, the primary care physician must be notified. Additionally, an incident report must be completed and Patient Relations notified.

If a visitor is reportedly bitten, scratched or injured by a service animal, they should be referred to the Hospital's Emergency Department for assessment and Patient Relations notified.

All bites should also be reported to the nearest Animal Services Centre or by calling 416-338-PAWS (7297).

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### 18.3 Support Persons

People with disabilities who are accompanied by a support person have the right to have access to that support person while receiving care and services at SHN. The hospital may, however, limit a support person's access to their charge on the basis of medical or safety considerations. For example, if a designated support person has a communicable illness and it is likely that they will put others at risk due to their illness, they may be denied access to their charge or to areas of the hospital. Support persons may be denied accompanying the patient in areas such as surgical suites, procedure rooms, x-rays, PACU and recovery rooms if this poses a risk to being present in these areas.

If a person with a disability is deprived of access to their support person for this reason, the hospital will assume responsibility for the basic care of the individual with a disability. If possible, situations requiring the separation of the individual and support person will be discussed with the individual in advance and appropriate measures taken. The hospital may also require the presence of a support person, if it is deemed by staff that a significant amount of risk is incurred by an individual with a disability who is attempting to access hospital services without assistance.

When people with disabilities are accompanied by a support person, the following must be noted:

- All health care providers are to ask the patient directly if he/she requests the support person to be present when personal health issues are being discussed and to document in the patient's health record.
- A support person may be requested to leave the building premises or separated from the patient if his/her actual behavior poses a threat to the patient or healthcare provider or the attending physician has sound medical reasons. These circumstances must be documented in the patient's health record.

#### 18.3.1 Responsibilities

- **Charge Person:** Inform staff about the role of the support person and appropriate interaction with the patient and the support person.
- **Staff and Physicians:**
  - a. Should not remove a patient from his/her support person without the patient's permission and consent unless there are medical reasons for the separation.
  - b. If a health care provider refuses to provide care to the patient with the support person present, alternative arrangements will be made for the patient to receive care and this will be documented in the patient's health record.

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### REFERENCES:

- Accessibility for People with Disabilities, Policy Number 1.20.011 (2010). University Health Network, Toronto.
- Providing Access for People with Disabilities, Policy Number I-d-65-73 (2012). Mount Sinai Hospital, Toronto
- Accessibility Customer Service Policy and Procedures (2010). Lakeridge Health, Oshawa
- Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11
- Legacy Rouge Valley Health System, Accessibility for Persons with Disabilities, 2016
- Legacy The Scarborough Hospital, Accessibility for People with Disabilities, 2016

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Risk Management and Patient Safety (2017/09)  
SHN Accessibility Advisory Committee (2017/09)

### APPROVED BY:

Senior Leadership Team (2017/09)