Rouge Valley Health System
Annual Accessibility Plan
2012 - 2017

(Accessibility for Ontarians with Disabilities Act, 2005)

Prepared by
Rouge Valley Health System Accessibility Working Group

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

www.rougevalley.ca
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Glossary Information
Common abbreviations or shortened official names used in this document are:

RVHS = Rouge Valley Health System
RVAP = Rouge Valley Ajax and Pickering RVC = Rouge Valley Centenary
AODA = Accessibility for Ontarians with Disabilities Act AWG = Accessibility Working Group
CNIB = Canadian National Institute for the Blind
Ministry = Ministry of Health and Long Term Care SMT = Senior Management Team
MIS = Management Information Systems
Executive Summary

The Ontarians with Disabilities Act 2001 (ODA) was proclaimed in September 2002. The intent of the ODA is to increase overall awareness with respect to the needs of individuals with disabilities and society’s obligations to ensure that the “environment” is barrier-free and accessible. The legislation is broad in nature but does involve specific references to the obligations of hospitals. Under Section 15 of the ODA, hospitals must prepare a multi-year accessibility plan and in the process consult with persons with disabilities in preparation of the plan. The accessibility plan addresses the identification, removal, and prevention of barriers to persons with disabilities.

The ODA’s goal (2001) is to improve opportunities for persons 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.

On June 14, 2005, the Accessibility For Ontarians With Disabilities Act, 2005 received royal assent. The Act is designed to allow people with disabilities to participate in building a stronger province. The legislation covers both the public and private sectors to address the full range of disabilities (visible and invisible), including physical, sensory, hearing, mental health, developmental and learning.

The purpose of the Act is to benefit all Ontarians by achieving accessibility for people with disabilities by developing, implementing and enforcing accessibility standards concerning goods, services, accommodation, facilities, buildings and employment. Improvements will be phased in, in stages of five years or less, moving towards a fully accessible Ontario by 2025.

Provincially, members of the disability community, representatives of the broader public and private sectors, and government, are developing meaningful, realistic standards collaboratively. These committees have:

- Developed proposed accessibility standards;
- Released an initial proposed standard for public review;
- Revise the proposed standard to incorporate public input;
- Submitted a final proposed standard to the government for consideration as law. Proposed timelines for implementation
The legislation also provides tough penalties for violators. Businesses and organizations that provide goods and services to people in Ontario will have to meet certain accessibility standards in five important areas of our lives:

- Customer service;
- Transportation;
- Information and Communications; Built environment;
- Employment.

For additional information, you can access the Ministry website at: [http://www.mcss.gov.on.ca/mcss/english/pillars/accessibilityOntario/accesson/act.htm](http://www.mcss.gov.on.ca/mcss/english/pillars/accessibilityOntario/accesson/act.htm)

An Accessibility Standards Advisory Council is advising the Minister on the progress made by standards development committees, public education programs and other matters. The government will take a modern, transparent approach to enforcement. Organizations covered by standards are obliged to file accessibility reports annually or as required, confirming compliance, and make them public. Rouge Valley was subject to an audit in October 2011, and found to be in compliance with standards at that time.

The first standards released were the Accessibility Standards for Customer Service, which was implemented, by the private and public sector on January 1, 2010. The first standards required:

- Development of policies, including policies related to service animals; Development of standards around temporary service disruption;
- Development and delivery of training;
- Development of procedures for public feedback.

RVHS has maintained a minimum 95% to 100% training compliance in all categories of individuals providing customer service. In addition, RVHS has implemented START with HEART, a customer-service training module for its 3500 staff, physicians and volunteers and AODA criteria was considered during the development of curriculum for training.

- Training has been provided individually, in classrooms and through on-line training tools;
- Information packages have been distributed;
- New staff and volunteers are trained on date of hire in General Orientation;
• Physicians receive written materials upon hire and annual credentialing for physicians requires attestation to the understanding of the AODA standards;
• A customer service handbook has been developed;
• AODA Program communication has been provided via Town Halls, Leadership Forum, e-Echo newsletter communications.

Through the leadership of the Accessibility Working Group and support from senior management and staff, RVHS is committed to raising awareness of barriers to persons with disabilities and taking steps to remove/prevent those barriers.

The 2012-17 Accessibility Plan will build on the foundational elements, which began in 2007-08, and years prior. More specifically, ongoing training in the customer service standards will continue and implementation of new integrated customer service standards will take place. These standards require that disabled staff, physicians, volunteers and others who require assistance during emergencies are provided with required information and that emergency response information is available upon request to the public. Policy review will continue and an assessment of future needs will be done.

Annual Accessibility Plan

Goal
Our goal for the coming year is to continue to raise awareness of the AODA, encourage greater involvement in our planning activities of persons with disabilities, and develop a work plan and timetable for identifying and removing barriers at Rouge Valley Health System. As we near the end of the 2013 calendar year, we will be implementing the required provisions of the Act. We will continue to integrate the spirit of the AODA into our current policies, procedures, and activities.

By improving access for persons with disabilities, we improve access for all.
Objectives As Defined by the AODA

Long-Term Objectives for RVHS:

1. Describe the processes that will identify, remove, and prevent barriers to persons with disabilities.
2. Annually, review efforts to remove and prevent barriers to persons with disabilities.
3. Continual review of policies, programs, practices, and services to identify and remove barriers to persons with disabilities.
4. Describe the measures to be taken to identify, remove, and prevent barriers to persons with disabilities.
5. Annually, review and update the Accessibility Plan and post on the website for the public.

Definition of a Barrier:
A barrier is anything that prevents a person from fully participating in all aspects of society because of his/her disability, including physical barrier, architectural, informational or communication barrier, an attitudinal barrier, technological barrier, policy, or practice.

Most people consider barriers as physical or architectural. However, there are other types of barriers. The following sample chart lists and defines the type of barrier that will be assessed utilizing our identification methodology.

<table>
<thead>
<tr>
<th>Type of Barrier</th>
<th>Barrier Example</th>
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</thead>
<tbody>
<tr>
<td>Physical</td>
<td>Workstations that obstruct the view of a person in a wheelchair</td>
</tr>
<tr>
<td>Architectural</td>
<td>Washroom not accessible to wheelchairs</td>
</tr>
<tr>
<td>Communication/Information</td>
<td>Website not available to a person with a visual impairment</td>
</tr>
<tr>
<td>Attitudinal</td>
<td>Not addressing the person with a physical/cognitive/mental disability directly</td>
</tr>
</tbody>
</table>

Rouge Valley Health System
Accessibility Plan 2012 - 2017
<table>
<thead>
<tr>
<th>Technological</th>
<th>Phones not available to persons with a hearing impairment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy/Practice</td>
<td>Language in a job posting that prevents a person with a disability from applying where education/experience/duties are not bona fide requirements for the position</td>
</tr>
</tbody>
</table>

**Definition of a Disability:**
(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 impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

(b) a condition of mental impairment or a developmental disability;

(c) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,

(d) a mental disorder, or

(e) an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997; (“handicap”).

**Accessibility Objective**
Aligned with the Patient Declaration of Values, RVHS is committed to the continuous improvement of access to its facilities, policies, programs, practices, services for patients, visitors, staff, physicians, volunteers and the community at large with disabilities and ultimately to addressing issues that negatively impact the patient experience.

Under the authority of the Board of Directors, RVHS adheres to the following Accessibility Planning Policy. RVHS is committed to:
- Continuous improvement, within available resources, of access to facilities, policies, programs, practices and services as they relate to
patients and their family members, staff, physicians, volunteers and members of the community with disabilities;

- The participation of people with disabilities in the development and review of its annual accessibility plans;
- Ensuring hospital bylaws and policies are consistent with the principles of accessibility; and
- The continuation of the Accessibility Working Group at RVHS.

Rouge Valley Health System - History

RVHS is an excellent acute care community hospital with many programs, including 24/7/365 emergency, cardiac care and mental health. Rouge Valley consists of several health sites, including two community hospital campuses: Rouge Valley Centenary in Scarborough; and Rouge Valley Ajax and Pickering in west Durham. Together, a team of physicians, nurses and many other professionals care for a broad spectrum of patients with varying health conditions. Working in consultation and partnership with community members, other hospitals, health care organizations, the Central East Local Health Integration Network and the Ministry of Health and Long-Term Care, Rouge Valley continues to improve its programs and cater to the needs of the growing communities of east Toronto, Ajax, Pickering and Whitby.

Both hospital campuses have a several-decades long history of community support, which has continued into the merged system.

RVAP has served residents of West Durham (Ajax, Pickering, Whitby) since 1954 and has earned a reputation for its family atmosphere. Beginning with just 38 patient beds when it first opened, to the 155 beds it now offers, the hospital has seen much growth and corresponding community support. New four-story wings were added in 1964 and 1994.

RVC has served the residents of Scarborough since 1967. It was built with community support, dating to 1964 when a group of Scarborough residents began a campaign for a second community hospital. The Township of Scarborough purchased property formerly owned by the Boy Scouts of Canada and donated another 25 acres for construction of the Scarborough General Hospital, as it was then called. In addition to the original 15-floor tower, two additional wings have been added, including the Margaret Birch Wing in 1986 and The Court medical suite in 1991. It currently has 324 beds.
RVHS in the Future

As our communities in west Durham Region and east Toronto continue to grow, so do the demands on our hospital. The need to expand has become necessary in order to properly care for our growing patient population.

Rouge Valley Ajax & Pickering (RVAP)

In the fall of 2010, a new redevelopment project introduced 140,000 square feet of new and/or renovated space for services. This expansion provided for:

- New Emergency Department
- New Diagnostic Imaging and Laboratory space
- New 10-bed complex continuing care unit
- New cardiac diagnostics
- New and expanded ambulatory care unit
- New cafeteria
- New gift shop
- New, more accessible east and west entrances

Rouge Valley Centenary (RVC)

In 2009, RVC opened its state-of-the-art Birthing and Newborn Centre. Some of the features in this new facility include: expanded Labour, Delivery, Recovery and Postpartum (LDRP) rooms; a brand new Advanced Level II Neonatal Intensive Care Unit, built adjacent to modern, state-of-the-art operative birthing rooms; and four private care-by-parent rooms for parents to look after babies who may be admitted for prolonged periods.

Our construction projects are designed to improve accessibility for those with physical disabilities. Each new facility features a construction design and equipment that will help to address the accessibility needs of our patients.

Approved for construction in 2014 is a small expansion of the Emergency patient reception area including accessible washrooms. Also planned for 2014 are several renovations (incorporating current standards of accessibility requirements) to patient care areas to facilitate implementation of a new bed map for RVC and RVAP.
The Accessibility Working Group

Mandate of the Accessibility Working Group

The Senior Management Team (SMT) formally constituted the Accessibility Working Group in April 2003. SMT authorized the Accessibility Working Group to:

- Review and list by-laws, policies, programs, practices and services that cause or may cause barriers to persons with disabilities;
- Identify barriers that will be removed or prevented in the coming year(s);
- Describe how these barriers will be removed or prevented in the coming year(s); and Prepare annual plans on RVHS activities, and make the plan available to the public; Communicate and educate to integrate spirit and awareness of AODA within the culture of RVHS - demonstrating leadership in the area of accessibility;
- Consult with local and regional accessibility councils to ensure collaboration, efficient use of resources, coordination, and information sharing.

Review and Monitoring Process

The Accessibility Working Group meets regularly to review progress. The Accessibility Working Group conducts annual audits. The Senior Management Team (SMT) representative is a member of the working group. The Vice President of Human Resources and members of the Accessibility Working Group provide SMT with updates as necessary.

Recent Achievements

RVHS has implemented many initiatives during the last few years to improve accessibility at its hospitals. Some of the highlights include:

1. The expansion and redevelopment of RVAP provided approximately 140,000 square feet of new or renovated space. Accessibility features included in its design include:
   - Clearly defined building access points;
   - Barrier-free designed paths are clearly sighted;
• Special needs patients are better accommodated with a dedicated parking area accommodating barrier-free path without having to walk uphill;
• Information desks have been included just inside both entrances, making them easier to find for those seeking directions;
• Both main entries provide views to the outside and a lot of natural light, improving both visibility and sense of orientation;
• Addition of Staxi-chairs, portable wheelchairs at entrances;
• Braille- and/or voice-support elevators;
• Wheelchair accessible showers and central wheelchair accessible washroom on the third floor Rehabilitation Unit;
• Automated doors to Day Surgery;
• Central wheelchair accessible washrooms on the Physiotherapy Unit;
• Widened door with automated opener at the Ambulatory Care Unit;
• Wheelchair accessible counters at central registration/admissions;
• Repairs to the parking lot;
• Way finding maps posted at entrances to RVAP include bar code scanning ability to blackberries to access site maps.

2. At RVC, renovations and improvements have included:
• Contrasting door frames;
• Floor edges;
• Elevated tubs;
• Wheelchair accessible showers at the Margaret Birch Wing and Birthing Centre;
• Accessible washrooms in some units;
• Wheelchair accessible tables added in the cafeteria; Wide doorway in the MRI/Breast Centre;
• Automated doors at the Margaret Birch Wing entrance, entrance to the Operating Rooms and Recovery Rooms;
• Removal of the plexi-glass surrounding the Information Desk, located in the RVC Court. This allows patients and visitors in wheelchairs, or walkers to speak directly to volunteers.
• Repairs to the parking lot
• Designated parking spots for pregnant women

3. Other recent and ongoing improvements across RVHS include:
   • Wheelchair accessible washrooms in all renovations at both hospitals;
   • Rear-view mirrors installed in elevators;
   • Braille elevator numbers;
   • More translated brochures and signs at RVC in Tamil and Chinese;
   • Language line in place for translation services in the Birthing Unit, Maternal Newborn Services, and Genetics and will be rolled out across the organization;
   • Accessible parking spaces maintained, exceeding the standard;
   • Leveling of the ramps from the parking lot to the front entrance sidewalks;
   • Installation of ceiling mounted lifts or availability of portable lifts in patient rooms and in patient care areas (like Diagnostic Imaging, etc.)
   • Hiring a specialist in Musculo-Skeletal (MSK) injury prevention to support staff, physicians and volunteers in an effort to reduce injury and provide accommodation recommendations where necessary.

All of these improvements mean better access for patients and visitors with physical disabilities, thus removing some of the stigma and exclusion that many experience.

**Policies and Procedures**

Policies regarding accessibility are reviewed annually, or as needs arise. When necessary, policies are revised to ensure that they are in compliance with the spirit of the RVHS accessibility program and the ADOA. The Accessibility Policy was updated in December 2011, to comply with the amendments made to the Customer Service Standard through the Integrated Customer Service provisions. One example of how policies are developed with accessibility in mind is the Employee Modified Work Program and the MSK program. These two programs provide support for injured staff trying to reintegrate to the workplace, or when barriers to accessible employment have been identified and need to be addressed.
Facilities
At RVHS, all construction projects, whether current or completed, have accessibility in mind. Please refer to Appendix G for photos.

The Birthing Unit (BU) at RVC is a ground level, one floor facility. Its barrier-free access allows for walkers and wheelchairs. The front entranceway to the BU links the building to the RVC Court, and is also barrier-free. Automatic door openers have also been placed at the RVC Court entrance of the BU, and all of the main entrances throughout the hospital. All of the doorways throughout the BU feature automatic doors. Throughout the BU are also wheelchair accessible showers. Signage throughout the BU includes pictograms and Braille for the visually impaired.

There are similar features throughout our new Emergency Department and new Complex Continuing Care Unit at our RVAP campus.

RVAP’s patient registration areas now feature wheelchair height countertops, allowing the patient to be at the same height as the Clerk.

Telecommunications
There have been a number of improvements in Telecommunications. At RVHS, pay phones are now touch tone (TTY) compliant and hearing-impaired compliant. They have also been lowered for wheelchair access. Closed-circuit television sets are mounted in public areas for public information announcements related to health issues.

At both sites our telephones are volume controlled for the hearing impaired. We now have TTY phones that can be signed out through Switchboard for patient use and we provide telephone and/or translation services for deaf patients/families or for those whose first language is not English. Patient phones now have larger buttons and volume control for the deaf.
Public Affairs and Community Relations

Website

The RVHS website (www.rougevalley.ca) has been updated to provide a slightly larger than standard font size throughout, and has been maintained as a standard. The Hospital is working to ensure full compliance with AODA IT minimum standards by 2014.

Intranet and Hospital Software Capability

The Public Affairs and Management Information Systems (MIS) departments successfully launched our Intranet site in 2006. We have successfully maintained this text-based site, ensuring greater compatibility potentially for visually impaired staff to use with read-aloud software. Our software products also provide Accessibility upgrades, including magnifier capability.

2013-2014 Accessibility Plan Goals

A full AODA implementation plan is appended as Appendix A. This shows the remaining requirements and implementation date requirements relative to AODA. In addition to requirements under the Act, the Hospital will address way-finding signage and perform annual audits to determine future planning requirements for accessibility.
Appendices

Appendix A - Timeline for Accessibility Program

Appendix B - RVHS Accessibility Customer Service Policy

Appendix C - RVHS AODA Customer Service Brochure

Appendix D - Accessibility Guidelines Poster

Appendix E - Accessibility Features at RVHS
### APPENDIX A - Accessibility Timelines as identified by the Integrated Accessibility Standards of the AODA

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<tr>
<th>Requirements</th>
<th>Lead</th>
<th>Deadline</th>
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<tr>
<td>Sec. 13.1 Emergency and public safety information for the public accessible upon request</td>
<td>Emergency Preparedness Communications</td>
<td>January 2012</td>
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<tr>
<td>Sec. 14. (5)b Website compliance deadline is January 2014 on all content published after January 2012 (must start tracking)</td>
<td>Communications</td>
<td>January 2012</td>
</tr>
<tr>
<td>Sec. 27 Individualized workplace emergency response information for employees with disabilities (personalized safety plan)</td>
<td>Occ. Health Emergency Preparedness Human Resources</td>
<td>January 2012</td>
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### UPCOMING GENERAL PROVISIONS

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<tr>
<th>Requirements</th>
<th>Lead</th>
<th>Deadline</th>
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<tr>
<td>Sec. 3.1 Develop policies on implementing IAS, statement of organizational commitment</td>
<td>HHW Committee</td>
<td>January 2013</td>
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<tr>
<td>Sec. 4 Multi-year accessibility plan reviewed every five years with annual status report posted</td>
<td>ADSE Sub-Committee</td>
<td>January 2013</td>
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<tr>
<td>Sec. 5 Incorporate accessibility criteria into procuring goods, services and facilities (including kiosks Sec. 6)</td>
<td>Procurement Facilities</td>
<td>January 2013</td>
</tr>
<tr>
<td>Sec. 7 Training and tracking training on IAS and on Ont. Human Rights Code to all employees, volunteers &amp; contractors</td>
<td>Human Resources Organizational Learning</td>
<td>January 2014</td>
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<td><strong>UPCOMING INFO AND COMMUNICATION STANDARDS</strong></td>
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<td><strong>Sec. 14. (4) Accessible Web content to WCAG</strong></td>
<td>Communications</td>
<td>January 2015</td>
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<td><strong>2.0 AA</strong></td>
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<tr>
<td><strong>Sec. 14. (4) 2 All web site content WCAG 2.0</strong></td>
<td>Communications</td>
<td>January 2021</td>
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<td><strong>AA</strong></td>
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<tr>
<td><strong>Sec. 14. (5)b Section 14 Applies to all</strong></td>
<td>Communications</td>
<td>January 2012</td>
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<td><strong>content published after January 2012</strong></td>
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<tr>
<th><strong>UPCOMING EMPLOYMENT STANDARDS</strong></th>
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<tr>
<td><strong>Sec. 22 Recruitment – notify employees and</strong></td>
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<tr>
<td><strong>public about accommodation in Recruitment</strong></td>
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<tr>
<td><strong>process</strong></td>
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<tr>
<td><strong>Sec. 23 Notify applicants of accommodation</strong></td>
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<td><strong>in recruitment during assessment/selection</strong></td>
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<td><strong>Sec. 24 Notify when making offers of</strong></td>
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<td><strong>employment of accommodation policies</strong></td>
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<td><strong>Sec. 25 Inform all employees of supports</strong></td>
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<td><strong>available, and update when changes</strong></td>
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<td><strong>Sec. 26 Provide accessible formats</strong></td>
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<tr>
<td><strong>and communication supports</strong> employees</td>
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<tr>
<td><strong>Sec. 28 Written process for documenting</strong></td>
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<tr>
<td><strong>individual accommodation plans</strong></td>
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<td><strong>Sec. 29 Return to work process</strong></td>
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<td><strong>documented</strong></td>
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<td><strong>Sec. 30 Performance management</strong></td>
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<td><strong>shall take into account accessibility</strong></td>
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<td><strong>needs and accommodation plans</strong></td>
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<td><strong>Sec. 31 Career Development and</strong></td>
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<tr>
<td><strong>Advancement: incorporate accessibility</strong></td>
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<td><strong>and accommodation plans</strong></td>
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<tr>
<td><strong>Sec. 32 Redeployment activities will</strong></td>
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<td><strong>take into account accessibility needs</strong></td>
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<td><strong>and accommodation</strong></td>
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APPENDIX B –RVHS Accessibility- Customer Service Policy

ROUGE VALLEY HEALTH SYSTEM
ADMINISTRATIVE MANUAL

CATEGORY: ADMINISTRATIVE/BOARD  NUMBER: ADMIN-AD-160
SUBJECT: ACCESSIBILITY - CUSTOMER SERVICE POLICY  DATE: 2009/10; 2011/12
ISSUED BY: V.P. HUMAN RESOURCES  PAGE: 19 of 4

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

PURPOSE

The purpose of this policy is to establish procedures and practices that will facilitate the implementation of the Accessibility for Ontarians with Disabilities Act 2005 (AODA). This policy establishes the accessibility standards for customer service for the organization, in accordance with Ontario Regulation 429/07 and will be updated from time to time to reflect changes to legislation. This policy applies to all employees of Rouge Valley Health System (RVHS), agents, volunteers, physicians, students and contracted service staff.

POLICY

Rouge Valley Health System is committed to providing exceptional and accessible service for its customers. Goods and services will be provided in a manner that respects the dignity and independence to all customers. The provision of services and communications to persons with disabilities will be carried out in a manner that takes into account that person’s disability. 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.

Definition(s)

Accessible means customer service is provided in a manner that is capable of being easily understood or appreciated; easy to get at; capable of being reached, or entered; obtainable.

Disability means:

a) Any degree of physical 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 impairment, deafness or hearing impediment, 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,
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

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

Example: A person with arthritis has a disability that over time may increase in severity.
Example: A person with a brain injury has a disability that is not visible.
Example: A person with multiple sclerosis has a disability that causes extended periods when the condition does not have an effect on daily routine and other times when it does.

It is important to understand that information about a disability is personal, private and must be held in confidence by the organization.

PROCEDURES

1) Use of Service Animals and Support Persons

Service Animal - an animal for a person with a disability:
1) if it is readily apparent that the animal is used by the person for reasons related to his or her disability; or
2) if the person provides a letter from a physician or nurse confirming that the person requires the animal for reasons relating to the disability.

a. If a person with a disability is accompanied by a guide dog or other service animal, the organization will ensure that the person is permitted to enter any facility with the animal and to keep the animal with him or her unless the animal is otherwise excluded by law. Where a service animal is excluded by law, the organization will ensure that other measures are available to enable the person with a disability to obtain, use and benefit from the organization’s goods and services.

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). Blind Persons Rights Act, a guide dog is 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.

Support Persons: 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, a friend or family member. He or she does not necessarily need to have special training or qualifications. (AODA January 2008)

b. If a person with a disability is accompanied by a support person, the organization will ensure that both persons are permitted to enter any facility, and that the person with a disability is not prevented from having access to the support person. The Organization may require a person with a disability to be accompanied by a support person when in an organization facility, but only if a support person is necessary to protect the health or safety of the person with a disability or the health or safety of others in the facility. Where fees for
goods and services are advertised or promoted, RVHS will include the amount payable in respect of the support person.

2) **Notice of Temporary Disruptions**

The organization will provide notice of temporary disruptions. The notice will include information about the reason for the disruption, its anticipated duration, and a description of any available, alternative facilities or services. This information will be posted in a conspicuous place in the premises and/or by other methods considered reasonable. If the disruption is expected, a reasonable amount of advanced notice of the disruption will be given.

3) **Feedback Process**

RVHS is committed to improving the quality of our services in a patient-focused environment and welcomes the views of patient, families and visitors on the care that we provide. It is the responsibility of RVHS 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. Patient Relations is available to assist programs in the resolution and/or response to complex issues. It is the goal of RVHS to acknowledge/receipt of compliments and complaints within 24-48 hours.

People with compliments, concerns or complaints may access the RVHS public website's Patient Relations page from the Home page, About Us and Contact Us page which link to: [http://www.rougevalley.ca/patient-relations](http://www.rougevalley.ca/patient-relations)

4) **Assistive Devices**

If a person with a disability requires assistive devices to access the goods or services of RVHS, they will be allowed to use such devices. RVHS provides assistive devices at some facilities. The devices listed below, and many more, are indicated in the Annual Accessibility Plan.

- Teletypewriter (TTY) / Amplified phones / Hands free phone sets / Lower height pay phones Larger size font on RVHS website
- Elevators equipped with Braille buttons and/or audio tones
- Wheelchair availability throughout the hospital / Wheelchair accessible tables in the cafeterias Improved signage and amenities in accessible washrooms
- Entrances are accessible with either automatic, revolving or sliding doors

5) **Accessibility Training**

a. Every person who deals with members of the public or who participates in developing the organization’s policies, practices and procedures governing the provision of goods and services to the public; including organization staff, volunteers, agents, students, contractors and others who provide service on behalf of RVHS will receive training regarding the provision of goods and services to persons with disabilities.

b. The training will include the following information:
   i. the purposes of the Accessibility for Ontarians with Disabilities Act and the requirements of the Customer Service regulation,
   ii. information on all RVHS policies and procedures in regards to Bill 118 (AODA),
iii. how to interact and communicate with persons with various types of disabilities,

iv. how to interact with persons with disabilities who use an assistive device, or require the assistance of a service animal or support person,

v. how to use equipment made available by RVHS to help people with disabilities to access goods and services,

vi. what to do if a person with a disability is having difficulty accessing RVHS goods and services. Training will be provided to each person according to staff needs and duties and as soon as is practicable after staff is assigned the applicable duties. Training will be provided on an ongoing basis in connection with changes to policies, practices and procedures governing the provision of goods or services to persons with disabilities. A record of the dates on which training is provided and the number of individuals to whom it is provided will be kept.

All third party representatives, on behalf of RVHS, who deal with members of the public, shall provide proof of accessibility awareness training that meets the requirements of Ontario Regulation 429/07.

6) Notice of Availability of Documents and Public Safety Emergency Information

RVHS will provide the public notice of the availability of the documents, required by the Accessibility Standards for Customer Service, (O. Reg 429/07) upon request. Notice of availability (see “Access Information” link) will be provided on the website and through other printed means.

http://www.rougevalley.ca/access-to-information

7) Format of Documents

If RVHS is required, by the Accessibility for Ontarians with Disabilities Act, 2005, to give a copy of a document to a person with a disability, RVHS will take into account the persons’ ability to access the information and will provide the document or information contained in the document in a format that meets those needs as agreed upon with the person.

8) Emergency Response Information for Staff, Physicians, Volunteers with Disabilities

Emergency response information and assistance is provided for staff, physicians, volunteers and other members of Rouge Valley Health System where a need has been identified by the individual (and the Hospital is aware of the need) or where the Hospital has been involved in planning for modified work or workplace accommodation. This is indicated in section 3.4 of the Business Continuity Plan. Emergency Response Information is also provided to the public (patients and visitors) and made available on the RVHS Internet to ensure their safety when at the hospital. See Emergency Preparedness notice on the RVHS internet homepage

http://www.rougevalley.ca/visitor-information

REFERENCE
The Accessibility For Ontarians With Disabilities Act, The Ontarians With Disabilities Directorate - Ontario Regulation 429/07

Mount Sinai Hospital, Policy Number I-d-65-73

Reviewed by: Unions, Operations Committee
Approved by: RVHS Senior Management Team
APPENDIX C - RVHS AODA Customer Service Brochure

Assistive Devices

To ensure effective communication with our patients, Rouge Valley Health provides access to several assistive devices.

TTY or Teletypewriter:
This device rings via a flashing light and allows for communications to be written and read over telephone lines. These portable devices are available for loan to inpatients who rent telephone service to each one of our hospitals.

To request the installation of a TTY device (or to return a device), please call 466-284-8131 extension 7405.

Volume Control Telephones:
Volume control telephones for the hard of hearing are available in all patient rooms.

Pocket Talker:
Amplifies sound. Used by people who are hard of hearing when communication is difficult due to environmental background noise or hearing aid is unavailable.

Pocket talkers are available for loan (free of charge and based on availability) to patients at our hospital sites who have hearing loss. Staff can secure a device from the Site Leader’s office.

Note: Patients will be required to take financial responsibility for the devices and sign a loan agreement form.

Acknowledgements

Thanks you to Lake Ridge Regional Hospital, Mount Sinai Hospital and Thunder Bay Regional Health Science Centre for sharing their information and expertise.
APPENDIX D – RVHS Accessibility Guidelines Poster

Accessibility Guidelines for Interacting with People with Disabilities

- Treat a person with a disability the same as a person without a disability (i.e. with dignity / respect)
- Just because a person has one disability doesn’t mean they have another
- Offer to assist the individual, but don’t insist. Remember that people with disabilities have their own individual needs and demonstrate various levels of independence
- If a person wants assistance, ask how to help, and what to do (e.g. speak clearly, take my arm, etc.)
- Try to convey the message that you are comfortable and not anxious when assisting. Relax and smile!
- Don’t raise your voice unless asked to
- Avoid making assumptions—ask!
- Don’t be afraid to ask someone to repeat something you didn’t understand
- Ask if there is anything you can do to make the person more comfortable
- While acknowledging the presence of an interpreter, attendant, or companion remember to address the person with a disability directly
- Don’t touch anything without asking first (service animals, wheelchairs, etc.). Please note that a person’s assistive device (e.g. wheelchair, cane, walker) is considered a part of their personal space

Look for specialized customer service training from the Organizational Learning Department soon

Rouge Valley Health System
Accessibility Plan 2012 - 2017
Appendix E - Accessibility Features at RVHS

* Wider hallways in our Birthing & Newborn Centre entrance hallway

* Hand rails throughout both hospital campuses, including within our new construction projects.
Rouge Valley Health System
Accessibility Plan 2012 - 2017

* Easy-to-use door handles

* Wheelchair accessible washrooms

* Braille signs
* Bilingual comment cards, signs and brochures

* Wall rails in patient washrooms

* Wheelchairs located at both of our RVC entrances projects.