

Category:	Corporate Administration	Policy Number:	SHN-ADMIN-AD-012
Subject:	Accessibility for People with Disabilities – Integrated Accessibility Standards Regulation	Date:	2024/02
Issued By:	Executive Vice President, People and Transformation	Revision Date (s):	2023/12
Approved By:	Senior Leadership Team	Page 1 of 11	
Rescinded Policies:	TSH: 1.10.002; RVHS: ADMIN-AD-160		

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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, learners, patients, families and contracted service staff of SHN.

POLICY STATEMENT:

Since 2021 SHN has been fully accessible 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 considers 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 device, 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 their disability. It includes a physical barrier, an architectural barrier, an informational or communication barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

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Disability: As defined in Section 2 of the AODA, 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 visual impairment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog, or other support 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 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.

Emotional Support Animal: An animal who has proper documentation provided by a Certified Health Professional to provide support to the patient entering our doors.

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.

Essential Care Partner: 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. They don't necessarily need to have special training or qualifications.

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PROCEDURE:

Section 1: Providing Goods and 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 Mohawk Medbuy Procurement policy/procedure.

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 Mohawk Medbuy/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 considers 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;
- Repeating, clarifying or restating information.

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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.

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.

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 Sharepoint 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:
 1. English, Tamil and Chinese
 2. Suggested use of Arial font style
 3. At least 24-font size
 4. High contrast colours such as black and white and easy to read

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Section 8: Inclusive Meetings

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

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 and that there are instructions available for these devices. These include, but are not limited to:

- Staxi Chairs - available at all three hospitals;
- Accessible washrooms - available at all of our locations;
- TTY and access to sign language interpreters are available for deaf, deafened, and hard of hearing patients;
- Uniphone 1000 TTY (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 Services (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 feedback. These situations are best resolved by those most closely associated with the patient and their family. The Patient Relations department is also available to assist in the resolution and/or response to complex issues.

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Individuals with compliments, concerns or feedback may access the hospital's public website's Patient Relations webpage at <https://www.shn.ca/patient-relations/>

Section 12: Emergency Procedures, Plans or Public Safety Information

SHN will make information about emergency procedures, plans or public available to the public in an accessible format upon request, as well as 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 13: Workplace Emergency Response

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

Section 14: Employment

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

Section 15: 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 as the Sharepoint site for staff to view.

Section 16: 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.

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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 issues, speech impairments, vision loss and those who require support persons and assistive devices).

Section 17: Use of Service Animals, Safety and Support Persons

17.1 Service Animals

We are committed to welcoming people with disabilities who are accompanied by service animals to all areas of the hospital unless excluded by law or public health concerns. Exclusions at SHN include: The Intensive Care Unit (ICU), Operating Room (OR), Coronary Care Unit (CCU), Acute Medical Unit (AMU), Acute Surgical Unit (ASU), minor procedure rooms, hospital laboratories, PACU, Cath lab, Oncology clinic/inpatient unit, 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 animal must have current vaccinations and the owner of the animal may be asked to provide a certificate of vaccination;
- The service animal must be free of any parasites, fleas/ticks, diarrhea and exposed skin lesions;
- The service animal must have recently been bathed;
- Patients with service animals cannot be placed in a room with another patient who has an allergy to the service animal;
- Persons who object to a service animal being in close proximity will be provided with alternative arrangements so as not to negatively impact access to services requested;
- Service animals may be evicted or excluded from SHN from its owner **only** for the following reasons:
 - If the animal'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 their service animal 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 animal. Appropriate arrangements must be made to address the patient's needs in the absence of the service animal;
- If a person with a disability is prevented from accessing their service animal, the hospital will, where appropriate and available, arrange an alternate service to allow that person to access hospital services.

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17.1.1 Responsibilities

- **Owner:**
 - a. People accompanied by service animals are responsible for the care and supervision of their service animals;
 - b. SHN will not accept responsibility for service animal's care while the service animal is on the premises. It is the owner's responsibility to plan for their animal's care.
- **Clinical Area Charge Person:**
 - a. Area Charge Person is responsible to ensure they inform staff of the role of the service animal, and how to interact with the patient and animal in clinical and nonclinical settings;
 - b. Patients, visitors and other staff and volunteers working on the unit should be notified of the service animal's presence and address any concerns (e.g. allergies);
 - c. Instructions as to how the service animal should be fed, cared for and handled should be discussed with the owner and staff members.
- **Staff (including physicians):**
 - a. Staff members are obligated to allow the service animal to accompany the patient at all times except where noted otherwise (see above);
 - b. Staff are to inform IPAC when a pet, Service Animal or Emotional Support Animal is visiting the hospital and reference SHN-IPAC-012 (Pet Policy) to ensure alignment with hospital standards
 - c. Actions such as talking, toileting, interacting, feeding, touching or making eye contact with a service animal should be avoided at all times as the animals are working and need to stay focused;
 - d. Staff members should remember to never separate the patient from the service animal. If uncomfortable providing care to the patient with a support animal, finding an alternative professional who will provide that care and documenting this in the patient's health record is advised.
- **Environmental Cleaning:**
 - a. The unit should notify Environmental Services (EVS) ahead of the visit so routine cleaning can be performed following the pet visit;
 - b. All surfaces must be wiped using the hospital grade disinfectants as identified by handler or manager on the unit, this will include elevators.

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- **Animal Waste:**
 - a. If animal waste occurs at any time during the visit, the animal owner will be responsible for immediate cleaning of the area;
 - b. The owner will be provided with the following materials: disposable gloves, plastic bag and a container of a germicidal cleaning agent;
 - c. Environmental services must be notified to ensure a thorough cleaning and disinfecting of the area.

17.2 Safety

If a staff member is reportedly bitten, scratched or injured by a service and/or emotional support animal, 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 Workplace 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 and/or support animal, the most responsible provider must be notified. Additionally, an incident report must be completed, and Workplace Health and Safety will also be notified and file a safety report if the incident involves hospital staff.

If a visitor is reportedly bitten, scratched or injured by a service and/or emotional support animal, they should be referred to the hospital's Emergency Department for assessment. The staff should complete an incident report and notify Risk Management.

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

17.2.1 Support Persons/Essential Care Partners (ECPs)

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 person in 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 person in 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.

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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 they request 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 the 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.

17.2.2 Responsibilities

- **Person in Charge:** The person taking care of the patient and delegating necessary information to the hospital staff.
- **Staff and Physicians:**
 - a. Should not remove a patient from their 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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- 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

REVIEWED BY:

SHN Accessibility Advisory Committee (2023/12)
 Policy Working Group (2023/12)
 Professional Advisory Committee (2023/12)
 Operations Committee (2024/02)

APPROVED BY:

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