



ST. JOSEPH'S HEALTH CARE LONDON ACCESSIBILITY PLAN

January 2024 – March 2025

Endorsed by the St. Joseph's Accessibility Advisory Committee – November 27, 2023
Approved by the Senior Leadership Team – December 5, 2023

INTRODUCTION

St. Joseph's Health Care London (St. Joseph's) is a major patient care, teaching and research center. It is owned and operated by the St. Joseph's Health Care Society, incorporated and governed by a volunteer board of directors from our community. With its founding organizations, St. Joseph's has a distinguished legacy of services to London and Southwestern Ontario and to the veterans of Canada.

St. Joseph's:

- Is one of Ontario's 17 academic hospitals
- Has approximately 4,486 employees, 315 professional staff and 472 volunteers
- Comprised of: St. Joseph's Hospital, Parkwood Institute, Southwest Centre for Forensic Mental Health Care, Mount Hope Centre for Long Term Care, and 12 team and service locations across the region
- Major roles in: day and short stay surgery, complex chronic disease management, specialized mental health care, rehabilitation, complex continuing care, palliative care, long term care, and veterans care
- Affiliated with Western University, St. Joseph's provides learning experiences for students from colleges and universities around the world

In fulfilling our mission and in alignment with our values of respect, excellence and compassion, St. Joseph's strives to provide accessible care in a manner that respects the dignity and independence of people with disabilities. St. Joseph's is also committed to ensuring that all patients have an equal opportunity to obtain, use, and benefit from our programs and services.

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

In compliance with the [Accessibility for Ontarians with Disabilities Act, 2005 \(AODA\)](#) including the [Customer Service Standards](#) and [Integrated Accessibility Standards \(IASR\), 2011](#), a multi-year accessibility plan was prepared and approved for 2019-2022 (inclusive). Public sector organizations are obligated under the Integrated Accessibility Standard to prepare annual status reports that indicate the progress of measures underway to address barriers. Past plans and status reports are available on St. Joseph's public website.

JANUARY 2019 – DECEMBER 2022 ACCESSIBILITY PLAN

The last multi-year Accessibility Plan expired in December 2022. Of the 23 action items, 87 per cent (20) action items have been completed. Of the remaining, nine per cent (2) were deemed as not required after further investigation, and four per cent (1) is being monitored to determine the necessity of the improvement. (Appendix A – Accessibility Work Plan: January 2019 – December 2022)

Accessibility Compliance Report

An Accessibility Compliance Report is required to be submitted to the Accessibility Directorate of Ontario on an annual basis (calendar year). Designated as a *large designated public sector organization*, St. Joseph's is required to file online reports with the Accessibility Directorate, which falls under the Ministry of Economic Development, Trade and Employment. The 2023 Accessibility Compliance Report was completed and submitted in April 2023.

ACCESSIBILITY ADVISORY COMMITTEE

In summer 2023, accountability for compliance with the *AODA and Integrated Accessibility Standards Regulation (IASR)* has transferred to the Occupational Health, Infection Safety and Employee Well-being portfolio. The Accessibility Advisory Committee last met in 2019, and was reformed in October 2023. The Accessibility Advisory Committee is accountable to the Senior Leadership Team via the Vice President, Human Resources. The committee is comprised of staff, volunteers and care partners with an interest in improving the experience for those living with disabilities.

(Appendix C – Accessibility Advisory Committee Terms of Reference)

ACCESSIBILITY PLAN (JANUARY 2024 – MARCH 2025)

The Accessibility Advisory Committee has agreed to a plan spanning January 2024 – March 2025. This will allow time for a review of the achievements from the previous workplans, and an assessment of goals that will have the most impact for people living with disabilities at St. Joseph's. The goal of the Accessibility Advisory Committee is to then create a multi-year workplan moving forward.

Annual updates to the plan will be provided to the Senior Leadership Team along with the required compliance attestation. Formal requests for funding will be prepared as required.

The workplan does not include any unit or program specific accessibility initiatives which may be in progress or completed by the unit or program.

(Appendix D – Accessibility Plan: January 2024 – March 2025)

Assessment of Barriers

The Accessibility Advisory Committee did not conduct a formal submission and assessment process for identifying barriers to be included in this plan. Given the lapse in time since the last plan, the committee agreed to a few priorities identified by the committee itself and an assessment of the status of compliance to the IASR requirements. A formal submission and assessment process for identifying barriers is identified as one of the goals for this current plan.

Our community continues to have the ability to submit identified barriers to St. Joseph's for consideration and/or implementation either by the organization or the specific program to which the barrier applies. Accreditation Canada has commended St. Joseph's at its recent survey (October 2023) for the inclusion of residents/patients, families and its community in initiatives.

Other initiatives continue to be implemented in addition to the Accessibility Advisory Committee process, which enhance access and service for people with accessibility challenges. Four examples include:

- St. Joseph's Equity, Diversity, Inclusion and Belonging (EDIB) strategy.
- The Food and Nutrition Services Cafeteria Project.
- Improvements to the Learning Edge modules to ensure they are AODA compliant (2025 target date).
- The capital master planning process that will incorporate accessibility requirements.

Review and Monitoring Process

The Accessibility Advisory Committee meets quarterly at minimum. A Working Group will be formed to address one or more barriers as required. At each meeting, the Working Group will report to the Accessibility Advisory Committee on progress in implementing the plan. The Director, Occupational Health, Infection Safety and Employee Well-being will present the annual status report to the Senior Leadership Team.

Communication of the Plan

Once approved, the Accessibility Plan and subsequent status reports will be posted to St. Joseph's Accessibility Website and staff will be notified through our staff and physician electronic newsletter, E-Connect. Hard copies will be made available through Communication and Public Affairs. Reports and plans are available in accessible formats upon request.



Appendix A: Multi-year Accessibility Plan

January 2019 – December 2022

Submitted to St. Joseph's Accessibility Advisory Committee – December 12, 2019

Submitted to St. Joseph's Senior Leadership Team – December 17, 2019

Introduction

In fulfilling our mission and in alignment with our values of respect, compassion and excellence, St. Joseph's Health Care London (St. Joseph's) strives to provide accessible care in a manner that respects the dignity and independence of people with disabilities. St. Joseph's is also committed to ensuring that all patients have an equal opportunity to obtain, use, and benefit from our programs and services.

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

In compliance with the Ontarians with Disabilities Act (ODA) and the Accessibility for Ontarians with Disabilities Act's (AODA) Customer Service Standards and Integrated Accessibility Standards, a multi-year accessibility plan was prepared and approved for 2019-2022 (inclusive). Public sector organizations are obligated under the Integrated Accessibility Standard to prepare annual status reports that indicate the progress of measures underway to address barriers. Past plans and status reports are available on St. Joseph's public website.

St. Joseph's Health Care London

St. Joseph's Health Care London is a major patient care, teaching and research centre. It is owned and operated by the St. Joseph's Health Care Society, incorporated and governed by a volunteer board of directors from our community. With its founding organizations, St. Joseph's has a distinguished legacy of services to London and Southwestern Ontario and to the veterans of Canada.

St. Joseph's:

- Is one of Ontario's 14 academic hospitals
- Has approximately 4,000 employees, 2,000 physicians with primary appointment city-wide and 1,100 volunteers
- Is comprised of: St. Joseph's Hospital, Parkwood Institute, Southwest Centre for Forensic Mental Health Care, Mount Hope Centre for Long Term Care, Family Medical and Dental Centre and 11 team and service locations across the region.
- Has facilities square footage totaling: 3,217,223
- Plays major roles in: day and short stay surgery; complex chronic disease management; specialized mental healthcare; rehabilitation; complex continuing care; palliative care; long term care; and veterans care
- Is affiliated with Western University, provides student learning experiences for more than 2,000 people from colleges and universities around the world each year

The Accessibility Advisory Committee

The Accessibility Advisory Committee is accountable to the Senior Leadership Team via the Vice President of Human Resources and Facilities. The committee draws staff members from across the sites with varied roles as well as community members and a resident of the Parkwood Institute. One member of the working group has disabilities while other members work directly with patients and staff members who have disabilities.

Planning Cycle

The term of each multi-year plan is determined by the Accessibility Advisory Committee. To date, this has been determined as every 3 years. Annual updates to the plan will be provided to the Senior Leadership Team. In addition, a Briefing note will be prepared for funding acquisition in order to carry out the recommended Work Plan. The projects will be forwarded to Facilities Management for cost estimating upon approval of this Multi-Year Accessibility Plan and funding approval will be requested via Resource Planning Council with ultimate approval at a future Senior Leadership Team meeting in 2020.

Accessibility Compliance Report

St. Joseph's Accessibility Compliance Report was completed and submitted to the Accessibility Directorate of Ontario. Designated as a *large designated public sector organization*, St. Joseph's is required to file online reports with the Accessibility Directorate, which falls under the Ministry of Economic Development, Trade and Employment. The latest report was required by December 31, 2019 and was completed and submitted on November 26, 2019. The report requires St. Joseph's to respond to questions regarding compliance with the Customer

Service and Integrated Accessibility Standards. Some questions that applied to St. Joseph's were responded to and our compliance remains in place.

Accessibility Plan 2019-2022

Assessment of Barriers

The Accessibility Advisory Committee met twice for several hours to determine the criteria for assessing the submissions and then to assess the barriers against the criteria. At each session, there was at least one community member present. Some of the barriers identified were intentionally designed as safety measures, such as placement and numbers of barrier-free parking spaces and the installation of door openers throughout our facilities.

In addition, through our communication email, the public has the ability to submit to St. Joseph's identified barriers. Through this vehicle, St. Joseph's has added additional door openers in areas where the public has encountered difficulty in access our services. Although not barriers by definition, they have definitely improved access for all.

Given that there are two fairly new mental health facilities, recent renovations to part of St. Joseph's Hospital, and the older sites were constructed prior to the launch of the Built Environment Standards; St. Joseph's Health Care is compliant with the building code and is now aiming to modify areas of the facilities to meet the specific needs of the patient population that uses the facilities.

Work Plan for 2016-2019 Status

A work plan was created based on the Committee's assessment of barriers, then submitted to the Senior Leadership Team for discussion and approval.

Work Plan

Location	Identified Barrier	Means to prevent or remove barrier	Status
Parkwood Institute Mental Health Care Building - Library	Manual door	Install an automatic door	Complete
Parkwood Institute Mental Health Care Building - Health Information Management	Manual door	Install an automatic door	Not Required
Parkwood Institute Mental Health Care Building - Health Service Department	Manual door to department	Install an automatic door	Complete
Parkwood Institute Mental Health Care Building - Ambulatory Care	Manual door	Install an automatic door	Complete
St. Joseph's Hospital – Foundation Office	Manual door to department	Install an automatic door	Complete
St. Joseph's Hospital Urgent Eye Clinic B1-102A	Washroom requires two support bars	Install a support bar	Complete

Location	Identified Barrier	Means to prevent or remove barrier	Status
St. Joseph's Hospital D1-112b	Washroom support bars not configured appropriately		Complete
St. Joseph's Hospital Cheapside entrance #4	When revolving doors are out of order, side doors are not wide enough for persons using large wheelchairs	<ul style="list-style-type: none"> • Provide signage indicating people use D zone automatic sliding doors (located just around the corner and opening to same sidewalk/drive way. • Contact Volunteer Services, which has a desk beside the entrance doors to guide people using wheelchairs to use D zone doors when revolving door is not working 	Complete
St. Joseph's Hospital Rheumatology Clinic D2 101b and D2 188	Manual doors on men's and women's washrooms	Install automatic doors	Complete
St. Joseph's Hospital - HULC	Manual door for washroom	<ul style="list-style-type: none"> • Install an automatic door • Redirect patients to the hallway or D3 	Incomplete. Decision with leadership for monitoring.
St. Joseph's Hospital D0	Location of two physician offices inaccessible	Move physician offices to accessible areas of the hospital	Complete
St. Joseph's Hospital	No adult change table	Install an adult change table	Complete

Location	Identified Barrier	Means to prevent or remove barrier	Status
Parkwood Institute Mental Health Care Building – Occupational Health and Safety Services	Manual door to department	Install an automatic door	Not required
Parkwood Institute Mental Health Care Building - Prescription Shop	Manual door to shop	Install an automatic door	Complete
Parkwood Institute Main Building - Outpatient Clinic	Chairs are too low and seat is slanted back making it difficult to stand up from sitting	Replace chairs	Complete
Parkwood Institute Main Building	Patients use the internet in addition to their alternative access communication systems (AAC); they use Skype, email or Facebook for messages about meeting times, arrange transportation, communicate with family and friends etc. Lack of access to WIFI makes it challenging for therapists to program AAC devices for patients..	Issues to be reviewed and strategies developed	Complete
Parkwood Institute Main Building - Day Hospital	Sign for Day Hospital is smaller than the previous one	Replace pedestrian sign with driving sign	Complete
Mount Hope walk way	Downward slope, railing broken	Railing to be repaired by summer 2016	Complete

Location	Identified Barrier	Means to prevent or remove barrier	Status
Parkwood Institute Mental Health Care Building	Uneven sidewalk and curbs in multiple locations	To be repaired by summer 2016	Complete
Mount Hope, 21 Grosvenor Street Entrance	Driveway at west end has a significant dip where it abuts the sidewalk, this poses a tripping hazard	To be repaired	Complete
Mount Hope – Marian Villa	Manual doors on washroom by fish tank	Install automatic doors – requires investigation	Complete
St. Marys	French doors to auditorium difficult to open (several sets, some facing the town square and others facing the north corridor)	Install automatic openers on doors facing town square	Door hold open devices installed. Space limitations did not allow for opener installation.
Mount Hope	Lack of microphones making it difficult for people to participate in Resident and Family Council meetings	Purchase microphones	Complete

Work Plan for 2019-2022

Work Plan

Short-Term (Required)		Long-Term (Improved Patient Experience)	
Location	Identified Barrier	Location	Identified Barrier
Parkwood Institute Main Building	Tactile Flooring required in exit stairwells.	Parkwood Institute Main Building	Patient washrooms on inpatient units are not barrier-free. Major construction and temporary room and unit closure required.
Parkwood Institute Main Building	Handrails required to be updated to new ODA standard.		
All sites	Washrooms that are single use to have signage indicating gender neutrality.		
Parkwood Institute Main Building	Additional 5 Barrier-free spaces required in staff lot 5 and Day Hospital entrance.		

Initiatives to Improve Accessibility in the Future

The Parkwood Institute Main Building was constructed in the mid-1980s without public washrooms on each floor and without fully accessible public washrooms. In patient rooms washroom are not fully accessible, they are small with narrow doors and awkwardly located plumbing making use of commodes challenging. Currently, some public washrooms located in the central part of the facility contain accessibility features while others are fully accessible. If renovations are contemplated to the common areas in the PI Main Building, it is recommended that nine barrier free unisex washrooms be considered; one on each floor of the Western Counties Wing, one each floor of A pod and one on each floor of B pod. Further, it is recommended that if renovations are undertaken in patient areas, washrooms in patient rooms be remodelled to be accessible. This remains the plan which may not be implemented for a number of years due to clinics requiring modifications need decant space to go to which has not been cleared as yet.

Marian Villa, an older building within Mount Hope Long Term Care, has inaccessible resident bathrooms that do not accommodate wheelchairs and mechanical lifts. To enhance resident independence by addressing accessibility requirements, it is recommended that if there are renovations or reconstruction, accessibility features be included. Although significant home-like improvements have taken place since the last report, the washrooms have not been able to be modified due to limited space, cost and resident impacts.

Initiatives to Improve Accessibility

St. Joseph's continually invests in, and focuses on, mitigating or eliminating barriers to care. The primary focus from 2016 to 2019 was the improvement of wayfinding and signage at Parkwood Institute Main building. This work continues and will so for the remainder of this Accessibility Plan. In addition, there were major investments at Mount Hope Centre for Long Term Care with respect to improving

infrastructure and environmental finishes and furnishings. More work continues in this endeavour as well, with many infrastructure and home-like improvements planned for 2020/2021.

Review and monitoring process

The Accessibility Advisory Committee meets four times a year. Subcommittees may form to address one or more barriers if required. At each meeting, subcommittees may report to the Accessibility Advisory Committee on their progress in implementing the plan. The chair of the Accessibility Advisory Committee or the vice president presents the plan or annual status report to senior leaders.

Communication of the plan

Once approved, the Accessibility Plan and subsequent status reports are posted to St. Joseph's Accessibility Website and staff is notified through the electronic newsletter E-Print. Hard copies are available in staff libraries at each site and from Communication and Public Affairs. Reports and plans are available in accessible formats upon request.

Appendix C: ACCESSIBILITY ADVISORY COMMITTEE

Terms of Reference

Purpose

The Accessibility Advisory Committee provides information and advice to the Senior Leadership Team (SLT) on identifying, proactively preventing and eliminating barriers to people with disabilities working or accessing programs, services, spaces and facilities at St. Joseph's Health Care London (St. Joseph's). The Accessibility Advisory Committee provides an opportunity for consultation, knowledge transfer, collaboration and engagement and supports St. Joseph's commitment to accessibility planning and to meet the hospital's obligations under the Ontarians with Disabilities Act, 2001 (ODA), the Accessibility for Ontarians with Disabilities Act, 2005 (AODA), and the Integrated Accessibility Standards Requirements, 2011 (IASR).

Roles and Responsibilities

The roles and responsibilities of the Accessibility Advisory Committee are to:

- Ensure that St. Joseph's complies with the requirements of the ODA, AODA, and IASR through the development of a documented and publicly published accessibility plan.
- Report on the measures St. Joseph's has taken to identify, remove and prevent barriers for people with disabilities.
- Describe the measures in place to ensure that St. Joseph's assesses its regulations, policies, programs, practices and services to determine their effect on accessibility for people with disabilities.
- Draft the policies, programs, practices and services that St. Joseph's will review in the coming year(s) to identify barriers to persons with disabilities.
- Describe the measures St. Joseph's intends to take in the coming year(s) to identify, remove and prevent barriers to persons with disabilities.
- Educate and promote awareness of accessibility to the organization.
- Advance the achievement of social, cultural, and economic well-being of persons with disabilities.

Accountability

The Accessibility Advisory Committee is accountable to the Senior Leadership Team (SLT).

Membership

The Accessibility Advisory Committee is comprised of staff with an interest in improving accessibility at St. Joseph's for staff, physicians, learners, volunteers, residents/patients and visitors.

Members may represent the following programs either on the Committee, working groups or in an ad hoc capacity:

- Care Partners
- Communications
- Equity, Diversity, Inclusion and Belonging (EDIB)
- Ethics
- Facilities Management
- Human Resources
- Information Technology Services (ITS)
- Occupational Health and Safety Services
- Organizational Development and Learning Services
- Privacy and Risk Management

Ex Officio

- Vice President – Human Resources

Term

- Committee members shall serve for a two-year period. Review of membership will occur annually and turnover of membership will be staggered dependent on renewal of members.

Chairs

- The Accessibility Advisory Committee will be chaired by the Director – Occupational Health, Infection Safety and Employee Wellbeing.

Administrative Support

- The Administrative Assistant – Occupational Health, Infection Safety and Employee Wellbeing portfolio will provide administrative support for the Accessibility Advisory Committee including recording minutes and distributing agenda packages.
- The Administrative Assistant will maintain the Accessibility Advisory Committee Teams site.

Meeting Frequency

- Meetings will be held on quarterly basis at minimum.
- Special meetings will be at the call of the Co-Chairs.
- Meetings will be held virtually.

Agenda Development

- The agenda is structured to support open communication and sharing of ideas, as well as the achievement of goals contained within the Accessibility Plan.
- A call for agenda items will be circulated in advance of meetings.
- Requests for agenda items will be submitted to the Administrative Support.

- Agenda packages will be posted to the Teams site one week prior to the meeting.
- Minutes from the meeting will be posted to the Teams site within one week of the meeting.
- All members of the Accessibility Advisory Committee are expected to have reviewed the agenda package and sought any clarification needed prior to the meeting in order to facilitate an efficient meeting.

Decision Making

- Decision making will support a system thinking approach, with problem solving viewing issues as parts of an overall system.
- Decisions will be made based on the Guiding Principles of the Accessibility Advisory Committee.
- When decisions are required, they will be made on a consensus basis which allows for an entire group of people to come to an agreement and move forward.
- The input and ideas of all participants are heard, gathered and synthesized to arrive at a final decision that can be supported by everyone in the group. Through consensus decision making, the Accessibility Advisory Committee will work to achieve better solutions, and encourage a stronger sense of trust among all members.
- If consensus cannot be reached or consensus is not appropriate under the circumstances, voting will be used. A simple majority, of those in attendance will decide the course of action.

Expectations of the Accessibility Advisory Committee Members

The Accessibility Advisory Committee and its members should act as advocates and role models for educating and promoting awareness of accessibility at St. Joseph's. Responsibilities of members include:

- Attending the regular meetings
- Be informed and prepared to discuss the agenda items as circulated prior to the meetings.
- Make thinking visible, surface assumptions, and engage in open conversation.
- Seek clarification into understanding other members' thinking and reasoning.
- Be a wellbeing advocate in their respective areas.
- Everyone will have an equal voice and respect others' opinions in order to achieve joint accountability and a climate of trust.

Working Groups

- The Accessibility Advisory Committee may from time-to-time determine the need to form a working group in order to accomplish its purpose and responsibilities.
- Recommendations from a working group will be brought back to the Accessibility Advisory Committee.

GUIDING PRINCIPLES OF THE ACCESSIBILITY ADVISORY COMMITTEE

1. To support the continual improvement of access to St. Joseph's facilities, policies, programs, practices and services for the staff, physicians, volunteers, learners, residents/patients and families, and members of our community.
2. To provide opportunity for the participation of persons with disabilities or those who represent persons with disabilities in the development and review of the St. Joseph's accessibility plan.
3. To ensure that the St. Joseph's policies are consistent with the principles of the ODA, AODA and ISAR.
4. To ensure the identification and remediation of physical, architectural, informational, attitudinal, and technological barriers including and policies and procedures.



Appendix D: ACCESSIBILITY ADVISORY COMMITTEE WORK PLAN

January 2024 – March 2025

Accessibility Initiative	Lead(s)	Target Date
Develop a format and process for accessible interviews beginning with Project SEARCH.	Director – Occupational Health, Infection Safety and Employee Wellbeing	Q4 2023/2024 (Project SEARCH) Q2 2024/2025 (Other)
Develop an inventory of community support sources related to neurodiversity for our staff, physicians and volunteers.	Working Group [Julie Hebert, Colleen Haskett]	Q2 2024/2025
Review Accessibility policy and Learning Edge modules to ensure alignment with the requirements of the AODA and IASR.	Educator – Occupational Health, Infection Safety and Employee Wellbeing	Q1 2024/2025
Develop a process for submission and completion of work orders pertaining to accessibility requests and the Accessibility Plan goals.	Facilities Management	Q2 2024/2025
Explore the opportunity for braille signage in publicly accessible corridors.	Facilities Management	Q1 2024/2025
Review the communication standard and identify additional opportunities for a multi-faceted approach to communication.	Working Group [Erin Macaluso, Penny Welch-West]	Q3 2024/2025
Review the transportation standard and identify additional opportunities regarding this standard.	Working Group [Nancy Fitch]	Q3 2024/2025
Review the customer service standard and identify additional opportunities regarding this standard.	Working Group [Jeanne Bank, Stacey-Lee Khosravi]	Q3 2024/2025

Develop a plan for engagement regarding accessibility priorities to include staff, physicians, volunteers, Care Partners and community.	Accessibility Advisory Committee	Q3 2024/2025
Review of Accessibility Standards Council of Canada accessibility recommendations during an emergency.	Director – Occupational Health, Infection Safety and Employee Wellbeing	As available
Ensure that notices of temporary disruptions, as referenced in the Accessibility for Persons with Disabilities Policy (GEN031) continue to be provided through the external website, and signage near the disruption. This will include the maintenance of accessible equipment (inspection/maintenance of doors and door openers, walkways, etc.) as referenced in the Preventive Maintenance Plan (Policy GEN040).	Director – Facilities Management and Engineering	Ongoing