



# ST. JOSEPH'S HEALTH CARE LONDON **ACCESSIBILITY PLAN** April 2025 – March 2030

Endorsed by the St. Joseph's Accessibility Advisory Committee – February 05, 2025  
Approved by the Directors' Council – March 21, 2025  
Approved by the Senior Leadership Team – April 01, 2025

## ST. JOSEPH'S HEALTH CARE LONDON

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:

- A teaching and research-based health care organization.
- 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 Center, and 12 team and service locations across the region.
- A major provider of 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 and provides learning experiences for students from colleges and universities around the world.
- A major contributor to research through the Lawson Research Institute.
- Supported by the St. Joseph's Health Care Foundation which grants funds to advance patient care, comfort and innovation through donor support for equipment, environments and research not funded by governments.

## ST. JOSEPH'S COMMITMENT TO ACCESSIBILITY

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 staff, physicians, volunteers, care partners, residents/patients and their families have equitable access to buildings, information and communications according to their individual needs.

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.

St. Joseph's commits to the identification, removal and prevention of accessibility barriers in compliance with the [Accessibility for Ontarians with Disabilities Act, 2005 \(AODA\)](#) including the [Customer Service Standards](#) and [Integrated Accessibility Standards \(IASR\), 2011](#).

Towards achieving this commitment, St. Joseph's has developed the 2025-2030 Accessibility Plan which outlines the initiatives to improve accessibility at all its sites in the areas of:

- Training
- Procurement
- Customer Service
- Employment
- Information and Communication
- Design of Public Space

St. Joseph's recognizes that Transportation is also a requirement under the IASR. St. Joseph's have reviewed the requirements and, as it does not provide transportation services, has not addressed this regulation in the Accessibility Plan.

## PLANNING PROCESS

St. Joseph's recognizes that all programs have accountability for planning and implementing activities, processes and environments that support accessible services, the Accessibility Advisory Committee is accountable for the creation of the Accessibility Plan.

In 2024/2025, the Accessibility Advisory Committee identified the need to assess compliance with the AODA and its standards, including identification of areas of opportunity to improve accessibility. Through the Accessibility Advisory Committee, several working groups were formed to conduct this assessment.

- Accessible Interviews
- Braille Signage
- Communication Standards
- Customer Service Standards
- Neurodivergent Resources
- Training and Policy
- Work Orders

The Accessibility Advisory Committee and its working groups gathered information about accessibility challenges in several ways:

- Information review
- Legislation review
- Policy review
- Consultation with other healthcare organizations
- Involvement of Care Partners and Volunteers on Committee and working groups
- Surveys

Each working group then conducted a current state assessment of the legislative requirements. From those assessments, the improvement opportunities were identified.

## ACCESSIBILITY INITIATIVES

### General Accessibility

St. Joseph's will actively seek feedback regarding the accessibility of programs and services from its staff, physicians, volunteers, and community.

#### *Initiatives*

1. Continue to engage and partner with disability communities to advance accessibility. (Accessibility Advisory Committee, Individual Programs)
2. From the Wellbeing Audit, design a tool and process to conduct equity impact assessments (process designed to ensure that a policy, project or scheme does not discriminate against any disadvantaged or vulnerable people) may help to identify, remove, and/or mitigate the impact on those who are disproportionately impacted by hospital decisions. (Director – Equity, Diversity, Inclusion and Belonging (EDIB))
3. Conduct a review of the external website and internal intranet to identify improvements to accessibility for:

- Blind and low vision
  - Communication impairments
  - Hearing impairments
  - Cognitive impairments
  - Physical impairments
- (Communications, Individual Programs)

4. Conduct a review of the internal intranet to identify programs/services no longer offered or new programs/services to support accessibility. (Individual Programs)

### Training and Policy

St. Joseph's will ensure that all staff, physicians and volunteers are provided training regarding the requirements of Ontario's accessibility laws and the Ontario Human Rights Code.

#### *Initiatives*

5. Continue to provide training to staff and volunteers about support persons, service animals, and legislative responsibilities under AODA as part of the onboarding process. (Organizational Development, Accessibility Advisory Committee)
6. Develop EDIB education based on leader feedback of the five educational modules designed to expand your knowledge of EDIB topics offered in Q4 2024/2025. (Director – EDIB)

### Customer Service

St. Joseph's will review and develop its policies, practices, and procedures to respect the dignity, independence, integration, and equal opportunity for persons of all abilities.

#### *Initiatives*

7. Ensure the Statement of Values for Patients, Residents and Families includes accessibility as a key concept (Manager – Care Partnership, Manager – Communication and Public Affairs)
8. Conduct a survey of persons with disabilities to better understand accessibility barriers with virtual care. (Virtual Care Team)
9. Revise the Accessibility Policy to include application to all modes of care, including virtual and face-to-face. (Director – Occupational Health, Infection Safety and Employee Wellbeing)
10. Engage the Care Partnership Office and Care Partners to identify barriers experienced by residents/patients and care partners. (Manager – Care Partnership)

### Employment

St. Joseph's will support the recruitment, onboarding and retention of staff, physicians and volunteers through accessible policies, practices, and workplaces.

### *Initiatives*

11. Revise the pre-placement health assessment to ensure accommodation is identified and planned for during the pre-placement period. (Director – Occupational Health, Infection Safety and Employee Wellbeing)
12. Ensure equity and inclusion are embedded into the Wellbeing Strategy. (Director – Occupational Health, Infection Safety and Employee Wellbeing, Director – EDIB)
13. As per the Internal Audit of Recruitment and Onboarding, implement a recruitment strategy to enhance job postings and foster student engagement and EDIB. (Director – Employee and Labour Relations, Director – EDIB)
14. As per the Internal Audit of Recruitment and Onboarding, provide training for leaders and HR recruitment staff on unconscious bias and inclusive recruitment and continue to review and work to improve recruitment practice. (Director – Employee and Labour Relations, Director – EDIB, Director – Professional Practice, Director – Strategic, Organizational, Leadership Development (SOLD))

### **Information and Communications**

St. Joseph's will communicate using a variety of methods and techniques to ensure that information is accessible for its employees, physicians, volunteers, residents/patients and community members.

### *Initiatives*

15. Implement Braille signage at all sites for publicly visible rooms, stairs and washrooms. (Director – Facilities Planning and Engineering)
16. Conduct planning for implementation of Braille signage for staff areas. (Director – Facilities Planning and Engineering)
17. Provide additional education for Volunteers on accessibility, communication accessibility modifications, facility naming conventions, and wayfinding. (Manager – Volunteer Services)
18. Reconvene the previous Wayfinding Working Group to discuss the implementation of standardized letterhead to be utilized when providing patients with appointment information.

### **Design of Public Spaces**

St. Joseph's will ensure accessibility requirements are considered for renovations and new construction.

### *Initiatives*

19. Ensure accessibility barriers are considered as part of the Master Planning process. (Director – Capital Planning and Redevelopment, Director – Facilities Planning and Engineering)
20. Continue to implement accessibility improvements. (Director – Facilities Planning and Engineering)
21. Continue to respond to temporary disruptions when accessible elements in public spaces are not in working order or not accessible by notifying the public and prioritizing remediation. (Director – Facilities Planning and Engineering)

## Neurodivergent Resources

### *Initiatives*

22. Develop a Neurodivergent Advisory Group to advise on initiatives related to neurodiversity. (Director – Occupational Health, Infection Safety and Employee Wellbeing)
23. Develop education for leaders to support staff who are neurodivergent. (Neurodivergent Working Group, Organizational Development)
24. Update the current training programs, such as the Breaking Barriers course in LearningEdge, to include a dedicated section on neurodiversity. (Neurodivergent Working Group, Organizational Development)
25. Review the current accommodation procedures for neurodiverse employees within OHSS. Ensure OHSS staff are knowledgeable about available accommodations across distinct roles and departments, and that they are equipped to support neurodiverse staff effectively. (Director – Occupational Health, Infection Safety and Employee Wellbeing)

## DEFINITIONS

**Accessible formats** may include, but are not limited to, large print, recorded audio and electronic formats, braille, and other formats usable by persons with disabilities.<sup>1</sup>

**Accessibility barriers** can include any of the following types of barriers:

- *Attitudinal barriers* include negative attitudes and assumptions about persons with disabilities.
- *Systemic barriers* include policies and procedures that create barriers to full inclusion.
- *Information, communication, and technology barriers* include communication formats that are not available in accessible formats (e.g., screen reader compatible, braille, plain language, etc.)
- *Built and physical barriers* include elements in the physical environment that create barriers for persons with disabilities (e.g., lack of a ramp or elevator to access different levels, door widths that prohibit access for users of mobility devices).

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<sup>1</sup> <https://www.aoda.ca/integrated/>