



Accessibility Plan

January 2013 – December 2015

Submitted to St. Joseph's Senior Leadership Team on January 8, 2013

Prepared and Submitted by St. Joseph's Accessibility Advisory Committee

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St. Joseph's Health Care London

Mission

We help all who come to us for care to maintain and improve their health. We work with people to minimize the effects of injury, disease and disability. We do this by pursuing excellence in care, research and education in a wide range of hospital, clinic, long term and community-based settings.

In the spirit of our founders, we care in the example of Jesus Christ and in keeping with our values. We attend to the wholeness of each person-body, mind and spirit. We are a life-affirming community, nurturing a living spirituality through all stages of life, health, suffering and death. We ensure ongoing ethical reflection.

We advocate for those who are vulnerable and without a voice. We actively pursue and build partnerships to create a better health care system.

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.

This plan summarizes:

- The actions taken to remove and prevent barriers from April 2011 to December 2012;
- The methods used to identify barriers for the current plan (January 2013-December 2015);
- The actions to be taken from January 2013 to December 2015 to remove and prevent barriers;
- The actions to be taken to comply with the Integrated Standards; and
- How the plan will be monitored, communicated internally, and shared with the public.

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.

St. Joseph's prepared this Accessibility Plan in compliance with the Ontarians with Disabilities Act (ODA) and the Accessibility for Ontarians with Disabilities Act (AODA), Integrated Accessibilities Standards.

1. Description of St. Joseph's Health Care London

St. Joseph's Health Care London is a major patient care, teaching and research centre. It is comprised of St. Joseph's Hospital, Parkwood Hospital, Mount Hope Centre for Long Term Care, Regional Mental Health Care London (RMHC London), Regional Mental Health Care St. Thomas (RMHC St. Thomas), and other clinics and outreach facilities. In 2012 approximately 4,220 staff members worked at St. Joseph's, and its total operating budget was approximately \$420 million. For facts about St. Joseph's, link to <http://www.sjhc.london.on.ca/your-st-josephs/about-us/facts-and-stats>.

2. The Accessibility Advisory Committee

In accordance with the Ontarians with Disabilities Act, senior leaders from St. Joseph's Health Care London (St. Joseph's) formally constituted a steering committee and working group in April 2003. In 2011 the steering committee and working group was replaced by the Accessibility Advisory Committee.

The Accessibility Advisory Committee is accountable to the Senior Leadership Team via the Vice President of Quality & Clinical Support Services. The committee draws staff members from across the sites with varied roles; as well a community member and a resident of Parkwood Hospital. Some members of the working group have disabilities and other members work directly with patients and staff members who have disabilities.

Members of the Accessibility Advisory Committee

Working Group Member	Department
Susan Greig (chair)	Professional Practice Leader, Clinical Nutrition and Food Service Liaison
Anna Marie Duffy	Professional Practice Leader, Therapeutic Recreation and Music Therapy
Julie Hughes	Professional Practice Leader, Speech Language Pathology and Audiology
Ben Reyes	Radiation Safety Officer
Lynn Stewart	Coordinator, HULC and Therapies
Phyllis Brady	Coordinator, Patient Relations / Risk Management
Terry Kaban	Coordinator, Ambulatory Surgery
Susan Vuylsteke	Occupational Therapist, Occupational Health and Safety
Sandy Morton	Professional Practice Leader, Social Work
Maureen Morrison	Corporate Facilitator, Organizational Development and Learning Services
Dianne Lesperance	Patient Representative from Parkwood Hospital
Michael Hermiston	Physical Therapist and Community Member

3. Planning Cycle

An annual status report will be prepared for senior leaders in January 2014 and January 2015. The next accessibility plan is scheduled to begin in January 2016.

4. Barrier Removal Initiatives

The following initiatives were implemented to remove or prevent barriers to people with disabilities for the period beginning April 2011 and ending December 2012.

Regional Mental Health Care, London

A new facility is currently under construction and scheduled to open in 2014. Accessibility was considered in the design of the new facility; with architectural and physical barriers previously identified to be addressed in new facility. In addition, the following barriers were addressed in the existing facility.

- Elevators were monitored to ensure a minimum of one elevator was functional at all times
- Lid dispensers were mounted on the side of vending machines to allow people in wheelchairs to access them

Regional Mental Health Care, St. Thomas

A new facility is currently under construction and scheduled to open June 2013. Accessibility was considered in the design of the new facility and architectural and physical barriers previously identified will be addressed with the opening of the new facility. The following barrier was also addressed in the existing facility.

- Ramp was installed at Tri-county entrance

St. Joseph's Hospital

- Bold colours were implemented in the Ivey Eye Institute to help people with visual impairments identify the entrance, and architectural and physical features
- Grab bars were reconfigured in the washroom in Nuclear Medicine
- Elevator #3 was upgraded with voice identification
- Accessible parking spaces were added to the west end of the Grosvenor parking garage near the elevators; the number of spaces now exceeds the requirement
- Wheelchair accessible table was provided for access to the synoptophore in Paediatric Ophthalmology/Orthoptics
- Sink and towel dispenser were lowered in women's washroom (E3-122)

Parkwood Hospital

- Automatic doors were installed on 4B
- Automatic door was installed in room A 430
- Enhanced signage, that is aligned with senior friendly guidelines, was installed in some areas

- A Pod elevators were retrofitted to allow those who cannot use the buttons to access floors independently. Education was provided to occupational therapists about the technology.
- Accessibility was considered in the design of the of the new parking garage
- New sidewalks around the Hobbins Building were constructed to allow two wheelchairs to pass each other
- Hallway by room A-265 was cleared of equipment and furniture to enhance access for those using wheelchairs

Organizational Initiatives

- The Canadian Hearing Society provided a presentation to staff about the interpretation services for people who are deaf and deaf-blind. The presentation was broadcast to several sites on April 28, 2011 and archived.
- The CNIB provided a presentation to staff about services for people who are have low vision or who are blind. The presentation was broadcast to several sites on May 12, 2011 and archived.

5. Customer Service Standard Compliance Activities Completed

- The Accessibility for Persons with Disabilities Policy was initially approved by senior leaders in 2009. It was updated and subsequently approved on June 19, 2012.
- Customer service training was initially offered to staff and affiliates using three methods: i) leader-led sessions, ii) in-depth sessions led by people with disabilities, iii) and online education. In 2012, the online education program was recreated and launched. The new program has enhanced interactivity and employs enhanced adult learning strategies.
- LearningEdge, an electronic learning management system, was implemented in December 2011. The system records when an online program has been completed and by whom. The system also reminds employees to complete online training, which has led to higher completion rates.
- Leaders initially attended one of three presentations regarding the development of policies, practices and procedures and other accountabilities related to the Customer Service Standards. In December 2012, an online education program designed specifically for leaders was launched along with a notification process that alerts leaders to the need to complete the education.

6. Integrated Standard Compliance Activities Completed

- St. Joseph's internet website meets WCAG 2.0 AA guidelines including providing video captions.
- Emergency response procedures and emergency management response information are posted on the accessibility page of St. Joseph's public website, together with a contact name if accessible formats or communications supports are required in addition to those on the website. The following is the link to the emergency response procedures.
<http://www.sjhc.london.on.ca/emergencyresponse>.
- The requirement for leaders and staff who self-identify as having a disability to develop individualized emergency plans has been communicated to leaders, and a checklist to guide the preparation of individualized emergency plans has been developed and posted on the accessibility page of St. Joseph's intranet.
- When transportation that is regularly provided to patients and staff as part of a program or service is not accessible, alternate transportation is arranged upon request.

7. Barrier Identification Methodologies

Ongoing Identification of Barriers

On an ongoing basis, staff members within their programs and services identify barriers and implement actions to enhance accessibility. Some of these actions are brought to the attention of the Accessibility Advisory Committee.

People throughout the organization also contact members of the committee with barriers; which are addressed on a case-by-case basis.

Patients, family members and visitors identify barriers through face-to-face or telephone conversations; or email or mail with staff members, leaders and the patient relations coordinator. The contact information is below and is available on St. Joseph's internet website.

Patient relations coordinator

St. Joseph's Health Care London
268 Grosvenor Street, P.O. Box 5777
London, Ontario, N6A 4V2

Phone: 519 646-6100 ext. 64727

Email: accessibility@sjhc.london.on.ca

Methods of Identifying Barriers for the Accessibility Plan

The Accessibility Advisory Committee used the following barrier-identification methodologies:

Data Sources	Description	Status
Patient, family and visitor feedback	Patient, visitor and family suggestions and compliments regarding barriers are captured in an electronic patient feedback system	Feedback is reviewed by the Accessibility Advisory Committee in the development of the plan
Leaders' surveys	Leaders responded to hard copy and online surveys conducted in Fall 2012	Responses were reviewed by the Accessibility Advisory Committee in the development of plan
Internet webpage for public input	Members of the public were invited to submit barriers to accessible care and service in Fall 2012	Responses were reviewed by the Accessibility Advisory Committee in the development of the plan
Electronic staff survey	Staff responded to an online survey in Fall 2012	Responses were reviewed by the Accessibility Advisory Committee in the development of the plan
Family and Patient Councils	Members of two councils identified potential barriers	Responses were reviewed by the Accessibility Advisory Committee in the development of the plan
Observations/brainstorming exercise of Accessibility Advisory Committee members	Members identified barriers and initiatives to overcome barriers	Input informed the plan
AODA Integrated Standards	A description of actions to comply with the Integrated Standards comprises a section of the plan	Persons with primary accountability and timelines have been identified
AODA Customer Service Standards	A description of actions required to continue to comply with the Customer Service Standards comprises a section of the plan	Persons with primary accountability have been identified
Review of initiatives from 2011/12	Each on-going initiative was reconsidered for the 2013/15 plan	One initiative is being carried over to the 2013/15 plan

8. Opportunities and Barriers to be addressed from January 2013 to December 2015

The following barriers are categorized according to the seven accessibility barriers: physical, architectural, informational, communication, attitudinal, technological, and policy/practice. Drawing from many sources the Accessibility Advisory Committee developed a list of barriers then assessed each barrier against a set of criteria. This list was reviewed by the relevant services (e.g. Facilities Planning) that would be accountable for addressing the barriers, for feasibility and prioritization.

In addition to the barriers captured in the plan, other barriers will be addressed as they are identified.

Work Plan

Category of Barrier and location	Identified Barrier	Means to prevent or remove barrier	Timing
Physical - RMHC London	Poor access to designated smoking area at the rear parking lot by the north loading docks	Repair ramp, repair door	2013
Physical – St. Joseph’s Hospital 3 rd Floor Clinics	Heavy doors lead to waiting rooms in areas that are accessed by patients with upper extremity difficulties and those using wheelchairs	Automate doors; there are other doors to this area that are barrier free but automating doors would improve accessibility	2013
Physical – St. Joseph’s Hospital	Snow may present a barrier to those using a wheelchair or walker to travel from the St. Joseph’s Hospital parking garage to St. Joseph’s Hospital	Security and Clintar monitor snow fall and icy conditions. Clintar removes snow when 5 cm covers the sidewalks.	Begin when snow or ice is present
Physical - St. Joseph’s Hospital Cafeteria	Placement and number of tables makes it difficult for those using wheelchairs and walkers to manoeuvre and to obtain a place at a table	Currently a temporary situation given construction; congestion being addressed by changing table and chair placement. In the longer term completed renovations will allow more space to be available.	underway
Physical – St. Joseph’s Hospital Ivey Eye Institute	Braille on signs has worn off on levels 0 and 1 elevators	Replace signs	underway
Technological - St. Joseph’s Hospital	Traffic lights at the corner of Richmond and Grosvenor are not long enough to allow people with disabilities to cross safely	Advocate for the timing of lights to be changed	2013/14
Physical – Parkwood Hospital	Doors leading to activity rooms, dining rooms, and recreation rooms adjacent to unit entrances are heavy and awkward	Install automatic door openers	2013/14
Physical – Parkwood Hospital	To better meet the needs of people with disabilities, washrooms in public areas need to be assessed	Conduct an assessment of public washrooms to identify which washrooms need to be accessible	December 2013
Physical - Mount Hope Organizational Development and Learning Services	Washroom doors close to class room are not automatic	Install automatic door opener	2013/14

Category of Barrier and location	Identified Barrier	Means to prevent or remove barrier	Timing
Physical - Mount Hope-smoking area facing Richmond Street	Parked vehicle does not allow residents to manoeuvre a wheelchair or walker around the opened door to travel to the gazebo. The door has an automated opener.	Eliminate parking spot in front of door temporarily with a pylon and permanently with hatch marks when the parking lot is resurfaced	December 2012 and Spring 2013
Technological-Corporate	Internal website difficult for some with low vision to read	Currently redeveloping the intranet to meet WCAG 2.0 Level AA	Summer 2013

9. Integrated Accessibility Standards Compliance Plan

Integrated Standard (abbreviated)	Status	Timing
General Standards		
<p>Policies Develop, implement and maintain policies governing how the organization achieves or will achieve accessibility through meeting its requirements in this regulation. The policy requires:</p> <ul style="list-style-type: none"> • a statement of organizational commitment “to meet the needs of persons with disabilities in a timely manner” • posting of a description of the policy in the internet site • public documents be available in accessible format upon request 	Policy was updated in December 2012.	Policy will be updated annually until the Integrated Standards are implemented
<p>Accessibility plans Outline the organization’s strategy to prevent and remove barriers and meet its requirements. The plan is:</p> <ul style="list-style-type: none"> • posted in the internet website • reviewed and updated by the accessibility advisory committee • reviewed annually and a status report on the progress of the measures is posted on the website and is available in accessible formats upon request 	Compliant. Most recent plan approved and posted January 2013.	Plan will be: <ul style="list-style-type: none"> • reviewed and updated by committee in March, June and October • reviewed and a status report provided to senior leaders in January 2014 and 2015

Integrated Standard (abbreviated)	Status	Timing
Procuring goods, services and facilities Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so. When not practicable an explanation is required.		Complete
Self-service kiosks Incorporate accessibility features in the design, procurement and acquisition of self-serve kiosks.	Two types of kiosks exist; ATM and parking kiosks and both are accessible.	Complete
Training Ensure training is provided on the requirements of the accessibility standards referred to in the Integrated Standards and in the Human Rights Code as it pertains to persons with disabilities to employees, volunteers, persons developing the organization's policies and others who provide goods or care on behalf of the organization.	Training program exists for leaders and staff. Enhancement of training program to start summer of 2013.	Complete by 01/14
Information and Communications Standards		

Integrated Standard (abbreviated)	Status	Timing
<p><u>Feedback</u> Have processes for receiving and responding to feedback and ensure that the processes are accessible to the persons with disabilities by providing or arranging the provision of accessible formats and communication supports upon request.</p> <p>Availability of communication supports and accessible formats is posted on the internet webpage.</p> <p><u>Accessible formats and communication supports</u> Upon request, provide or arrange the provision of accessible formats and communication supports for persons with disabilities:</p> <ul style="list-style-type: none"> • In a timely manner that takes into account the person's accessibility needs • At a cost that is no more than the regular cost charged to other persons <p>The person making the request shall be consulted in determining the suitability of accessible format or communication support and the public shall be notified about the availability of accessible formats and communication supports.</p>	<p>Some methods of feedback are accessible and support available currently. Further enhancements will be incorporated into new training program and communication messages.</p> <p>Some methods are accessible and support available currently. Incorporate enhancements into new training program and convey key communication messages; post notice of this on public website.</p>	<p>Complete by 01/14</p> <p>Complete by 01/15</p>
<p>Emergency procedure, plans or public safety information If an organization makes emergency procedures, plans or public safety information available to the public it is required to be in accessible formats or with communication supports.</p>	<p>Emergency procedures and safety information are posted on the public website. http://www.sjhc.london.on.ca/st-josephs-accessibility/emergency-response-procedures/emergency-management-and-response</p>	<p>Completed in 01/12</p>
<p>Accessible websites and content</p> <ul style="list-style-type: none"> • New internet and intranet websites and web content conforms to WCAG 2.0 Level AA, other than captions and audio descriptions. • All internet websites and web content conforms to WCAG 2.0 Level AA other than captions and audio descriptions. • Exceptions to this are listed in the standard 	<p>Internet site is compliant http://www.sjhc.london.on.ca/st-josephs-accessibility/website-accessibility</p>	<p>Internet compliance completed in 2012, Intranet will be compliant in June 2013.</p>

Integrated Standard (abbreviated)	Status	Timing
Employment Standards		
<p><u>Recruitment</u> Notify employees and members of the public of the availability of accommodation for applicants with disabilities in our recruitment processes.</p> <p><u>Recruitment, assessment or selection process</u> Notify applicants when they are selected to participate in assessments or selection processes that accommodations are available upon request in relation to the processes or materials being used.</p> <p>If there is a request, the applicant will be consulted and provided with or arranged for the provision of suitable accommodation.</p> <p><u>Notice to successful applicants</u> Applicants are notified of policies accommodating employees with disabilities</p> <p><u>Informing employees of supports</u></p> <ul style="list-style-type: none"> • Inform employees of policies used to support employees with disabilities, including provision of job accommodations that take into account accessibility needs due to disabilities • Provide information required under this section to new employees as soon as practicable after they begin their employment • Provide updates to employees when there is a change to existing policies on the provision of job accommodations <p><u>Accessible formats and communication supports for employees</u> Upon request by an employee, provide or arrange for the provision of accessible formats and for communication supports for:</p> <ul style="list-style-type: none"> • Information that is needed to perform the employee's job • Information that is generally available to employees in the workplace <p>The employer consults with the employee making the request to determine the accessible format or communication support required.</p>	<p>Message on job posting site https://www.sjhc.london.on.ca/SSL/ats/jobfairs.php</p> <p>Under review</p> <p>Under review</p> <p>Under review</p> <p>Under review</p>	<p>Completed in 2012</p> <p>Complete by 01/14</p> <p>Complete by 01/14</p> <p>Complete by 01/14</p> <p>Complete by 01/14</p>

Integrated Standard (abbreviated)	Status	Timing
<p><u>Workplace emergency response information</u> Provide individualized workplace emergency response information to employees with disabilities, if the disability is such that the information is necessary and the employer is aware of the need for accommodation due to the employee's disability.</p> <p>Individualized emergency response information is shared with the person(s) designated by the employer to provide assistance to the employee, with the consent of the employee who requires the assistance.</p> <p>Employers shall provide this information as soon as practicable after the employer becomes aware to the need for an employee's accommodation.</p>	<p>Completed http://intra.sjhc.london.on.ca/refer/accessibility/info/index.php</p>	<p>Completed in 2012</p>
<p><u>Documented individual accommodation plans</u> Develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities.</p> <p>The plans include elements identified in the Standards.</p>	<p>Under review.</p>	<p>Complete by 01/14</p>
<p><u>Return to work process</u> Develop and document a return to work process for employees who have been absent from work due to a disability and require disability related accommodations to return to work.</p> <p>The return to work process outlines the steps required to facilitate the return to work and uses documented individual accommodation plans as part to the process.</p>	<p>Under review.</p>	<p>Complete by 01/14</p>
<p><u>Performance management</u> Performance management shall take into account the accessibility needs of employees with disabilities, as well as accommodation plans.</p>	<p>Under review</p>	<p>Complete by 01/14</p>
<p><u>Career development and advancement</u> Employers that provide career development and advancement to its employees</p>		

Integrated Standard (abbreviated)	Status	Timing
shall take into account the accessibility needs of its employees with disabilities as well as individual accommodation plans.	Under review	Complete by 01/14
<u>Redeployment</u> Redeployment shall take into account the accessibility needs of employees with disabilities as well as accommodation plans.	Under review	Complete by 01/14
Transportation Standards		
Organizations that are not primarily in the business of transportation, but that provide transportation services shall provide accessible vehicles or equivalent services upon request.	Completed, alternative accessible transportation is provided to patients and staff upon request	Completed 07/12

10. Review and monitoring process

The Accessibility Advisory Committee meets about six times a year; three of these times to assess the progress of the workplan included in the Accessibility Plan. Subcommittees may form to address one or more barriers. At each meeting, subcommittees 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 reports to senior leaders.

11. Communication of the plan

The Accessibility Plan is posted in English and in French to St. Joseph's Accessibility Website. Hard copies are available in staff libraries at each site and from Communications and Public Affairs. Publication of the plan is announced by the following means:

- In the monthly staff newsletter, *Imprint*
- In the electronic staff newsletter, *E-Print*

Upon request, the plan is available on computer disk, in Braille; or large font from the internet website.