


Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 1 of 6</i>	


STATEMENT

South Bruce Grey Health Centre (SBGHC) is committed to ensuring equal access and participation for people with disabilities and to treating people with disabilities in a way that allows them to maintain their dignity and independence. The Hospital believes in the Ontario Government's goal of achieving accessibility by 2025 and in keeping with this, will meet the needs of people with disabilities in an integrated and timely manner, where practical, by:

- complying Ontario's Human Rights Code and specifically its' disability-related obligations
- meeting requirements under the Accessibility for Ontarians with Disabilities Act (AODA) and Ontario's accessibility laws
- establishing accessibility policies, procedures and practices
- preventing barriers so all can access SBGHC's facilities and services

PROCEDURE

1. SBGHC will remit to the Accessibility Directorate of Ontario *Accessibility Compliance Reports* as required, and, ensure its executives, board members, employees, physicians, volunteers, contractors and other affiliates receive appropriate training encompassing:
 - Requirements of the Integrated Accessibility Standards Regulation (IASR)
 - Disability-related obligations under Ontario's Human Rights Code
 - SBGHC's Accessibility for Persons with Disabilities Policy and accompanying procedures and practices, including any updates to these when made
 - Principles of customer service including:
 - a. Providing services in a manner that respects the dignity and independence of persons with disabilities
 - b. Communicating with a person with a disability in a manner that takes into account his/her disability
 - c. Interacting with a person with a disability who uses an alternative device or requires the assistance of a guide dog, service animal or a support person
 - d. Using equipment or devices that may help with the provision of Hospital services
 - e. Assisting a person with a disability who is having difficulty accessing South Bruce Grey Health Centre's facilities or services
 - Process for providing feedback to the Hospital with respect to its' facilities and provision of services to people with disabilities including how the Hospital will use and respond to feedback and complaints received
2. Communications and Patient Relations in consultation with SBGHC's Accessibility Working Group will:
 - a. Develop an Annual Accessibility Plan that describes the measures that have been taken and the upcoming plans that are to be put in place that will identify and remove any barriers to persons with disabilities
 - b. Consult with people with disabilities and reference by-laws and best practices when developing SBGHC's Annual Accessibility Plan
 - c. Communicate and make the Annual Accessibility Plan available to the public

Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 2 of 6</i>	

- d. Make sound suggestions and recommendations to SBGHC in the achievement of the requirements and objectives under AODA
 - e. Evaluate and advise on the processes for SBGHC to receive and act upon feedback from patients, visitors, physicians, employees and other affiliates
3. Individual managers will be responsible to ensure the services of their department are provided in a manner that is accessible for persons with disabilities.
 4. The Quality Committee of the Board receives and reviews the Annual Accessibility Plan Report of the SBGHC. The Board of Directors will receive the Accessibility Plan on an annual basis and provide a Board motion to endorse the plan.

PROCURING OR ACQUIRING GOODS, SERVICES OR FACILITIES

SBGHC will take into consideration accessibility criteria such as structural and technical design features when purchasing, acquiring or using goods, services or facilities, unless it is impracticable to do so. Some examples include, but are not limited to: on site self-service kiosk stations; off-site meeting and social venues; etc.

SUPPORTS TO PEOPLE WITH DISABILITIES

SBGHC will support people with disabilities who require the assistance of:

Service Animals

When a person with a disability is accompanied by a service animal, SBGHC shall ensure that the person is permitted to enter the premises with the animal and keep the animal with him/her unless that animal is otherwise excluded by law from the premises. If the service animal is excluded by law from the premises, SBGHC will provide other measures to enable the person with the disability to obtain, use or benefit from the Hospital's services.


A person with a disability accompanied by a guide dog/service animal is responsible for maintaining care and control of the animal at all times. SBGHC reserves the right to request the person with a disability to provide a letter of confirmation from a designated Regulated Health Professional confirming that the service animal is required for reasons relating to his/her disability.

Support Persons

SBGHC welcomes support persons who accompany a person with a disability, and, will ensure that the person with a disability has access to his/her support person at all times, unless otherwise directed by the person with the disability or otherwise medically necessary as indicated by SBGHC personnel

In certain cases, the Hospital may require a person with a disability to be accompanied by a support person for health or safety reasons. Before making a decision, the hospital will:

- consult with the person with a disability to understand his/her needs
- consider health or safety reasons based on available evidence
- determine if there is no other reasonable way to protect the health or safety of the person or others on the premises

Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 3 of 6</i>	

Assistive Devices

If a person with a disability requires assistive devices to access the goods or services of South Bruce Grey Health Centre, they will be allowed to use such devices. In the event that the assistive device must be excluded, the hospital will provide other measures to enable the person with the disability to obtain, use or benefit from the goods or services.

INFORMATION AND COMMUNICATION:

SBGHC will create, provide and receive information and communications in ways that are accessible to people with disabilities. When communicating with a person with a disability, executives, employees, physicians, volunteers and third party contractors shall do so in a manner that takes into account the person's disability.

Feedback Process

The Communication and Patient Relations Department welcomes feedback from employees, volunteers, physicians, patients, visitors and other affiliates in regards to SBGHC's accessibility policies, procedures and practices. A survey and feedback form is available electronically on the website www.SBGHC.on.ca. Feedback can also be provided via telephone, via email and in person. Upon request to the Communications and Patient Relations Department, arrangements will be made for feedback to be provided using accessible formats and communication supports.

Accessible Formats and Communication Supports

SBGHC will provide, in a timely manner, information that is public in accessible formats and communication supports upon request from a person with a disability. SBGHC will not charge more than what is charged to everyone for the same information, and, will consult with the person to ensure the accessible format or communication support is appropriate.

If the information/communications cannot be provided in an accessible format, SBGHC will advise the person with a disability accordingly and will provide a summary of the unconvertible information/communication.

Accessible Websites and Web Content


Internet websites and web content controlled directly by SBGHC or through a contractual relationship that allows for modification of the product shall conform to the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0, at Level A and AA in accordance with the schedule set out in the IASR.

Emergency Procedures, Plans and Information

Upon request, SBGHC will provide public emergency procedures, plans and public safety information in an accessible format or with a communication support.

Disruption of Services

When a disruption of a particular facility or service occurs that is used to allow a person with a disability to access goods or services, SBGHC will give notice of the disruption by posting the reason for the disruption, the anticipated duration of the disruption and describe alternative facilities or services that may be available. This information will be posted in a conspicuous place on the premises or by other methods considered reasonable.

Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 4 of 6</i>	

If the disruption is expected, a reasonable amount of advanced notice of the disruption will be given. If the disruption is unexpected, notice will be provided as soon as possible.

EMPLOYMENT

Recruitment

To ensure equal opportunity for all applicants, SBGHC will post information about the availability of accommodations for people with disabilities during the recruitment process, and, upon request will provide recruitment related accommodations. Job applicants who are individually selected for an interview and/or testing shall be notified that accommodations for material to be used in the process are available upon request. The Hospital shall consult with any applicant who requests an accommodation in a manner that takes into account the applicant's disability. Successful applicants will be notified of the Hospital's accessibility policies and practices as part of their offer of employment.

Accessible Formats and Communication Supports for Employees

The Hospital will inform employees of the policies used to support employees with disabilities, including policies on the provision of job accommodation that take into account an employee's accessibility needs due to disability. The Hospital will provide this information to new employees as soon as is practical.

Upon receipt of an employee's request, SBGHC shall provide or arrange for the provision of accessible formats and communication supports for information that is needed in order for an employee to perform his/her job and/or information that is generally available to employees in the workplace.

The Hospital will consult with the employee making the request to determine the suitability of accessible formats or communication supports.

Documented Individual Accommodation Plans

Individualized accommodation plans shall be developed, documented and maintained for employees with disabilities. These plans shall include relevant information regarding accessible formats, communication supports and individualized workplace emergency response plans, as applicable.


Workplace Emergency Response Information

SBGHC will develop an individualized workplace emergency response plan for an employee when notified by the employee that one is needed based on a disability, or, if SBGHC is aware of the need for accommodation.

Upon consent from the disabled employee, the workplace emergency response plan may be shared with a person designated by the department manager to provide assistance to the employee.

Individualized workplace emergency response plans are to be reviewed:

- a. when the disabled employee transfers to another work location or Hospital site, and,
- b. upon the review of SBGHC's and/or departmental emergency response practices and policies

Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 5 of 6</i>	

Return to Work Processes

SBGHC shall have in place and maintain a documented return to work process for employees returning from disability leave of absences that outlines the Hospital's commitment to providing disability-related accommodation either on a temporary, on-going or permanent basis and which describes the steps the Hospital will take to facilitate return to work.

Performance Management - Career Development - Redeployment

The Hospital shall take into account the accessibility needs of its employees with disabilities as well as any individual accommodation plans when, coaching, assessing performance, planning career development or considering redeploying an employee with a disability.

DESIGN OF PUBLIC SPACES

The Hospital will ensure its facilities are accessible to people with a disability and will identify and remove any barriers to, from and within its buildings and outdoor spaces.

DEFINITIONS

Accessible Formats:

Formats that are an alternative to standard print and are accessible to people with disabilities. Accessible formats may include: large print, Braille, recorded audio and electronic formats such as DVDs, CDs.

Assistive Devices:

A wide variety of auxiliary aids such as communication aids, cognition aids, personal mobility aids, medical aids that assist a person with a disability to hear, see, communicate move, breath, remember or read. Some examples include: canes, crutches, wheelchairs, walkers, hearing aids, oxygen tank, communication boards, smart phones, etc.

Barrier: Means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.


Communication Supports:

Supports that individuals with disabilities may need to access information. Some examples include: plain language formats, sign language, reading out loud, captioning, written notes to communicate.

Disability:

As defined, per Section 2 of the Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11 and the Human Rights Code, R.S.O. 1990, c. H.19:

- a. Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or

Title:	ACCESSIBILITY FOR PERSONS WITH DISABILITIES			 SOUTH BRUCE GREY HEALTH CENTRE <small>CHESLEY DURHAM KINCARDINE WALKERTON</small>
Category:	<i>Communications</i>	Issue Date:	<i>October 13, 2017</i>	
Policy #:	<i>COMM-P01</i>	Revision Date:	<i>September 28, 2021</i>	
Version:	<i>2</i>	Last Reviewed:	<i>September 28, 2021</i>	
Owner:	<i>Manager Communications, Engagement and Patient Experience</i>	Pages:	<i>Page 6 of 6</i>	

visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

- b. A condition of mental impairment or a developmental disability
- c. A learning disability or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d. A mental disorder, or
- e. An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997

Kiosk:

An interactive electronic terminal, including a point-of-sale device, intended for public use that allows users to access one or more services or products or both.

Service Animals:

An animal used by a person with a disability for reasons relating to his/her disability. Service dogs/animals offer independence and security to many people with various disabilities, and, are individually trained to do work or perform tasks for the benefit of a person with a disability.

Support Person:

Means someone who accompanies a person with a disability in order to help with communication, mobility, personal care, medical needs or with access to goods or services. A support person does not necessarily need to have special training or qualifications and can be a paid professional, volunteer, family member or friend.

Unconvertible:

Information or communications are unconvertible if it is not technically feasible to convert the information or communications or the technology to convert the information or communications is not readily available

REFERENCES

- Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11
- Integrated Accessibility Standards, O. Reg. 191/11
- A Guide to The Integrated Accessibility Standards Regulation, April 2014
- Human Rights Code, R.S.O. 1990, c. H.19
- Grey Bruce Health Services Administration Policy IV-175

VERSION HISTORY

Version	Review Date	Changes Made By	Brief Summary of Revisions Made
1.0	October 13, 2017	Senior Leadership Team	
2.0	September 28, 2021	Manager, Communications, Engagement and Patient Experience	Formatting

*** NOTE: This is a controlled document. Documents appearing in print form are not controlled and must be checked against the server version prior to use. ***