

ACCESSIBILITY PLAN

**under the Accessibility for Ontarians with
Disabilities Act, 2005**

2016 – 2018



**Hôpital général de Nipissing Ouest
West Nipissing General Hospital**

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ONTARIO'S VISION for PERSONS with DISABILITIES

Introduction

Each year, the Government of Ontario sets a course to prevent, identify and remove barriers for persons with disabilities. Every ministry participates through its annual accessibility plans, as required under the Ontarians with Disabilities Act, 2001 (ODA).

The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is Ontario's roadmap to become barrier-free by 2025. It includes accessibility standards in:

- customer service
- information and communications
- employment
- transportation, and
- the built environment.

This accessibility plans will help to inform planning requirements under the new Integrated Accessibility Standards Regulation (IASR) enacted July 1, 2011 under the AODA. The IASR requires the Government of Ontario to develop a multi-year plan to prevent and remove barriers for persons with disabilities.

The annual accessibility plan outlines the specific steps the government is taking to improve opportunities for persons with disabilities.

Building on last year's plan, our accessibility plan will continue moving the Ministry of Health and Long-Term Care toward the government's goal of accessibility for all Ontarians.

To view other ministries' Accessibility Plans, visit Ontario.ca.

Reference : <http://health.gov.on.ca/en/common/ministry/publications/plans/aplan12/>

EXECUTIVE SUMMARY

The Ontario with Disabilities Act, 2005 (ODA) was passed to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers. To this end, the ODA requires each hospital to prepare an accessibility plan, to consult with persons with disabilities in the preparation of this plan and to make the plan public.

Disability is:

- 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 coordination, blindness or 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,
- 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, 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 ⁽¹⁾.

A “barrier” is 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 communication barrier, an attitudinal barrier, a technological barrier, or a policy or practice. ⁽²⁾

This document is the current Accessibility Plan developed by the West Nipissing General Hospital (WNGH) accessibility team. It highlights past year achievements and outlines commitments for –the next three (3) years to continue to identify, remove and prevent barriers to people with disabilities, including staff, clients, students, volunteers, auxiliary members and other members of the community.

In working together, the WNGH’s goal is to identify, remove and prevent barriers to accessibility.

Footnote:

- (1) *A Guide to Annual Accessibility Planning, under the Ontarians with Disabilities Act, 2001* - <http://www.mcsc.gov.on.ca/documents/en/mcsc/accessibility/OntarioAccessibilityLaws2001/AGUIDE%20ANNUALACCESSIBILITYPLANNINGJan07E.pdf>, (Pg 12)
- (2) *Idem* (pg. 12)

AIM

To promote knowledge of the ODA and to maintain awareness and compliance. This report will highlight past successes and identify new indicators that the Hospital will focus on during the coming years to identify, remove and prevent barriers to people with disabilities who live in, work in, or use the West Nipissing General Hospital's facility, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

OBJECTIVES

Our objective is to:

- Identify, remove and prevents barriers for people with disabilities.
- Review the policies, programs, practices, and services that the West Nipissing General Hospital will address in the coming years to identify barriers for people with disabilities.
- Describe the measures West Nipissing General Hospital will take in the coming years to identify, remove and prevent barriers for people with disabilities.
- Describe how the West Nipissing General Hospital will make this accessibility plan available to the public.

TERMS OF REFERENCE

Purpose:

The Accessibility Team will assist the hospital with the identification and removals of barriers for people with disabilities. This process will be integrated in the existing corporate, strategic and planning exercises.

The Accessibility Team will also oversee the development, review, implementation and evaluation of the organizations' Accessibility Plan.

Accessibility Team's Role:

The will shall:

1. Have an understanding of the organizations' facilities, legislation, policies, programs, practices and services.
2. Have an understanding of the barriers to access issues for people with disabilities.
3. Review recent initiatives and successes in identifying, removing and preventing barriers.
4. Identify (list or categorize) barriers that may be addressed in the coming years.
5. Set priorities and develop strategies to address barrier removal and prevention.
6. Develop the plan, publish and communicate the plan.
7. Provide yearly reviews and update the accessibility plan.

Membership:

The Accessibility Team will consist of the following members:

- Chief Nursing Officer
- Human Resources Manager
- Health Records/Decision Support Manager
- Nursing Manager
- Community Representative
- Plant, Maintenance and Environmental Services Manager
- Occupational Health Nurse
- Mental Health Services Representative

Ad Hoc:

- Information Technology representative
- Diagnostic Imaging and Therapeutics representative
- Rehabilitation Representative
- Health & Safety Representative

Stakeholders may be asked to attend meetings as needed to provide information or expert advice.

Each member shall respect the confidentiality of matters brought before the team.

The terms of membership shall be a minimum of 2 years.

Meetings:

The Accessibility Team will meet annually and as required.

Administrative Support:

Administrative support will be provided for the preparation and dissemination of minutes and the coordination of the meetings.

Accountability:

The Accessibility Team is accountable to the Senior Management Team of the West Nipissing General Hospital.

The Accessibility plan will be shared with the Board of Directors.

COMMITMENT TO ACCESSIBILITY PLANNING

The Accessibility Team is committed to:

1. The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community;
2. The participation of people with disabilities in the development and review of its accessibility plans;
3. Ensuring hospital policies are consistent with the principles of accessibility; and
4. Maintaining the viability of the WNGH Accessibility Team.

Accessibility Team Membership:

Members	Department	Contact Information
Danny Putman	Plant Maintenance and Environmental Services Manager	753-3110 ext. 267
Jo-Ann Labelle	Chief Nursing Officer	753-3110 ext. 226
Louise Venne	Occupational Health Nurse / Infection Prevention & Control	753-3110 ext. 253
Carole Galarneau	Human Resources Manager	753-3110 ext. 217
Sylvie Claro	Health Records and Decision Support Manager	753-3110 ext. 270
Lynn Perreault	Alliance Centre, Mental Health Counselor	753-2271 ext. 732
Sandra Lacoursiere	Nursing Manager	753-3110 ext. 223
<i>Vacant</i>	Community Member	-

PHILOSOPHY

The West Nipissing General Hospital, as a community resource, provides equitable and personal treatment without discrimination. As language is a factor in the quality of care, WNGH will assure services to the patients in both official languages, French or English.

The West Nipissing General Hospital recognizes its complementary role with other health care and social service agencies, and therefore will assume its responsibility in the development and provision of health promotion and illness prevention programs.

CORE VALUES

The West Nipissing General Hospital's core values are:

- Respect and Dignity
- Patients First
- Communication
- Compassion
- Team Work
- Safe Environment
- Accountability

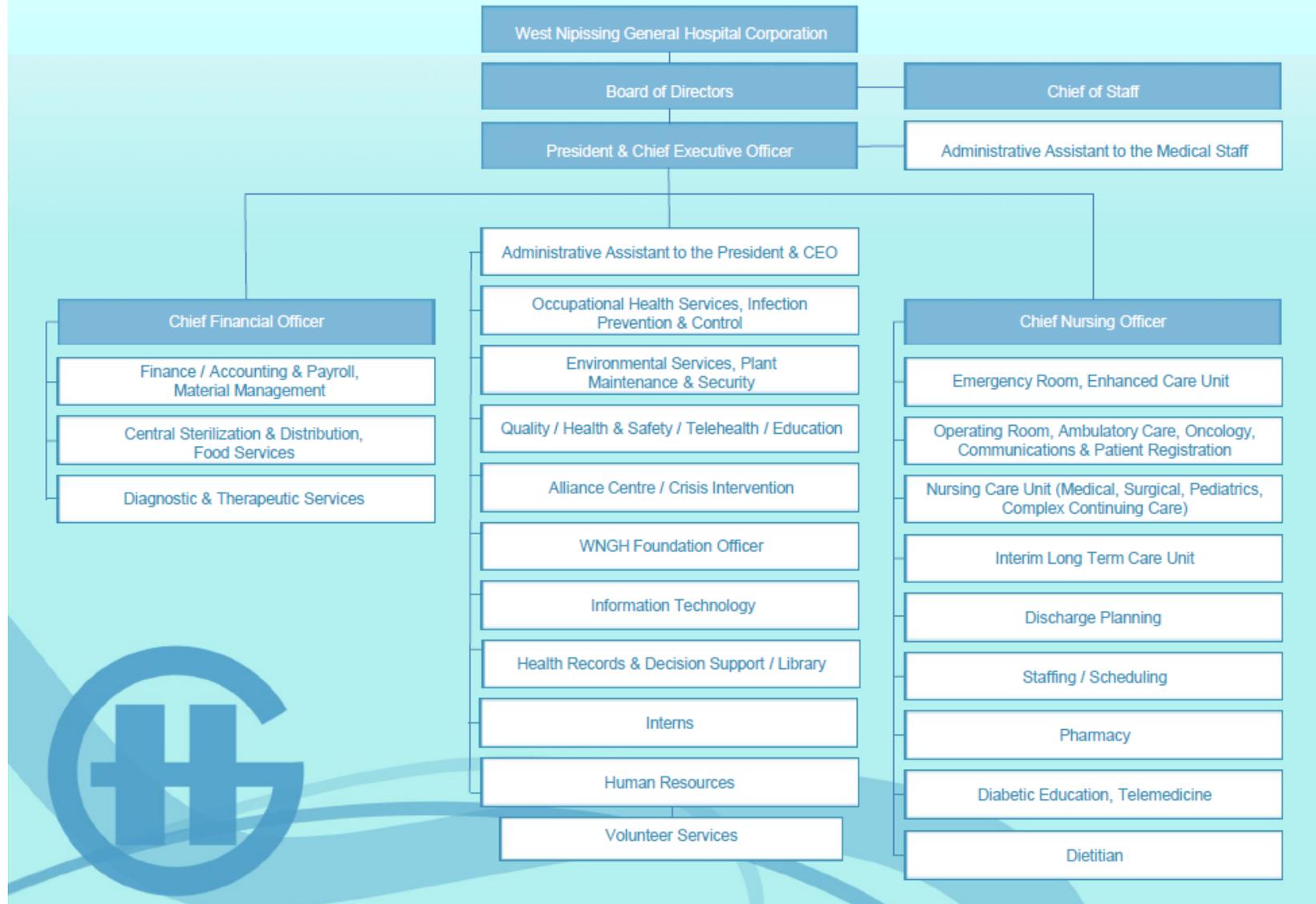
MISSION STATEMENT

The delivery of quality primary healthcare to the population of West Nipissing and surrounding areas.

VISION STATEMENT

To improve the health and wellness of our culturally diverse community.

Organizational Chart

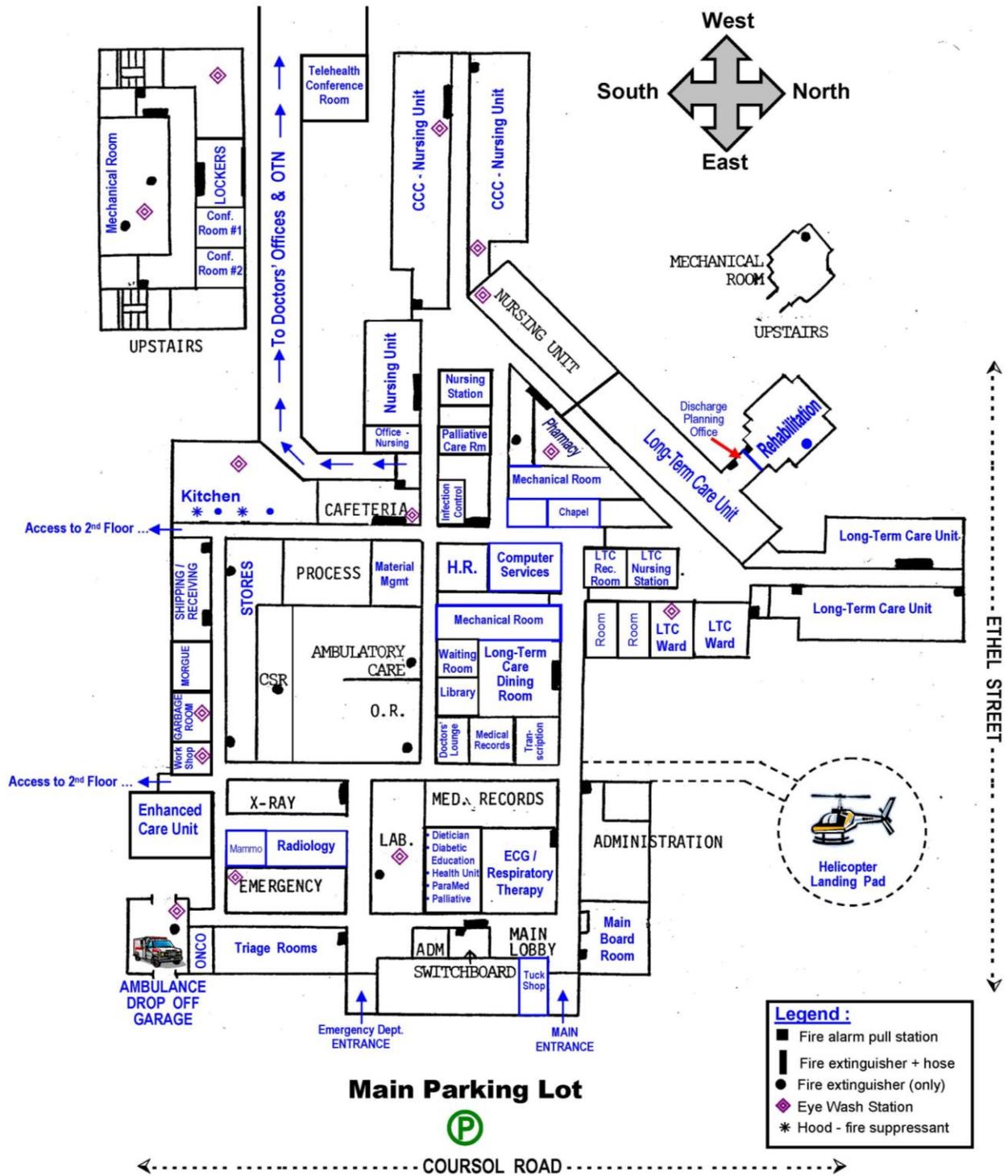


Last revised: Dec-2015

WNGH FLOOR PLAN



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Revised: Nov-2012

HOSPITAL SERVICES

WNGH is located in the municipality of West Nipissing and is comprised of former towns, villages, townships and unorganized municipalities. It is governed by a Board or Directors, whom along with the Senior Management team, identified their mission as “to deliver quality primary healthcare to the population of West Nipissing and the surrounding areas” and their vision as “WNGH is committed to improve the health and wellness of our culturally diverse community” (WNGH Strategic Plan 2013-2018). WNGH serves a total population of just over 14,000 residents. The facility employs 258 employees and operates as a fully accredited 98 bed facility with 29 Acute Care beds, 2 Enhance Care beds, 19 Complex Continuing Care beds, 48 Interim Long Term Care beds and a 24/7 Emergency Department. The hospital credentials 69 physicians (WNGH data base, 2015) who provide care in various capacities including a specialist program consisting of endoscopy, urology, pediatrics, otolaryngology, cardiology, nephrology, diagnostic sleep lab, gynecology, psychiatry, mental health and substance abuse, and a wide range of support services.

The WNGH includes a range of diagnostic procedures including digital mammography, Ontario Breast Screening Program, laboratory, radiology, echocardiography, ultrasound, Doppler studies, respiratory therapy, 24 hour blood pressure monitoring, stress testing and Holter monitoring services.

BARRIER-IDENTIFICATION METHODOLOGY

<i>Methodology</i>	<i>Description</i>	<i>Status</i>
Brainstorming Exercise	The Accessibility Team conducts ongoing sessions using the Accessibility for Ontarians with Disabilities Act 2005.	Reference Material
Discussions with staff / staff meetings	Managers discuss accessibility at staff meetings. Employees will be encouraged to voice concerns, identify further barriers and suggest methods to remove barriers.	Ongoing
Complaints Policy	All complaints identifying barriers including discrimination will be dealt with according to Policy #100.19	Ongoing
Hospital Survey questionnaire	Hospital Satisfaction Survey available to in and out-patients	Ongoing
Questionnaires from Alliance Centre	Communication tool to identify mental health and addiction barriers	Ongoing
Exit Interview	Human Resources conducts exit interviews on all staff who terminate employment	Ongoing
Education	Included as part of orientation program for new employees	Ongoing

RECENT BARRIER-REMOVAL INITIATIVES

ACCOMPLISHMENTS

- Longer call bell cords and user-friendly call bells in patient rooms
- Security photo identification completed for staff and physicians
- Volunteers, vendors and contractors are provided with identification badges
- New pay phones lower for wheelchair access and increase volume for hearing impaired (main lounge, medical clinic)
- A total of 98 new hi-low beds have been purchased for patients to increase mobility
- Call bells have been added to chapel, main lounge and long-term care dining lounge
- Key pad locks have been added to utility rooms on NCU and Long-Term Care Unit for added safety
- LTC dining lounge has been redesigned to provide home like environment
- Redesigning wheelchair accessible Information Desk is completed
- Redesign of Laboratory Department for wheelchair accessibility
- Ongoing professional development and community awareness offered to decrease stigmatization of clients with mental illness
- Symbols / pictures have been added to written hospital signage
- A wheelchair accessible drinking fountain has been installed at the front entrance
- Improvement of client awareness of bilingual services available in our hospital as signs are posted in designated areas
- Signage now in black and white to assist the visually impaired
- Public washroom is handicap / wheelchair accessible with lever handles
- Hand sanitizers have been lowered throughout the hospital for ease of accessibility
- Main hallway public pay phone equipped with TTY unit and is wheelchair accessible
- Access to interpreter for the hearing impaired (Hearing Society)
- Automated door installed in the Main and Emergency Entrances
- Parking lot and entrance ramps are fully wheelchair accessible
- Additional handicap parking spaces added in visitor's parking lot and in front of the ER entrance
- Policies in place to address communication with visually impaired patients
- Accessible Customer Service Training provided to all employees / volunteers / students
- Carpets in hallways have been removed throughout the hospital
- Keypad to access CCCU has been installed and lowered
- Automated doors at the entrance to the Medical Clinic installed

BARRIERS ADDRESSED IN 2013-2015

Barrier	Objective	Means to Prevent/Remove	Performance Criteria	Resources	Timing	Responsibility
SIGNAGE	To improve signage.	Improve existing signage (e.g. black and white, large lettering)	Facilitate access to hospital services for all clients.	Minimal cost, labour, material required.	<i>Completed</i>	Chief Financial Officer
CARPETS IN HALLWAYS	To improve wheelchair circulation	Complete carpet removal and install linoleum flooring	Promote mobility	Moderate to high cost based on labour & material	<i>Completed</i>	Administration
KEYPAD TO ACCESS CCCU	To improve wheelchair accessibility	Lower keypad for wheelchair accessibility	Improve access	Minimal cost	<i>Completed</i>	Chief Nursing Officer
TELEPHONE IN PATIENTS ROOMS	To improve communication	New telephone sets should address disabilities (volume control, flashing light, Braille)	Improve ability to communicate with external sources	Moderate cost and material	<i>Completed</i>	Chief Financial Officer
ELECTRONIC DOOR TO COURTYARD	To improve wheelchair accessibility	Install a handicap button to gain access to outside courtyard	Improve access	Moderate cost based on labour & material	Ongoing	Plant Maintenance Manager
WHEELCHAIR ACCESS AT ALLIANCE CENTRE	To Improve wheelchair accessibility	Automated doors at clinic entrance	Improve access	Modifications, labour, material required	<i>Completed</i>	Alliance Centre Coordinator
UNCLEAR DIRECTIONS	To ensure proper directions provided to patients	To provide navigation directions to patients requesting directions at registration desk	To facilitate flow when accessing services	Minimal cost, labour and material required	<i>Completed</i>	Human Resources
PRIVACY ISSUE AT COMMUNICATION AND TRIAGE	To improve privacy	Ensure confidentiality of patient information	Improve confidentiality	Modifications, labour, material required	Ongoing	Administration
MIRRORS IN PATIENTS' BATHROOMS	To improve wheelchair accessibility	Lower and angle mirrors	To promote independence for self-care	Minimal cost, labour, required material	Ongoing	Chief Nursing Officer

BARRIERS THAT WILL BE ADDRESSED IN 2016-2018

Barrier	Objective	Means to Prevent/Remove	Performance Criteria	Resources	Timing	Responsibility
ELECTRONIC DOOR TO COURTYARD	To improve wheelchair accessibility	Install a handicap button to gain access to outside courtyard	Improve access	Moderate cost based on labour & material	By March 31, 2016 Completed January 11, 2016	Plant Maintenance Manager
PRIVACY ISSUE AT COMMUNICATION AND TRIAGE	To improve privacy	Ensure confidentiality of patient information	Improve confidentiality	Modifications, labour, material required	Ongoing	Administration
DOORBELL AT ALLIANCE CENTRE	To facilitate access for those who require assistance	Install doorbell to provide assistance with entry door into the Alliance main office to those in need	Improve Access	Moderate cost with labour	By January 31, 2016 Completed January 12, 2016	Plant Maintenance Manager
MIRRORS IN PATIENTS' BATHROOMS	To improve wheelchair accessibility	Lower and angle mirrors	To promote independence for self-care	Minimal cost, labour, required material	Ongoing By 2017	Chief Nursing Officer
USE OF SERVICE ANIMALS	To ensure clear policies exist on for use of service animals and support persons	Clear policies and procedures	Improve access and promote security and independence	Minimal	By January 31, 2016	President & CEO and Chief Nursing Officer
Access to locked unit doors (LTC and CCC)	To facilitate access to locked unit doors	Lowering of all units access key pads	Improve access	Moderate costs of labour and supplies	By January 31, 2016 Completed January 4, 2016	Plant Maintenance Manager

REVIEW & MONITORING PROCESS

The Accessibility Team will meet annually or as needed to review progress of the Accessibility Plan. Goals and objectives will be reviewed as well as resources and target dates to ensure that the identified barriers are being addressed to the best of our ability.

COMMUNICATION OF THE PLAN

Copies of the plan are available in the Administration office, the Human Resource and the Emergency Department, as well as at the Alliance Centre.

Upon request, the Accessibility Plan may be a provided in various formats.

WNGH's Accessibility Plan is available on the link provided at our [website](#).