



Hôpital général de Nipissing Ouest
West Nipissing General Hospital

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ACCESSIBILITY PLAN

under the Accessibility for Ontarians with
Disabilities Act, 2005

April 2019 – March 2021



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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 Accessibility for Ontarians with Disabilities Act, 2005(AODA).

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 plan will help to plan for 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 previous 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 Accessibility for Ontarians with Disabilities Act, 2005 (AODA) 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 AODA 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⁾.

Barrier is:

- 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/mcss/accessibility/OntarioAccessibilityLaws/2001/AGUIDE_TOANNUALACCESSIBILITYPLANNINGJan07E.pdf, (Pg 12)*

(2) *Idem (pg. 12)*

AIM

Our aim is to promote knowledge of the AODA 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 prevent 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:

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 & Patient Registration Manager
- Clinical Nursing Manager
- Community Representative
- Plant, Maintenance and Environmental Services Manager
- Occupational Health Nurse/Infection Prevention & Control
- Mental Health & Addictions Services Representative
- Health & Safety Officer
- Ad hoc members as needed

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. Members shall be replaced as needed.

Meetings:

The Accessibility Team will meet bi-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
Arlene Lesenke	Occupational Health Nurse / Infection Prevention & Control	753-3110 ext. 253
	Human Resources Manager	
Sylvie Claro	Health Records/ Decision Support & Patient Registration Manager	753-3110 ext. 270
Lynn Perreault	Alliance Centre, Mental Health & Addiction Manager	753-2271 ext. 732
	Clinical Nursing Manager	
Darla Bates	Interim Clinical Nursing Manager	753-3110 ext. 204
Wayne Graham	Health & Safety Officer	753-3110 ext. 218
Rachel Gagnon	Community Member	705-753-3110 ext. 215

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.

VALUES

The West Nipissing General Hospital's core values are:

- Respect
- Patient Centered
- Communication
- Team Work
- Compassion
- Social Accountability

PURPOSE

To provide quality healthcare to our culturally and linguistically diverse population.

STATEMENT OF COMMITMENT

West Nipissing General Hospital is committed to providing accessible care and service for its customers. Aligned with our purpose, core values and commitment, care and services are provided in the manner that respects the dignity and independence of all costumers, which include persons with disabilities. The provision of care and services to persons with disabilities is integrated whenever possible throughout the hospital.

Persons with disabilities are given an opportunity equal to that given to others, to obtain, use or benefit from the care and services provided on behalf of the organization.

TRAINING PLAN

Overview

The WNGH has mandatory training on the “Accessibility for Ontarians with Disability Act” (AODA) 2005 and on the “Human Rights Code” (HRC) R.S.O. 1990, section 17 (1), as it pertains to disabilities, to all staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization. This training started in 2010 and continues to be offered at orientation to all new staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization.

All disciplines receive the same training program.

Timing of Initial Training

Training is completed on the first day of general orientation to the organization. It is completed electronically via E-learning” Surge” modules and is tracked electronically for successful completion of the program.

AODA and HRC Training Content

WNGH’s current Accessibility education plan is directed for all staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization. At orientation, staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization are assigned an e-learning course or given the information via hard copies.

The course consists of:

- A power point presentation (PPP) that refers to both the AODA and the Human Rights Code as it applies to disabilities.
- Topics covered include:
 - the definition of “disability”
 - the role of the staff, volunteer, student or the person who provides goods, services or facilities on behalf of the organization and opportunities for people to practice fully and realize their potential without discrimination related to disabilities
 - Customer Service Standards and compliance with standards
 - Pertinent policies and procedures on assistive devices, service animals, support persons, and disruption of services
 - The Accessibility plan, as well as references to these resource documents available in various formats.

The course is completed once the staff, volunteers, students or persons who provide goods, services or facilities on behalf of the organization acknowledge electronically or via hard copy that they have read and understand the presentation, as well as attest to understanding their role when it comes to Accessibility. The course remains incomplete if no sign-off is completed.

Accessibility Plan

The WNGH Accessibility plan is updated yearly, and as needed. The Plan is shared with staff via departmental meetings, by email and is accessible online via the [WNGH Online Documents Z:\drive](#). The Accessibility Plan is also available to the public at the West Nipissing General Hospital website at www.wngh.ca.

Accessibility Policies

When accessibility related policies are updated all staff, volunteers and students and persons who provide goods, services or facilities on behalf of the organization, will receive an electronic or hard copy notification for mandatory review. Policies are reviewed every 3 years or as changes occur to the AODA or the HRC.

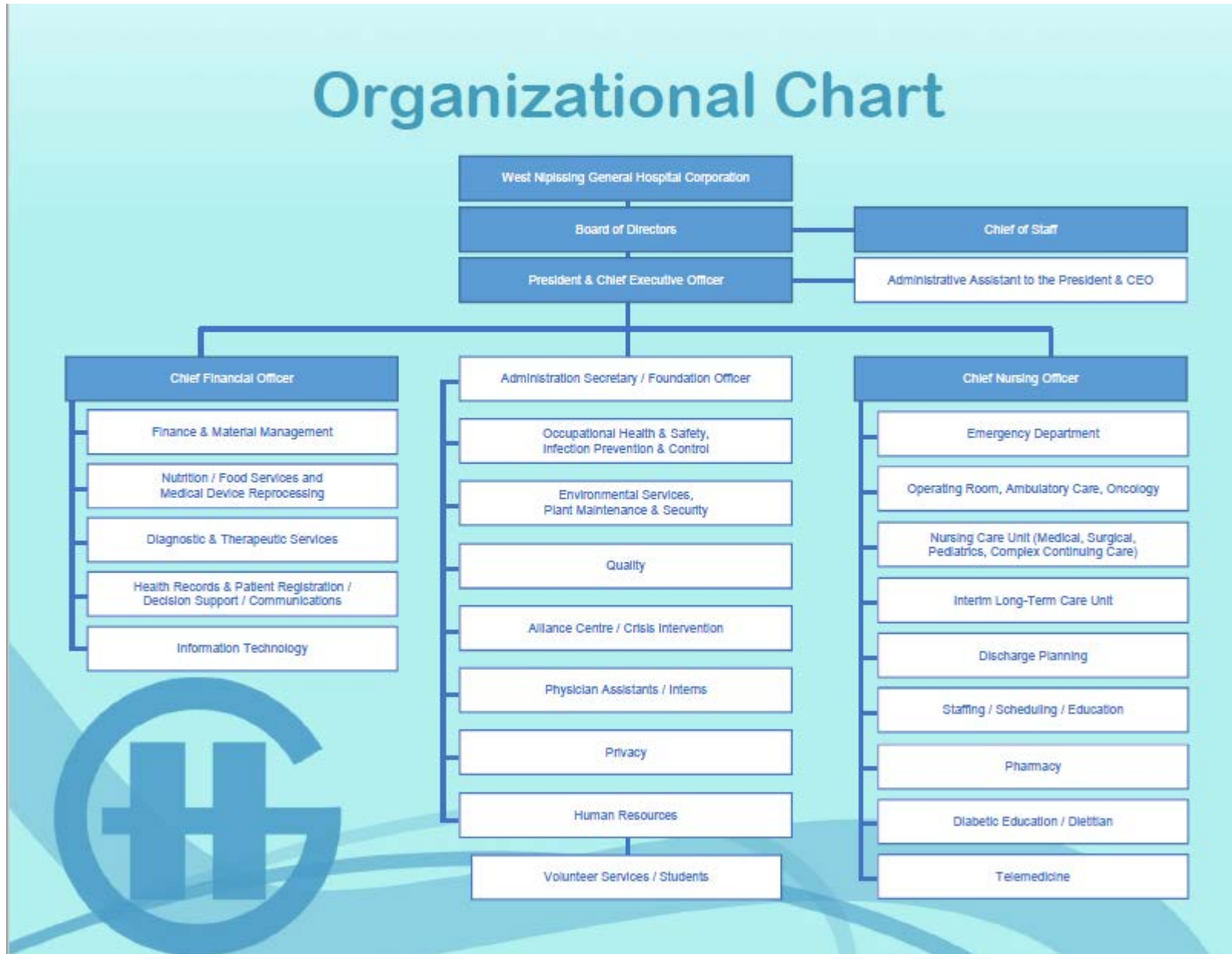
Tracking of Education

- Education is completed via E-learning “Surge Learning” and tracked electronically via our education coordinator. Training is reviewed at general orientation to ensure completion and understanding.
- All training must be completed before staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization commence their duties.
- Staff, volunteers, students or persons who provide goods, services or facilities on behalf of the organization who have any questions or concerns regarding any information in the presentation, the AODA, the HRC or any accessibility related policies, are instructed to contact their manager or the Accessibility Team.

Updates

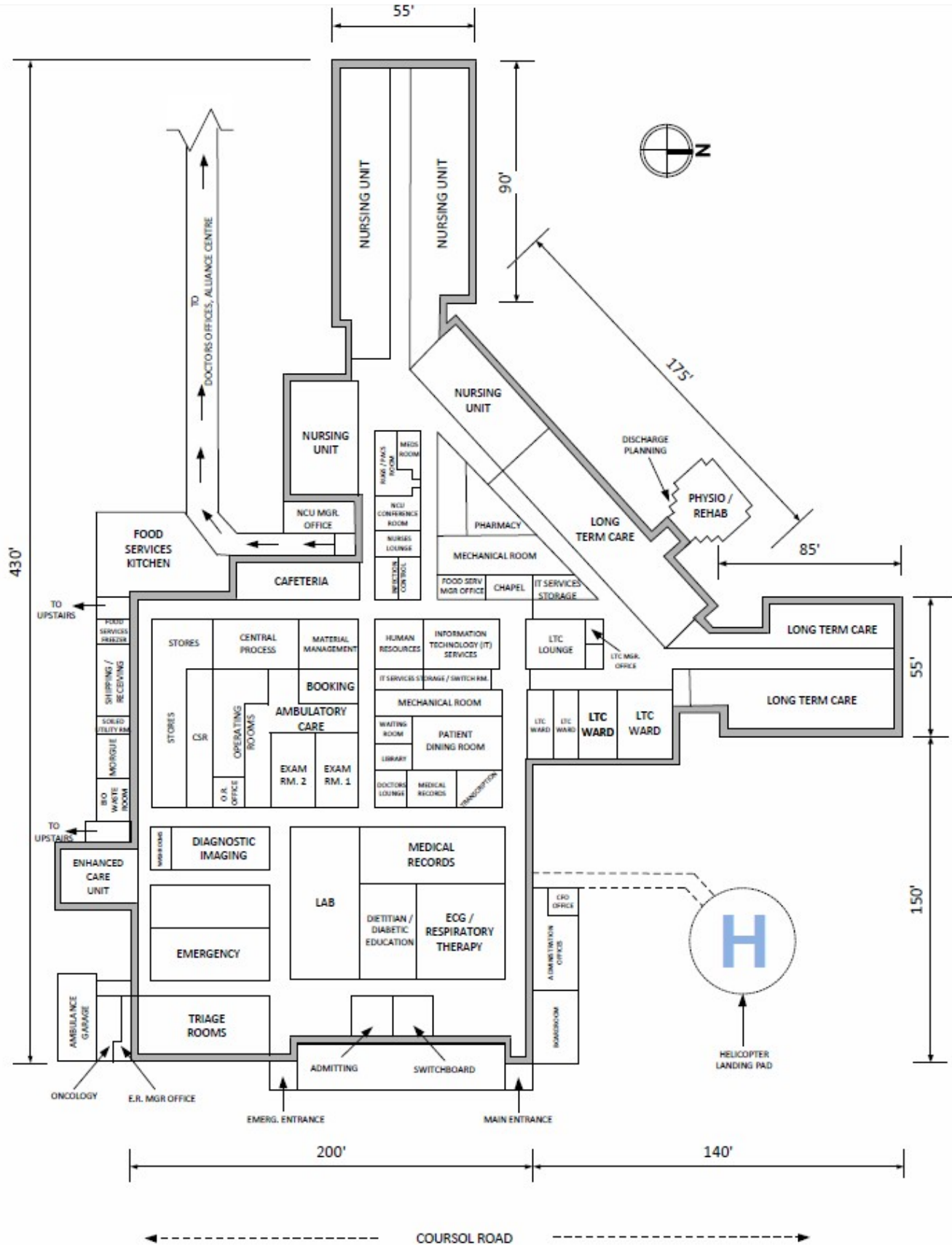
The WNGH’s Accessibility Team reviews the Accessibility Plan, related policies and educational material as updates on the AODA and the HRC are received.

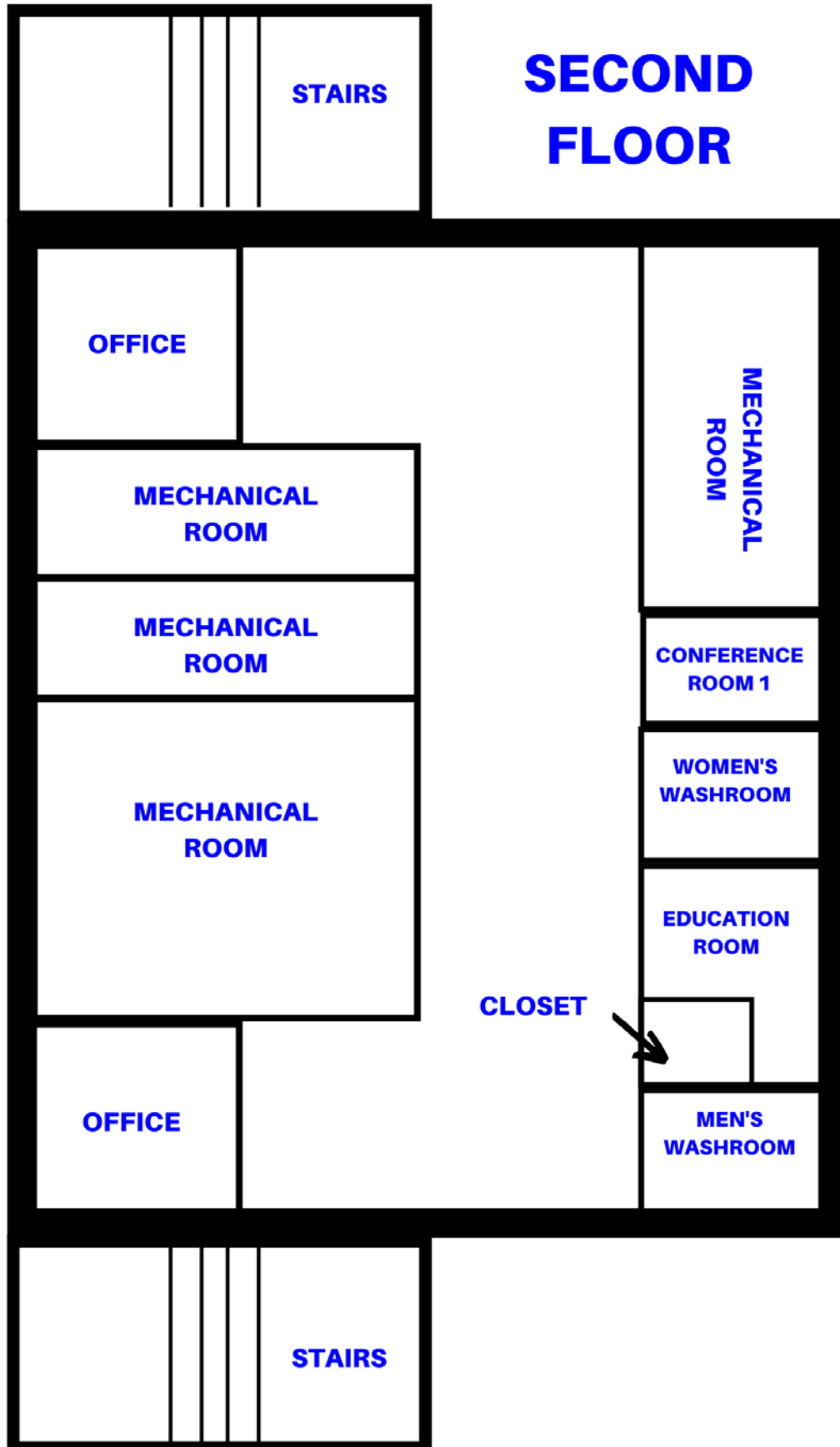
Re-education occurs with all current and new staff, volunteers, students and persons who provide goods, services or facilities on behalf of the organization.



Last revised: Feb-2019

WNGH FLOOR PLAN





HOSPITAL SERVICES

The West Nipissing General Hospital, located in the municipality of West Nipissing and is comprised of former towns/villages, townships and unorganized municipalities. WNGH serves a total population of just over 14,000 residents. Built in 1977, it boasts a clean, modern facility and excellent support services. We have 99 beds; 27 Medical/Surgical, 2 Pediatric, 19 Complex Continuing Care, 2 Enhanced Care Unit, 1 Hospice suite and 48 Long-Term Care Beds, with a 24 hour Emergency Department. The facility employs 270 employees and operates as a fully accredited Acute Care Hospital.

Currently, the community is served by 8 full-time general practitioners, one full-time GP Anesthetist, one full-time internist, two full-time hospitalists, visiting surgeons and visiting specialists. We host regular sleep disorder clinic, cardiology, respirology, urology, pediatric, otolaryngology, gastroenterology and psychiatric clinics and consultation visits by visiting specialists with a full-time physiotherapist and part-time occupational therapist.

The West Nipissing General Hospital has a laboratory on site, with pathology work referred to North Bay. Radiology encompasses general radiology. The Radiologist visit two days a week and have state-of-the-art radiology equipment at their disposal. The recent innovation of PACS now provides digital transmission of our diagnostic imaging results giving immediate access to radiologists and specialists in North Bay and Sudbury. The procurement of a CT Scanner is underway and planned for 2020

Our mammography department offers diagnostic mammography and screening, and our two ultrasound rooms offer general ultrasounds and Doppler studies. Our Enhanced Care Unit was built in 1992 and includes a Bi-Pap, cardiac monitors, six telemetry units, two central monitors, one crash cart defibrillator and IV smart pumps. Our emergency department has five treatment rooms, a four bed observation room, stationary and portable cardiac defibrillator monitors and obstetrical equipment. Our medical facility also has an ECG department including 24 and 48 hour Holter monitoring, Stress Test capability, 24 hour Blood Pressure monitoring and a full-time Respiratory Therapist.

We also offer a Mental Health and Substance Abuse Program as well as Crisis Intervention service that offers a wide variety of services to clients 16 years of age and older. Psychiatrists are on site seven days per month through an agreement with the University of Ottawa Francophone program.

FRENCH LANGUAGE SERVICES

The West Nipissing General Hospital recognizes the official status of the two of the linguistic groups served by the WNGH and understands the unquestionable benefits in being able to communicate in their own language with care providers. The WNGH is committed to meeting its obligations under the French Language Services Act by providing services in French to the clients, caregiver and the public.

BARRIER IDENTIFICATION METHODOLOGY

Managers discuss accessibility at staff meetings. Employees are encouraged to voice concerns, identify further barriers and suggest methods to remove barriers.

An email reminder is sent out to managers every year for identification of potential and actual barriers.

All complaints identifying barriers including discrimination are dealt with according to Policy #100.19 and the barriers are shared with the Accessibility Committee.

Hospital Satisfaction Surveys are available to in- and out- patients.

Alliance uses the Ontario Perception of Care (OPOC) questionnaires as a communication to identify mental health and addiction barriers.

One on one session was held with a person with a disability to review identified barriers and potential solutions.

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 CCU 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, labor, 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 CCU	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	<i>Completed</i>	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 ADDRESSED IN 2016-2018

Barrier	Objective	Means to Prevent / Remove Barrier	Performance Criteria	Resources	Timing	Responsibility
ELECTRONIC DOOR TO COURTYARD	To improve wheelchair accessibility	Install automatic button to outside courtyard	Improve access	Moderate cost based on labour & material	By March 31, 2016 <i>Completed January 2016</i>	Plant Maintenance Manager
PRIVACY ISSUE: 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 into Alliance office	Improve access	Moderate cost with labour	By January 31, 2016 <i>Completed January 2016</i>	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	By July 2018 <i>Completed July 2018</i>	Plant Maintenance Manager / Chief Nursing Officer
USE OF SERVICE ANIMALS	To ensure clear policies exist on use of service animals and support persons	Clear policies and procedures	Improve access and promote security and independence	Minimal	By January 31, 2016 <i>Completed March 2016</i>	President & CEO / Chief Nursing Officer
ACCESS TO LOCKED UNIT DOORS (LTC&CCC)	To facilitate access to locked unit doors	Lower all units' access key pads	Improve access	Moderate costs of labour and supplies	By January 31, 2016 <i>Completed January 2016</i>	Plant Maintenance Manager
DOORBELL AT DR. DESJARDINS' OFFICE	To facilitate access for those who require assistance	Install doorbell to provide assistance with entry into the Doctor's office	Improve access	Moderate cost with labour	By November 30 th , 2016 <i>Dr. Desjardins refused plan</i>	Plant Maintenance Manager
SIGNAGE AT THE ALLIANCE CENTRE	To improve signage	Edit existing signs (black/white, large lettering)	Facilitate access to Alliance Centre services for all clients.	Minimal cost, labor, material required.	By December 15 th , 2016 <i>Completed December 2017</i>	Chief Nursing Officer
SIGNAGE AT MEDICAL CLINIC ENTRANCES	To improve signage	Edit existing signs (black/white, large lettering)	Facilitate access to Medical clinic services for all patients	Minimal cost, labor, material required.	By December 15 th , 2016 <i>Completed December 2017</i>	Chief Nursing Officer
RAMP AT DOCTOR'S ENTRANCE	To improve access	Install a new wheelchair ramp	Improve access	Moderate costs and labor	<i>Completed April 2017</i>	Plant Maintenance Manager
LTC COURTYARD ENTRANCE	To improve access	Install ramp at the courtyard door to improve access	Improve access	Moderate cost and labor	<i>Completed August 2017</i>	Plant Maintenance Manager
SIDEWALK ACCESS FRONT OF HOSPITAL	To improve access for those with disabilities	Smooth out and widen sidewalk for easier access	Improve/facilitate access	Moderate cost with labor	By December 2017 <i>Completed November 2017</i>	Plant Maintenance Manager
SIDEWALKS ON CLINIC SIDE OF HOSPITAL	To improve access for those with disabilities	Smooth out and widen sidewalks for easier access	Improve/facilitate access	Moderate cost with labor	By December 2018 <i>Completed November 2017</i>	Plant Maintenance Manager

BARRIERS THAT WILL BE ADDRESSED IN 2019-2021

Barrier	Objective	Means to Prevent / Remove Barrier	Performance Criteria	Resources	Timing	Responsibility
**PRIVACY ISSUE: COMMUNICATION AND TRIAGE	To improve privacy	Ensure confidentiality of patient information	Improve confidentiality	Modifications, labour, material required	Ongoing	Administration
**LTC DINING ROOM DOOR	To improve access for those with disabilities	Widen doorway and/or add automatic button. Currently 2 nd door into dining lounge is wide for ease of access	Facilitate access	Modifications, labour, material required	Extended to December 2020	Plant Maintenance Manager
**MEDICAL CLINIC ENTRANCE SIDEWALK	To improve wheelchair accessibility	Install ramp	Improve access	Moderate costs and labour	Extended to December 2020	Plant Maintenance Manager
** INTERNET/WEBSITE ACCESSIBILITY	To ensure our website meets the AODA standards	Ensure compliance with standards for webpages	Improve information access	Minimal	<i>Completed November 2019</i>	Administration
** COURSOL ENTRANCE SIDEWALK Octobers 2019	To improve wheelchair accessibility	Replace sidewalk	Improve access	Modifications, labour, material required	<i>Completed October 2019</i>	Plant Maintenance Manager
** CAFETERIA ENTRANCE October 2019	To improve wheelchair accessibility and for those with disabilities	Widen doorway and/or add automatic button	Facilitate access	Modifications, labour, material required	By December 2020	Plant Maintenance Manager
**BARIATRIC ACCOMMODATIONS	To improve access and facilitate care	Larger rooms with x-large entrance to facilitate bariatric bed removal when needed	Improve care	Modifications to building, High cost	Ongoing	Administration

** Denotes areas are currently accessible and with infrastructure funding we could enhance accessibility.

REVIEW & MONITORING PROCESS

The Accessibility Team will meet bi-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 by accessing our [website](#).