ADM 01-02, Procuring or Acquiring Goods, Services or Facilities under the AODA

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**PURPOSE**

Nipigon District Memorial Hospital has established guidelines regarding the procurement of goods and services in order to comply with the Integrated Accessiblity Standards of the Accesibilty for Ontarians with Disabilities Act, 2005.

When procuring goods, services and facilities, Nipigon District Memorial Hospital will incorporate accessiblity features where and when possible. Where applicable, procurement documents will specify desirable accessibility criteria and provide guidelines for the evaluation of proposals. Where it is impractical for the Hospital to incorporate accessibility criteria and/or features when procuring or acquiring specific goods, services or facilities, the Hospital will notify interested parties of this decision, upon request.

**SCOPE**

For the purpose of this policy includes all persons who are accessing the goods, services and facilities of Nipigon Hospital and staff, professional staff, contract employees and to any person working on behalf of the Hospital.

To determine if any barriers that our products, services or facility might present for people with different types of disabilities, the following principles of accessibility will be considered:

*Accessible* . Can a person with a disability use the good, service or facility at all?

*Equitable*. Can someone with a disability use the good, service or facility as quickly and easily as a person without a disabilty?

*Adaptable.* Can a user configure the good, service or facility to meet their specific needs and preferences and will it work with common assistive technologies?

The Hospital recognizes that it might not always be possible to ensure that goods, services or facilities procured or acquired are accessible. In this regard, the Hospital will provide an explanation, upon request, in accordance with this regulation.

Nipigon District Memorial Hospital is required to incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so.

All stakeholders should be aware that accessibility features need to be considered when preparing to procure or acquire goods, services or facilities.

Challenges are encountered in incorporating accessibility criteria and features into the procurement process due to:

* the complexity of procurement under this legislated obligation
* lack of awareness of appropriate accessibility criteria and features
* lack of the necessary skills and tools to assess the accessibility of goods, services and facilities

This document outlines the requirements for carrying out and managing the procurement of goods, services and facilities on behalf of the Hospital. It provides general considerations around incorporating accessibility into the procurement process.

# RESPONSIBILITIES

Appropriate legislation and accepted industry occupational health, safety and ergonomic standards and guidelines should be referenced in quotes or tenders for products purchased.

Terms and conditions for Requests for Proposals, Request for Quotations and Request for information should include a section identifying “preference will be given to product offerings that offer advantages to occupational health safety and ergonomic features.”

Purchasing staff, where necessary, with end users, health and safety staff or other sources (as applicable) will discuss methods to address identified health, safety and/or ergonomic issues.

Occupational health and safety will maintain information on identified hazards, health, safety and ergonomics where applicable and educate requestors and purchasing staff to changes required for the next purchasing cycle.

Purchasing will participate when required, in monthly/annual reviews (initiated by occupational health and safety and physio staff) of health, safety and/or ergonomic issues arising from the workplace safety inspection.

GUIDELINES FOR PURCHASING ERGONOMIC FURNITURE

Employee priorities:

The priorities for ergonomic furniture is based upon:

* Medical conditions: this assessment is based upon an assessment in consultation with the OHN
* Dedicated computer operators are those who spend over four hours a day on a computer on an ongoing basis
* Frequent computer users are employees that use computers or other equipment over four hours a day, but only for two or three days a week
* Staff working at inadequate workstations as assessed by workplace safety inspection.

Furniture and Equipment priorities:

* The chair, that is fitted for the individual is essential to helping employees prevent injuries
* Footrests, document holders, and task lighting should be considered part of the basic workstation for computer users. Non computer5 users may need ergonomically correct tols, mats, etc
* Other furniture equipment includes but is not limited to adjustable work surfaces, headsets, and lighting filters

The priorities for purchasing other ergonomic tools and equipment are:

* Medical conditions: this assessment is based upon assessment in consultation with the OHN
* Frequency of equipment or tool use. Staff who use the equipment or tool two to four hours daily
* Staff working with unacceptable equipment or tools as assessed by workplace safety inspection
* The Department’s need for the work and/or tool as indicated by both the worker and manager

PROCEDURES

The buyer for the Hospital will develop guidelines for office furniture and ergonomic equipment. However, managers and employee are able to purchase other equipment if the same standard is met.

For individuals with special needs, including height requirements, chairs outside the general guidelines may be purchased.

The work surface is important for worker’s safety. The work surface must allow the worker’s knees and legs to fit under the work surface and usually should be 17 cm above the worker’s knee. Adjustable work surfaces may need to be purchased depending upon the situation. Work areas may be modified to raise the work surface, if it can be done safely.

When negotiating contracts with vendors for furniture, vendors will be required to provide ergonomically correct furniture where possible. They will also be requested to provide a two week trial at no additional cost to ensure the best possible fit for the individual.

All procurement of equipment/furniture is to be made through the Purchasing Department

If any medical conditions need to be considered when purchasing the equipment/furniture, this is to be identified on the requisition. The buyer will work with the OHN and JHSC to review the equipment/furniture requirements and ensure the end user needs will be met.

# INCORPORATING ACCESSIBILITY INTO PROCUREMENT POLICIES AND PROCEDURES

Nipigon District Memorial Hospital is committed to:

* including accessibility criteria or features in the procurement process, except where it is not practicable to do so
* considering accessibility from the outset of the procurement process
* considering accessibility over the entire lifecycle of the good, service or facility, so that the end result is robust and adaptable enough to be accessible in the future
* Set out basic requirements around asking suppliers to demonstrate their knowledge of accessibility as it relates to their goods, services or facilities when tendering.
* Identify where to seek advice about accessible procurement by contacting the individual(s) involved in ensuring AODA compliance.

Suggestions around determining procurement procedures:

* Keep in mind that suppliers need to have a good understanding of accessibility as it relates to the college in order to provide appropriate goods or services
* Include a procedure around how to establish the accessibility requirements for a proposed good, service or facility
* Include an appropriate process for involving others within the college who can assist with determining the accessibility criteria or features
* Ensure that external experts:
* Can demonstrate the skill level needed.
* Are familiar with the required list of products, standards or guidelines
* Can provide references from other organizations to whom they have provided similar services
* Ensure there is a clear procedure for evaluating the level of skill that an external expert on accessibility brings to the procurement process

# BUILDING ACCESSIBILITY INTO THE PROCUREMENT PROCESS

* Involve or consult with health care partners to determine the aspects of the goods, services or facilities that are most likely to pose a barrier for people with disabilities
* Involve or consult with people with disabilities
* Identify who will carry out an accessibility audit to validate the accessibility claims in a vendor’s or supplier’s proposal

CONTRACT/PROCUREMENT SPECIALIST

The Northern Supply Chain’s Contract/Procurement Specialist shall determine the general features or criteria to include in a purchase, or request for purchase about specific standards for AODA compliance to determine the specific accessibility standards, guidelines, features or criteria to be considered.

In partnership with the Contract/Procurement Specialist, it is important to keep in mind that:

* Standards and legislative guidelines are not always clear, and may be open to different interpretations.
* A general reference may make it difficult to determine whether a proposed product, service or facility meets the standard.
* There may be no products, services or facilities available that fully meet the standard. You may miss opportunities to consider how what’s available could be adapted.
* Always state specific accessibility requirements as they relate to the goods, services or facilities you are putting out for tender.

WRITING A REQUEST

When writing a request, include the Hospital’s statement of organizational commitment to accessibility.

Include the appropriate accessibility specifications, features or criteria, and consider setting them as a minimum requirement for winning the tender.

Consider including the weighting that the accessibility aspects of the proposal will receive as part of the evaluation criteria.

Including Criteria

State the specific accessibility standards, guidelines, features or criteria instead of using vague terms, such as “accessible” or “AODA-compliant.”

Specify existing accessibility standards or guidelines if they have been established for the item, service or facility. For example, when creating a request for a vendor to refresh or redevelop the Hospital’s website, consider including a statement such as “provide evidence as to how the new website will conform to the Level AA guidelines.”

Specify that the tenderer include accessibility in the development process if you are procuring an item, service or facility that will be designed and developed.

Asking for Evidence

Ask the tenderer to describe the accessibility criteria or features of their goods or services.

Ask the tenderer to provide evidence in their tender that the proposed goods, services or facilities will satisfy the accessibility criteria or features set out in the RFQ, RFP.

Ask tenderers to provide references from previous clients that demonstrate their knowledge and ability to fulfil accessibility criteria or features.

### Reviewing Tenders

Review the client references and evidence of the accessible goods, services or facilities that each tender has provided.

Consult with Contract/Procurement Specialist to review prototypes provided by the tender to see if they meet the accessibility requirements.

Ask people with disabilities to test any prototypes or samples, where possible, to determine accessibility. For example, people with disabilities could be asked to visit a sample website submitted by a tender.

Evaluating Tenders

Determine whether the procurement team includes someone with sufficient knowledge to properly assess the accessibility dimensions of the tender’s proposed solution.

Assess the tender’s accessibility-related experience and credentials.

Assess the tender’s skills, the plans, criteria or features of their proposed solution, and the processes they propose to undertake to meet the accessibility criteria or features stated in the request.

Validate the tender’s accessibility claims. Consult with users, including people with disabilities, or gather evidence from the tender’s clients or colleagues at other health care facilities

PROCURING GOODS, SERVICES OR FACILITIES

The Hospital is committed to the highest possible standards for accessiblity. Suppliers must be capable to recommend and deliver, as appropriate for each deliverable, accessible and inclusive goods, services and facilities consistent with the Accessiblity for Ontarians with Disabilities Act, 2005 (AODA) and its regulations.

Suppliers will be required to comply with the Hospital’s standards, policies and procedures which apply to the deliverables to be provided by the supplier.

ACCESSIBILITY CRITERIA

The following are some accessibility criteria that will be considered when procuring goods and/or services.

When purchasing GOODS

* Can the item(s) be used by an individual in a seated position / using one hand, with limited upper body strength, or limited fine motor skills / with vision loss or low vision / with hearing loss
* Does the product meet ergonomic standards and can it be customized to meet a variety of needs
* Are support materials, such as manuals, training or service calls, available in accessible formats at no additional charges

Accessibility criteria or features must be considered when purchasing goods, except where it is not practicable to do so.

As part of the selection criteria, consider asking the vendor or supplier, for example, to:

* provide evidence that the products are easy for all users to reach, see and operate
* provide options for you to evaluate with colleagues and users before committing to a final selection
* list any specific accessibility standards or guidelines that the product must adhere to, and identify how the product complies with them
* identify how the product fulfills the specific accessibility features or criteria contained in the request

The AODA does not preclude you from purchasing goods that do not meet the accessibility needs of all users. In this situation, recommended best practices include:

* Communicate to the Hospital community that there are no goods available with the accessibility criteria or features that would meet the needs of all users. This ensures that you have conducted the procurement process with due diligence.
* Consider creating a form to provide evidence that the decision to not comply with the AODA requirements was given management approval.

When providing SERVICES

* Does the Hospital provide accessible customer service, as required under the Customer Service Standard
* Can the service provider accommodate the needs of people of all abilities? For example, if we are hiring someone to teach a workshop does the workshop evaluation process provide accessible formats for people with different types of disabilities
* Will the Hospital use accessible signage and printed materials

Services may be provided directly to patients/residents or outpatients by Hospital employees or by third-party service providers.

In accordance with the AODA Customer Service Standard, services must be provided in a manner consistent with the key principles of independence, dignity, integration and equality of opportunity.

When considering the FACILITIES

* Can someone use a mobility aid, like a wheelchair or walker to get around the facility?
* Are signs placed at an accessible height?
* Does the facility have emergency procedures to assist people with disabilities?

Regulatory compliance and industry standard safety practices are expected to be adhered to –

* at the design stage
* in the purchase specifications
* during construction and/or
* installation phases

The Hospital shall consider accessible criteria or features when renting, renovating, acquiring or building facilities.

WHEN ACCESSIBILITY ISN’T PRACTICABLE

In some instances, there may be no suitable good or service that is fully accessible for all people with disabilities, or you may find a fully accessible solution that is not practicable, too expensive or will cause unreasonable delay for others.

Suggested best practices in situations like these include:

* consulting people with disabilities to identify the features that are most important to them, and the aspects that are most likely to be a barrier
* selecting the most accessible goods or services based on that feedback
* asking suppliers to contact you if fully accessible goods or services become available in future
* informing users about the accessibility issues and about the most accessible alternative
* determining whether an alternative solution might allow you to provide accessible service in a different way
* SUGGESTED COMMUNICATION MATERIAL

### Think about accessibility criteria in advance

Goods, services or facilities that are not accessible may prevent people with disabilities from participating equally in accessing our programs and services. Questions to consider before procuring goods, services or facilities:

* Could a person with a disability use this item, service or facility? What barriers might a person with a disability face?
* Could a person with a disability use this item, service or facility as easily as a person without a disability?
* Could the item, service or facility be adapted to the needs of a person with a disability?

#### Sample criteria to consider when procuring goods

* Can the item be used by someone who is seated? Standing? Using a mobility aid?
* Does the item meet ergonomic standards?
* Can the item be adapted or customized to meet a variety of needs?
* Is written material in an accessible format?

#### Sample criteria to consider when procuring services

* Have the service provider’s staff members completed the accessible customer service training required under the Customer Service Standard?
* Can the service provider accommodate the needs of people with disabilities?
* Does the service provider use accessible signage, audio or print materials?
* Is the service provider’s website accessible?

#### Sample criteria to consider when procuring facilities

* Can a person using a mobility aid safely move around the facility?
* Are signs placed so that people with disabilities can read them?
* What emergency procedures are in place to help people with disabilities?

ERGONOMIC PRINCIPLES IN THE PURCHASING PROCESS

To ensure the health, safety and the well being of our patients/ residents staff and visitors; ergonomic requirements are fully considered when purchasing goods.

Appendix A:

Accessibility Checklist for Procuring Goods and Services

| **Consideration** | **N/A** | **Yes** | **No** | **Follow-up** |
| --- | --- | --- | --- | --- |
| Will the proposed goods or services reflect the Hospital’s commitment to accessibility?  |  |  |  |  |
| Have relevant stakeholders been consulted to address accessibility concerns? |  |  |  |  |
| Have accessible features and criteria been included in the [procurement process](http://www.ontario.ca/en/general/accessibilityplan/ONT05_040091.html)?  |  |  |  |  |
| Does the cost estimate reflect the need to integrate accessibility features and criteria? |  |  |  |  |
| Have the possible impacts on people with disabilities been considered? |  |  |  |  |
| Can people with disabilities use or benefit from the proposed goods or services on an equitable basis? |  |  |  |  |
| Did people with disabilities participate in the decision-making process?  |  |  |  |  |
| Are there accessible feedback mechanisms so accessibility issues can be reported, monitored and evaluated?  |  |  |  |  |
| Are any relevant documents and communication materials written in plain language and available in an accessible format?  |  |  |  |  |
| Will online communication materials include accessible electronic formats of HTML, accessible PDF or Word? |  |  |  |  |
| The Hospital must notify the public about the availability of accessible formats and communication supports. Is relevant information in an accessible format posted on the premises or on the Hospital’s website?  |  |  |  |  |
| Do departmental materials such as posters and brochures follow the [Clear Print Guidelines](http://www.cnib.ca/en/services/resources/Clearprint/Documents/CNIB%20Clear%20Print%20Guide.pdf)?  |  |  |  |  |
| Do signage and information systems use the [International Symbol of Accessibility](http://www.mcss.gov.on.ca/en/mcss/programs/accessibility/understanding_accessibility/symbols_accessibility.aspx) where applicable? |  |  |  |  |

Appendix B:

Accessibility Checklist for Identifying Scope of Work

| **Consideration** | **N/A** | **Yes** | **No** | **Follow-up** |
| --- | --- | --- | --- | --- |
| 1. Have you consulted internal experts about specifications for the product, service or facility?
 |  |  |  |  |
| 1. Have you consulted the person responsible for AODA compliance at your Hospital about specific accessibility standards, guidelines, features or criteria?
 |  |  |  |  |
| 1. Are there existing accessibility standards or guidelines for this product, service or facility?
 |  |  |  |  |
| 1. Are you including accessibility features or criteria in the weighting for evaluating tenders?
 |  |  |  |  |
| 1. Is the tender asked to:
 |
| * include accessibility in the design and development process?
 |  |  |  |  |
| * describe the accessibility features of the proposed goods or services?
 |  |  |  |  |
| * provide evidence that the proposed solution will satisfy the accessibility requirements in the request
 |  |  |  |  |
| * provide references that demonstrate their ability to satisfy accessibility requirements?
 |  |  |  |  |

Appendix C:

Accessibility Checklist for Request Document

| **Consideration** | **N/A** | **Yes** | **No** | **Follow-up** |
| --- | --- | --- | --- | --- |
| 1. Is the Hospital’s accessibility policy or commitment to accessibility clearly stated?
 |  |  |  |  |
| 1. Have specific accessibility standards, guidelines, features or criteria been included?
 |  |  |  |  |
| 1. Are the accessibility features or criteria stated as a minimum requirement?
 |  |  |  |  |
| 1. Are the accessibility features or criteria included in the weighting for evaluating tenders?
 |  |  |  |  |

Appendix D:

Accessibility Checklist for the Built Environment

| **Consideration** | **N/A** | **Yes** | **No** | **Follow-up** |
| --- | --- | --- | --- | --- |
| Is the proposed facility or infrastructure barrier-free? |  |  |  |  |
| Will the changes to the proposed facility or infrastructure make it barrier-free?  |  |  |  |  |
| Have accessibility features been integrated into the planning process?  |  |  |  |  |
| Have agreements been reached to ensure accessibility features will be included during construction? |  |  |  |  |
| Are entrances accessible to people using wheelchairs or scooters? |  |  |  |  |
| Are accessible entrances clearly marked with the International Symbol of Accessibility? |  |  |  |  |
| Are mats securely positioned and level with the floor?  |  |  |  |  |
| Is there an accessible route of travel to all floors? |  |  |  |  |
| Are doorways wide enough to allow people using wheelchairs to pass through easily? |  |  |  |  |
| Are door thresholds bevelled so they do not create a tripping hazard? |  |  |  |  |
| Can user stations be accessed by persons using a mobility device? |  |  |  |  |
| Are there public information systems, auditory signals or way-finding so people with visual impairments can move safely and independently? |  |  |  |  |
| Are building and route signage provided in large, high contrast lettering? |  |  |  |  |
| Have accessibility features been incorporated when designing or procuring items under s. 6 of the AODA?  |  |  |  |  |
| Are accessible routes marked to provide directional cues for people with vision disabilities? |  |  |  |  |
| Are washroom features placed at an appropriate height and location for people with a wide range of disabilities? |  |  |  |  |
| Has consideration been given to service/ guide dogs (comfort stations, water)? |  |  |  |  |