ADM 01-05, Employee Individual Accommodation Plan under the AODA

**PURPOSE**

Accessibility accommodations help remove barriers so individuals are able to meet their employment goals and contribute fully to their workplace. Most workplace accommodations offer an adjustment to how things are usually done, at little or no cost.

The aim of this document is to provide background information, explanations and examples that will help employers create a process and policies to introduce an individualized accommodation plan and [policy, as required under the Ont. Reg. 191/11 Integrated Accessibility Employment Standard.

The employer is required to provide reasonable accommodation for its potential and current employees with disabilities. As such, the employer must develop and implement an individualized accommodation plan, if requested by an employee with a disability.

An individualized accommodation plan must document the employer’s measures or actions to provide the employee:

* Accessible formats and communication supports in delivering employment information
* Workplace emergency response information
* Details of how and when the employer will introduce any other reasonable accommodation(s) to address a carrier

**DEFINITIONS**

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| reasonable accommodation - | is an adjustment of how things are normally done in order for an employee to perform their employment responsibilities or access the benefits available to them, by virtue of their employment. it would not result in undue hardship to the employer. |
| accessible format - | include but are not limited to large print, recording audio and electronic formats, braille, and other formats usable by persons with disabilities. |
| communication support - | Include but are not limited to captioning, alternative and augmentative communication supports, plain language, sign language, and other supports that facilitate effective communications. |

**SCOPE**

For the purpose of this policy applies to all employees with disability who require an individual accommodation plan.

**POLICY**

Nipigon District Memorial Hospital will support employees by providing reasonable accommodations in the workplace. An employee may make a verbal request or send a written request to their manager, or other human resources representative for an individualized accommodation plan.

The Hospital will assess the employee and possible accommodations on an individual basis. The Hospital may request, and cover the cost for, an evaluation by an independent regulated health professional or other practitioner in the area of workplace accommodations for employees with disabilities.

An employee may request assistance in the development of the plan, including:

* A representative of the bargaining unit if applicable
* Another person who is knowledgeable about workplace accommodations for employees with disabilities

The Individual accommodation plan includes:

* Accessible formats and communication supports, if requested
* Workplace emergency response information, if required
* Details of how and when any other accommodations will be provided
* When the plan will be reviewed

The Hospital will review an employee’s individual accommodation plan on the three month anniversary date and in combination with the regular biennial employee review after that.

Updated to the accommodation plan outside of the regular review will be completed when:

* The employee workspace is modified or relocated
* The employee’s responsibilities have changed
* The employer is aware there are other charges that affect the accommodation
* The employee has requested a review

The communication needs of our employees will be met by providing them, with a copy of their plan or an explanation for denying the request to introduce a plan in a format that is accessible to the employee.

We may deny an employee’s request for an individual accommodation plan in the following circumstances:

* The employee is able to carry out most of the job without an accommodation
* The independent regulated health professional does not support the employee’s self assessed requirement of a workplace accommodation
* Our research shows that the accommodation request would cause undue hardship (ie. by creating safety risks to other employees or an unsuitable financial burden)

NDMH will protect the employee’s personal information and personal health information at all times by taking the following steps:

* Using confidential forms
* Locking file storage and limiting access to human resources and managers only

**PROCEDURE**

Employer/employee collaboration is critical to identifying and implementing a reasonable accommodation that meets the individual’s needs and the workplace circumstances.

Confidentiality ensures that the accommodation requirements are a private discussion between the affected employee and management.

Initiating a Request for Accommodation

The employer will respond to an employee who requests an individualized accommodation plan to address a barrier the individual is experiencing in the workplace. Other human resource personnel involved in hiring por performance management, such as a manager may also initiate the request for reasonable accommodation. (OHN??)

Gather Relevant Information and Assess Needs

The employer will engage the employee in an initial conversation to assess the workplace barrier and possible accommodations to address this barrier.

The employee must cooperate in this process by:

* Providing relevant information to assist the employer, including any reports from a regulated health professional or other practitioner in the area of workplace accommodations for employees with disabilities (ie. by providing a note from their family physician)
* Participating in an evaluation initiated by the employer to determine the accommodation that is required

The employer must request an evaluation of the barrier and options for accommodation from an independent health professional or other practitioner in the area of workplace accommodations.

* The focus will be on the accommodation required, not medical details about the employee’s disability
* An independent regulated health professional or other practitioner in the area of workplace accommodations for employees with disabilities will carry out the evaluation

The employee is responsible for costs associated with obtaining medical information to support the accommodation (ie. the costs associated with receiving a physician’s note and/or other supportive documentation from their family physician or specialist). If the employer requests an independent examination, then the employer is responsible for paying for that particular expenses.

The manager will continue to engage the employee in evaluating potential options to remove the barrier successfully.

The employer will treat information related to the accommodation, including external evaluations, as confidential. Management will not discuss the information with other employees, unless agreed for organizational purposes. Related forms and information will be stored securely.

If relevant:

The employee may request that a representative from the bargaining unit or another representative from the workplace participate in the assessment.

Develop and Document the Individualized Accommodation Plan

The employer will develop and document the individualized accommodation plan, including:

* Accessible formats and communication supports, if requested
* Workplace emergency response information, if required
* Details of how and when any other accommodations will be provided

The employer will provide the employee accommodation plan in a format that is accessible to the employee. In the event that the accommodation is denied, the employer will provide the employee with an explanation in a format that is accessible to the employee.

The employer will protect the employee’s personal information at all times.

Implement the Individualized Accommodation Plan

The employee will comply with the accommodation plan and perform their work accordingly. The employee will offer feedback to the employer, including whether the accommodation plan requires modification or is no longer required.

The employer will support the employee in implementing the accommodation plan

Review the Individualized Accommodation Plan

The employer will review and update an employee’s accommodation plan, if required, when:

* The employee workspace is modified or relocated
* The employee’s responsibilities have changed
* The employer is aware there are other charges that affect the accommodation
* The employee has requested a review

The employer may set a timeframe for the review rf an employee’s individualized accommodation plan (ie. on the three month anniversary date and in combination with regular employee reviews after that).

Appendix A: Individual Accommodation Plan Worksheet

Appendix A: **Individual Accommodation Plan Worksheet**

Employee’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Manager’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Workplace  barriers | Job related tasks/activities  affected by barriers | Is this an essential job requirement? |
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Sources of professional input into the individual accommodation plan (ie. human resources manager, union, family physician, specialists)

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Accommodation measures are to be implemented from (start date) to (end date). If no end date is expected, the next review of this accommodation plan will occur on (review date).

(The accommodation measure(s) should be reviewed regularly, for example, annually)

**Description of Accommodation Measure(s)**

Which job requirement(s) and related tasks require accommodation? (ie. employee persistently late for work due to medical reason)

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What are the objectives of the accommodation (what must accommodation do to be successful?)

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What accommodation strategies/tools have been selected to aid this task/activity? (ie. employer offered employee a flexible work schedule so that she could arrive at work later./)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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**Accessible Formats and Communication Supports**

Upon request, this information will be shared with the affected employee with consideration to their communication requirements.(ie. email only)

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**Roles and Responsibilities**

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| Outstanding actions to implement accommodation | Assigned to | Due date |
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**Additional Documents**

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| Document | Yes | No |
| Emergency Plan |  |  |
| Others (ie. Return to Work) |  |  |
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Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_