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**Multi Year**

**Accessibility Plan, 2019 - 2023**

**Final Progress Report**

March 2024

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**AODA Overview**

The Accessibility for Ontarians with Disabilities Act, or AODA, aims to identify, remove and prevent barriers for people with disabilities. The AODA became law on June 13, 2005 and applies to all levels of government, non profits, and private sec tor businesses in Ontario that have one or more employees (full time, part time, seasonal, or contract).

The AODA includes requirements that all organizations must meet, with deadlines specific to an organization’s type and size. The AODA gives government authority to set monetary penalties to enforce compliance with accessibility standards. The maximum penalties under the AODA include:

* A corporation/organization that is guilty can be fined up to $100,000 per day
* Directors and officers of a corporation/organization that is guilty can be fined up to $50,000 per day

The AODA complements, but does not supersede, the requirements of accessibility and accommodation described under the Ontario Human Rights Code.

**Four Core Principles of the AODA**

### DIGNITY: What does the principle of dignity mean?

Policies, procedures and practices that respect the dignity of a person with a disability are those that treat them as customers and clients who are as valued and as deserving of effective and full service as any other customer. They do not treat people with disabilities as an afterthought or force them to accept lesser service, quality or convenience.

Service delivery needs to take into account how people with disabilities can effectively access and use services and show respect for these methods.

### INDEPENDENCE: What does the principle of independence mean?

In some instances, independence means freedom from control or influence of others - freedom to make your own choices.

In other situations, it may mean the freedom to do things in your own way. People who may move or speak more slowly should not be denied an opportunity to participate in a program or service because of this factor. A staff person should not hurry them or take over a task for them if they prefer to do it themselves in their own way.

### INTEGRATION: What does the principle of integration mean?

Integrated services are those that allow people with disabilities to fully benefit from the same services, in the same place and in the same or similar way as other customers.

Integration means that policies, practices and procedures are designed to be accessible to everyone including people with disabilities.

Sometimes integration does not serve the needs of all people with disabilities. Alternative measures, rather than integration, might be necessary because the person with a disability requires it or because you cannot provide another option at the time. If you are unable to remove a barrier to accessibility, you need to consider what else can be done to provide services to people with disabilities.

### EQUAL OPPORTUNITY: What does the principle of equal opportunity mean?

Equal opportunity means having the same chances, options, benefits and results as others.

In the case of services, it means that people with disabilities have the same opportunity to benefit from the way you provide goods or services as others. They should not have to make significantly more effort to access or obtain service. They should also not have to accept lesser quality or more inconvenience.

**Integrated Accessibility Standards, Ont. Reg. 191/11**

Ontario businesses must follow the Integrated Accessibility Standards Regulation (IASR) toprevent and remove barriers for people with disabilities.

The IASR includes five standards in the areas of:

1. Information and communication
2. Employment
3. ~~Transportation~~
4. ~~Design of public spaces~~
5. Customer service

Nipigon Hospital does not provide transportation services, nor are they engaged in newly constructed or redeveloped public spaces. As of the time of writing this report, we are exempt from the transportation and design of public spaces standards.

**2019 - 2023 Multi-year Accessibility Plan Progress**

This progress report identifies our ongoing efforts new 2023 to prevent and remove barriers for people with disabilities as we ensure our compliance with the Accessibility for Ontarians with Disabilities Act, 2005 and the requirements of Ont. Reg. 191/11 Integrated Accessibility Standards Regulation

In 2019 the Senior Team participated in the development of a new five year Accessibility Plan. The process began with a review of achievements to date, the identification of previously identified opportunities yet to be completed and the review of the Accessibility Plans of similar organizations providing the same services for the purpose of identifying opportunities for improvement that may not have been considered.

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| 2019 | We sought input from a support person who works for an organization that provides services to disabled clients. As the organization makes use of the health care facility and services, this feedback would be most beneficial. Unfortunately, the support person did not respond. | | |
| 2019 - | The main entrance of the facility underwent significant redevelopment with the demolition of the unused tuck shop making way for an open, barrier free entrance.  Old heavy seating was replaced with seating that is not fixed. Seating options in the main entrance now include bariatric seating and hip chair seating. | | |
| 2019 - | Seating options in the Emergency department now include bariatric seating and hip chair seating. | | |
| 2019 - | Mail boxes, identified for the submitting of compliments and concerns forms, were placed strategically throughout the Hospital, along with anonymous feedback forms. | | |
| 2021 - | Outpatient departments of Diagnostic Imaging, Lab and Physio were renovated.   * The Lab underwent a complete renovation including widened doorways into the department and washroom. Previously the Phlebotomy/ECG room was two small areas and is now converted to one larger room for ease of accessibility. A handicap access button was installed at the washroom door. Inside the Lab, counter tops were rearranged to ensure chair height, equipment spacing and desk posture were ergonomically correct. * In the Diagnostic Imaging department, similar to the Phlebotomy/ECG room, two small change rooms were converted to one larger accessible change room. Carpeting was replaced with flooring. * In the Physio Department, carpeting was replaced with flooring. | | |
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**Integrated Accessibility Standards, Part I, General**

See - ADM 03, Accessibility Policies, Procedures, Plans and Progress Reports

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| **1.** | **Establish Accessibility Policies** | | | | | |
|  | * **develop, implement and maintain policies how to achieve accessibility through meeting its requirements in the regulation** * **include a statement of organizational commitment to meet needs of persons with disabilities in timely manner** * **prepare one or more documents describing the policies it developed** * **make available to the public and, upon request, in an accessible format** | | | | | |
|  |  | | | | | |  | |
| Accessibility Policies | | | Original  Date | | Reviewed / Revised  Date | | |
| ADM 01, Accessibility for Ontarians with  Disabilities Overview | | | 2005 | | 2009  2013  2015  2019 | 2010  2014  2017 | |
| ADM 02, Statement of Organizational  Commitment | | | 2003 | | 2004 | 2005 | |
| 2006 | 2007 | |
| 2008 | 2009 | |
| 2010 | 2015 | |
| 2015 | 2017 | |
| 2019 |  | |
| ADM 03, Accessibility Policies, Procedures,  Plans and Progress Reports | | | 2019 | |  |  | |
| ADM 04, Accessibility Standard - Information  and Communication | | | 2010 | | 2013  2015 | 2014  2017 | |
|  | | |  | | 2019 |  | |
|  | | |  | |  |  | |
| ADM 05, Accessibility Standard - Employment | | | 2010 | | 2013 | 2014 | |
|  | | |  | | 2015 | 2017 | |
|  | | |  | | 2019 |  | |
| ADM 06, Accessibility Standard - Customer  Service | | | 2010 | | 2009  2014  2017 | 2013  2015  2019 | |
| Related Policies | | | Original  Date | | Reviewed / Revised  Date | |
| ADM 04, Patient Relations Process Concerns &  Compliments | | | 2001 | | 2005  2008  2011  2016  2019 | 2006  2010  2014  2017  2021 | |
| ADM 13, Employee Education, Training and  Development | | | 1999 | | 2012  2017 | 2013  2019 | |
| ADM 56, Emergency Response Plan for  Employee with Disability | | | 2013 | | 2014  2017 | 2015 | |
| ADM 57, Procuring or Acquiring Goods,  Services or Facilities | | |  | | 2014  2017 | 2015  2019 | |
| 4-120, (Infection Control) Pet Visitation | | | 2007 | | 2017 |  | |
| OHS 42, Transitional (Modified) Return to Work  Program | | | 2003 | | 2006  2010  2014  2019 | 2008  2011  2018 | |
| PER 11, Individual Accommodation Plan for  Employee with Disability | | | 2013 | | 2014  2019 | 2018 | |
| PER 13, Performance Management | | | 1990 | | 2006  2015  2018 | 2009  2016  2019 | |
| **2.** | **Accessibility Plans** | | | | | |
|  | * **establish, implement, maintain and document a multi-year plan** * **review and update at least once every five years** * **make available to the public and, upon request, in an accessible format** | | | | | |
| Accessibility Plans | | | | Date of Plan | | |
| 1st Year Plan | | 2003 - 2004 | | Sep 2003 | | |
| 2nd Year Plan | | 2004 - 2005 | | May 2005 | | |
| 3rd Year Plan | | 2005 - 2006 | | Oct 2005 | | |
| 4th Year Plan | | 2006 - 2007 | | Nov 2006 | | |
| 5th Year Plan | | 2007 - 2008 | | unknown | | |
| 6th Year Plan | | 2008 - 2009 | | unknown | | |
| 7th Year Plan | | 2009 - 2010 | | unknown | | |
| Multi Year Accessibility Plan | | 2014 - 2018 | | Dec 2013 | | |
| Multi Year Plan / Progress Report | | 2014 - 2018 | | Dec 2014 | | |
| Multi Year Plan / Progress Report | | 2015 - 2018 | | Dec 2017 | | |
| Multi Year Accessibility Plan | | 2019 - 2023 | | Dec 2019 | | |
| Progress Report | | 2019 - 2023 | | Dec 2019 | | |

See - ADM 57, Procuring or Acquiring Goods, Services or Facilities

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| **3.** | **Procuring or Acquiring Goods, Services or Facilities** |
|  | * **incorporate accessibility design, criteria and features when procuring goods, services, or facilities** * **if it is not practicable to incorporate accessibility design, criteria and features, it shall provide upon request, an explanation** |

See - ADM 13, Employee Education, Training and Development

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| **4.** | **Training** |
|  | * **ensure that training is provided on the requirements of the accessibility standards on the Human Rights Code as it pertains to persons with disabilities** |

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| Training | Provider | Date |
| AODA for Hospitals and Health Care Organizations | Ontario Hospital Association  e-learning | 2010 |
| Working Together, The Ontario Human Rights Code and the Accessibility for Ontarians with Disabilities | NDMH  In House  Education / Quiz | 2014 |
| Ontario Human Rights Code and Disability | NDMH Policy | 2014 |
| History of the Ontario Human Rights Code | NDMH  In House  Education | 2015 |
| History of the Ontario Human Rights Code | NDMH Policy | 2015 |
| The Ontario Human Rights Code and the AODA: Part 1 Introduction | Surge Learning | 2018 |
| The Ontario Human Rights Code and the AODA: Part 2 The Code | Surge Learning | 2018 |
| The Ontario Human Rights Code and the AODA: Part 3 Understanding the Duty to Accommodate | Surge Learning | 2018 |
| The Ontario Human Rights Code and the AODA: Part 4 Applying Human Rights Principles | Surge Learning | 2018 |
| The Ontario Human Rights Code and the AODA: Part 5 Compliance and Enforcement | Surge Learning | 2018 |
| Access Forward Training for Accessible Ontario: Part 1 General Requirements | Surge Learning | 2018 |

Late in 2017, Nipigon Hospital purchased Surge Learning Management System as a tool for education and training. The following education was assigned via the LMS. Some of the education was provided by the LMS and some was developed in house pre 2017 but uploaded into the LMS.

The following education was selected as required education under the AODA and the Integrated Accessibility Standards Regulation.

* Accessible Customer Service
* CNIB Clear Print Guide
* Communicating with People with Disabilities
* Electronic Desk Magnifier
* Increase or Decrease Font Size on Computer Monitor
* Pocket Talker Amplifier

In **2019**, 0 staff completed accessibility education.

In **2020**, accessibility education appears be assigned to all staff. The percentage of successful completion was 74%.

0 staff completed Accessible Customer Service

71% staff completed CNIB Clear Print Guide

93% staff completed Communicating with People with Disabilities

93% staff completed Electronic Desk Magnifier

93% staff completed Increase or Decrease Font Size on Computer Monitor

93% staff completed Pocket Talker Amplifier

In **2021**, 0 staff completed accessibility education.

In **2022**, 72% of staff completed Accessible Customer Service education, which was assigned to all staff.

In **2023**, accessibility education appears be assigned to staff, as part of the orientation process. It was not assigned to any other employees. The percentage of successful completion was 65%.

86% staff completed Accessible Customer Service

36% staff completed CNIB Clear Print Guide

93% staff completed Communicating with People with Disabilities

100% staff completed Electronic Desk Magnifier

36% staff completed Increase or Decrease Font Size on Computer Monitor

36% staff completed Pocket Talker Amplifier

**Integrated Accessibility Standards, Part II, Information and Communication**

See - ADM 04, Patient Relations Process Concerns & Compliments

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| **5.** | **Feedback** |
|  | * **have a process for receiving and responding to feedback and ensure that the processes are accessible to persons with disabilities by providing and arranging for, upon request, accessible formats and communication supports** * **notify the public about the availability of accessible formats and communication supports with respect to the feedback process** |

The following is a clip from, the Hospital’s website (ndmh.ca) “Concerns” tab

We value the input of our patients, residents and families as well as our community partners. In compliance with the [Excellent Care for All Act](http://www.health.gov.on.ca/en/pro/programs/ecfa/legislation/act.aspx) and the Accessibility for Ontarians with Disabilities Act, Nipigon District Memorial Hospital would like to ensure ease of access for the public to share their concerns, compliments and feedback and can be submitted electronically or in writing using the [Feedback Form](http://www.ndmh.ca/upload/documents/adm-04-f-patient-relations-process.pdf).

If you wish to express a concern or compliment with respect to accessibility and/or while a patient/resident, please:

1. Talk with one of our employees
2. Ask to speak with the department supervisor, or Director of Care, whichever is applicable
3. Submit your comments via email to [admin@ndmh.ca](mailto:admin@ndmh.ca)
4. Finally, you can complete a comment or feedback by hand and submit it to:

              Administration Office

              Nipigon District Memorial Hospital

              125 Hogan Road, Box 37

              Nipigon, ON P0T 2J0

Any signed, written concerns will receive a notification of receipt within 7 days.

See - ADM 04, Accessibility Standard, Information and Communication

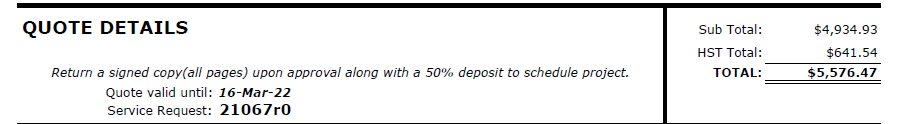
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| **6.** | **Accessible Formats and Communication Supports** |
|  | * **upon request, provide or arrange for the provision of accessible formats and communication supports for persons with disabilities in a timely manner that, in consultation with the person making the request, takes into consideration the accessibility needs due to their disability; and at a cost that is not more than the regular cost charged to other persons.** * **notify the public about the availability of accessible formats and communication supports** |

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| **7.** | **Emergency Procedures, Plans or Public Safety Information** |
|  | * **upon request and as soon as practicable, provide this information in an accessible format or with appropriate communication supports** |

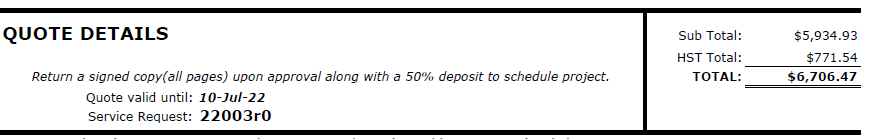
|  |  |
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| **8.** | **Accessible Website and Web Content** |
|  | * **by January 1, 2020 all internet and intranet websites and web content must confirm with WCAG 2.0, Level AA** |

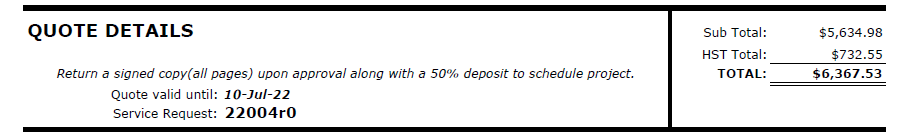
In March 2022, and again in Jul 2022, quotes were received from Sencia Canada in Thunder Bay. Unfortunately, due to several factors and financial pressures, the Hospital was not able to proceed.

Website



Website

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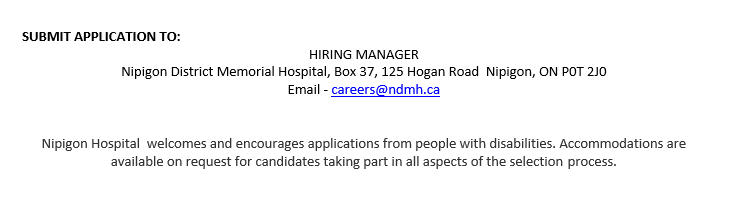
Intranet****

**Integrated Accessibility Standards, Part III, Employment**

See - ADM 05, Accessibility Standard, Employment

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| **9.** | **Recruitment, General** |
|  | * **notify its employees and the public about the availability of accommodation for applicants with disabilities in the recruitment process.** |

The footer of all job postings is illustrated below.



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| **10.** | **Recruitment, Assessment or Selection Process** |
|  | * **the employer shall notify job applicants, when a job applicant has been individually selected to participate in an assessment or selection process, the employer shall notify the individual that accommodations are available upon request in relation to the materials or processes to be used** * **in consultation with the person making the request consider the accessibility needs due to their disability** |
| **11.** | **Notice of Successful Applicant** |
|  | * **when making offers of employment, the successful applicant will be notified of its policies for accommodating employees with disabilities** |

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| **12.** | **Informing Employee of Support** |
|  | * **taking into consideration disabled employees accommodation needs, notify employees on the provision of job accommodations** * **taking into consideration disabled employees accommodation needs, update employees when there is a change to the provision of job accommodations** |

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| **13.** | **Accessible Formats and Communication Supports for Employees** |
|  | * **consult with an employee on the provision and suitability of accessible formats and communication supports in a timely manner on the information that is needed in order to perform their job, and on information that is generally available in the workplace** |

See ADM 56, Emergency Response Plan for Employee with Disability

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| **4.** | **Workplace Emergency Response Information** |
|  | * **provide an individualized workplace emergency response plan if the employer is aware of the need for accommodation** * **with consent of the employee, and as soon as possible after the employer becomes aware, provide workplace emergency response information to the person designated to provide assistance to the employee** * **review the emergency response plan when the employee moves to a different department, accommodation needs change, when reviewing general emergency response policies** |

See - PER 11, Individual Accommodation Plan for Employee with Disability

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| **15.** | **Documented Individual Accommodation Plans** |
|  | * **develop and have in place a written process for the development of documented individual accommodation plans for disabled employees including the following elements**   + **how the employee participates in the development of the plan**   + **how the employee is assessed on an individual basis**   + **how the employer can request an evaluation of an outside medical or other expert, at the employer’s expense to assist in determining if and how the accommodation can be achieved**   + **how the employee requests union or other representation in the development of the plan**   + **the steps taken to protect the privacy of the employee’s information**   + **the frequency of the review and updating of the plan**   + **if denied, the manner in which the reasons for the denial will be provided to the employee**   + **the provision and suitability of accessible formats and communication supports of the approved plan** * **plans shall, if requested, include information about accessible formats and communication supports, individualized workplace emergency response information, and any other accommodation provided** |

See - OHS 42, Transitional (Modified Return to Work Program

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| **16.** | **Return to Work Process** |
|  | * ***develop and document a return to work process for its employees who have been absent from work due to a disability and require disability related accommodations in order to return to work*** * **outline the steps the employer will take to facilitate the return to work of a disabled employee *who were absent because their disability required them to be away from work; and*** * **use of documented individualized accommodation plan** |

See - PER 13, Performance Management

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| **17.** | **Performance Management** |
|  | * **consider the accessibility needs of employees with disabilities, as well as individual accommodation plans, when using its performance management process in respect of employees with disabilities** |

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| **18.** | **Career development and advancement** |
|  | * **take into consideration the accessibility needs of its employees with disabilities as well an any individual accommodation plans** |

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| **19.** | **Redeployment** |
|  | * **take into consideration the accessibility needs of its employees with disabilities, as well as individual accommodation plans, when redeploying employees with disabilities.”** |

**Integrated Accessibility Standards, Part IV.2, Customer Service Standards**

See - ADM 06, Accessibility Standard, Customer Service

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| **20.** | **Establishment of Policies** |
|  | * **develop, implement and maintain policies how to achieve accessibility** * **provide in a manner that respects the dignity and independence** * **integrated with the provision of goods, services or facilities to others, unless an alternative measure is necessary** * **given an opportunity equal to that given to others to obtain, use and benefit from the goods, services or facilities***.* * **Communicate taking into consideration the person’s disability** * **Deal with the use of assistive devices** * **Prepare and provide documents available upon request** * **Post on website and by other methods as is reasonable** |

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| **21.** | **Use of Service Animals and Support Person** |
|  | * **If a person with a disability is accompanied by a guide dog or other service animal, the provider shall ensure that the person is permitted to enter the premises with the animal and to keep the animal with him or her, unless the animal is otherwise excluded by law from the premises** * **If a service animal is excluded by law from the premises, other measures need to be provided** * **If a person with a disability is accompanied by a support person, the provider shall ensure that both persons are permitted to enter the premises together and that the person with a disability is not prevented from having access to the support person while on the premises but only if, after consulting with the person with a disability and considering the available evidence, the provider determines that,**   + **a support person is necessary to protect the health or safety of the person with a disability or the health or safety of others on the premises; and**   + **there is no other reasonable way to protect the health or safety of the person with a disability and the health or safety of others on the premises.** * **the provider shall waive payment of the amount, if any, payable in respect of the support person’s admission to the premises or in connection with the support person’s presence on the premises.”** * **prepare and provide documents available upon request** |
| **22.** | **Notice of Temporary Disruptions** |
|  | * **if temporary disruption is in whole or in part, give notice of disruption to the public and posted in conspicuous place on premises, website and other, including reason expected duration and alternate facilities or services.** * **prepare documents setting out the steps that the provider will ensure are taken in connection with a temporary disruption** * **provide documents available upon request** |
| See - ADM 13, Employee Education, Training and Development | |
| **23.** | **Training for Staff** |
|  | * **training about the provision of providers goods, services and facilities shall be provided to:**    + **employees and volunteers**   + **those developing policies**   + **every other person who provides goods, services or facilities on behalf of the provider** * **training includes how to interact and communicate with:**   + **persons with various types of disability**   + **how persons who use assistive devices, guide dogs or service animals**   + **how to use the provider’s equipment or devices available**   + **what to do if the person with disabilities is having difficulty** * **training shall take place**   + **as soon as practicable**   + **on an ongoing basis with respect to changes**   + **maintain a record of training including names and dates** * **prepare a document that describes:**   + **training policy**   + **Summarizes the content of the training**   + **Specifies to whom it will be provided**   + **provide documents available upon request** |

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| **23.** | **Feedback Process** |
|  | * **process or receiving and responding to manner in which goods, services and facilities is provided and received** * **specify the actions that the provider will take if a complaint is received** * **feedback process is accessible by providing or arranging for provision of accessible formats and communication supports.** * **provide documents available upon request** * **posted in conspicuous place on premises, website and other, including reason expected duration and alternate facilities or services.** |
| **24.** | **Format Documents** |
|  | * **upon request, consult with, to determine the suitability of accessible format or communication support, at a cost that is no more than the regular cost charged to other persons, and provide documents** |

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