



## **Accessibility Plan**

### **Women's College Hospital**

**2017-2020**

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## Introduction

Women's College Hospital (WCH) is committed to offering a healthcare environment that assures individuals with disabilities equal access to hospital information, programs and services.

The Hospital has an Equity and Accessibility Steering Committee in place to support us in complying with the Accessibility for Ontarians with Disabilities Act (AODA), established by the Government of Ontario in 2005. This Steering Committee, made up of WCH leaders and staff, works to champion the WCH Accessibility Plan by promoting accessibility education and initiatives, as well as identifying and eliminating barriers for the benefit of patients, visitors and staff. The committee also reviews the hospital's Accessibility Plan and policies annually, in order to ensure these documents are up-to-date with current provincial accessibility requirements. The corporate Accessibility Plan is posted on the hospital's website at [www.WCH.ca](http://www.WCH.ca)

Making our information, programs and services accessible to all patients, visitors and staff is our legal responsibility and our ethical obligation as healthcare professionals. Our goal is to ensure we comply with all required legislation, and where possible, ensure we exceed those requirements.

Only by working together to learn, understand and comply with our responsibilities and by continually challenging ourselves to find new and better ways to support accessibility will we be able to provide equal access to high quality, patient and family-centred care for the people of our community and our region.

Women's College Hospital; (WCH) is also committed to the ongoing identification, prevention and removal of barriers to persons with disabilities. A barrier is anything that makes it challenging or impossible for a person with a disability to access a service, program or a building.

### **This could include:**

- A physical barrier, such as a feature of a building or outdoor space that presents a challenge for a person with a physical disability;
- An information or communication barrier that would make it difficult for a person to easily understand information, such as print that is too small to read; or
- A technological barrier, such as a website that does not support screen-reading software.

The Accessibility Plan is created in accordance with the Ontarians with Disabilities Act,

2001 (ODA) and the Accessibility for Ontarians with Disabilities Act, 2005 (AODA). The Plan is a multi- year document spanning five (5) years, and will be reviewed and updated annually as necessary.

In 2005, the government of Ontario passed the AODA, which requires that Ontario be an accessible province by 2025. To help public, private and non-profit organizations identify, prevent and remove barriers to accessibility; the AODA outlines accessibility standards in a number of areas, including:

- Customer service
- Information and communications
- Employment
- Transportation
- The built environment

The accessibility standard for customer service came into force in 2008. The next three standards, Information and communications, employment and transportation — have been combined into the Integrated Accessibility Standards Regulation (IASR). The IASR is now law and the requirements will be phased in over time. The standards for the built environment (for facilities and outdoor spaces) are still in development

# Objectives of the Accessibility Plan

This Plan:

- Describes the process by which the Hospital (through the Accessibility Steering Committee) will identify, prevent, reduce and/or remove barriers to persons with disabilities
- Outlines the process by which the status of each barrier is reviewed and monitored
- Outlines the process by which new barriers are identified and included in future Accessibility Plans
- Identifies policies to be developed per AODA requirements
- Describes training requirements for staff
- Describes how WCH will make the Accessibility Plan & Policies available to the public.

# WCH's Commitment to Accessibility Planning

Accessibility planning initiatives conducted by WCH compliment the hospitals broader “equity vision” and “*commitment to optimal health outcomes for diverse women and their families through community informed, **inclusive**, and responsive services*”, illustrated in the following graphic:

**Equity vision**

Our **commitment** to optimal health outcomes for **diverse women and their families** through **community informed, inclusive, and responsive services.**

**WCH**  
WOMEN'S COLLEGE HOSPITAL  
Health care for women | REVOLUTIONIZED

**commitment**

- All policies/practices at WCH incorporate values/principles of human rights, anti-racism & anti-oppression
- Resources allocated to ensure meeting change agenda and needs of women
- Advocates for external systemic change to improve health outcomes for all women

**diverse women & their families**

- Patient base reflects GTAs diverse communities at all levels of WCH staff, doctors & volunteers reflective of diverse communities

**community informed**

- Diverse communities inform all aspects of WCH with their expertise & experience, including WCH's advocacy efforts

**responsive services**

- Meets the varied needs with differential programs, services, research and education that acknowledge the impact of the social determinants of health on women's lives
- All volunteers, managers, staff and doctors are culturally competent

**inclusive**

- Culturally welcoming & barrier free

WCH intends to identify ongoing steps to integrate accessibility planning throughout other strategic, operating and redevelopment planning and budgeting initiatives. This will ensure not only meaningful outcomes and successful implementation at different stages of the accessibility planning process, but also obtaining Staff support and insights along the way.

# About Women's College Hospital

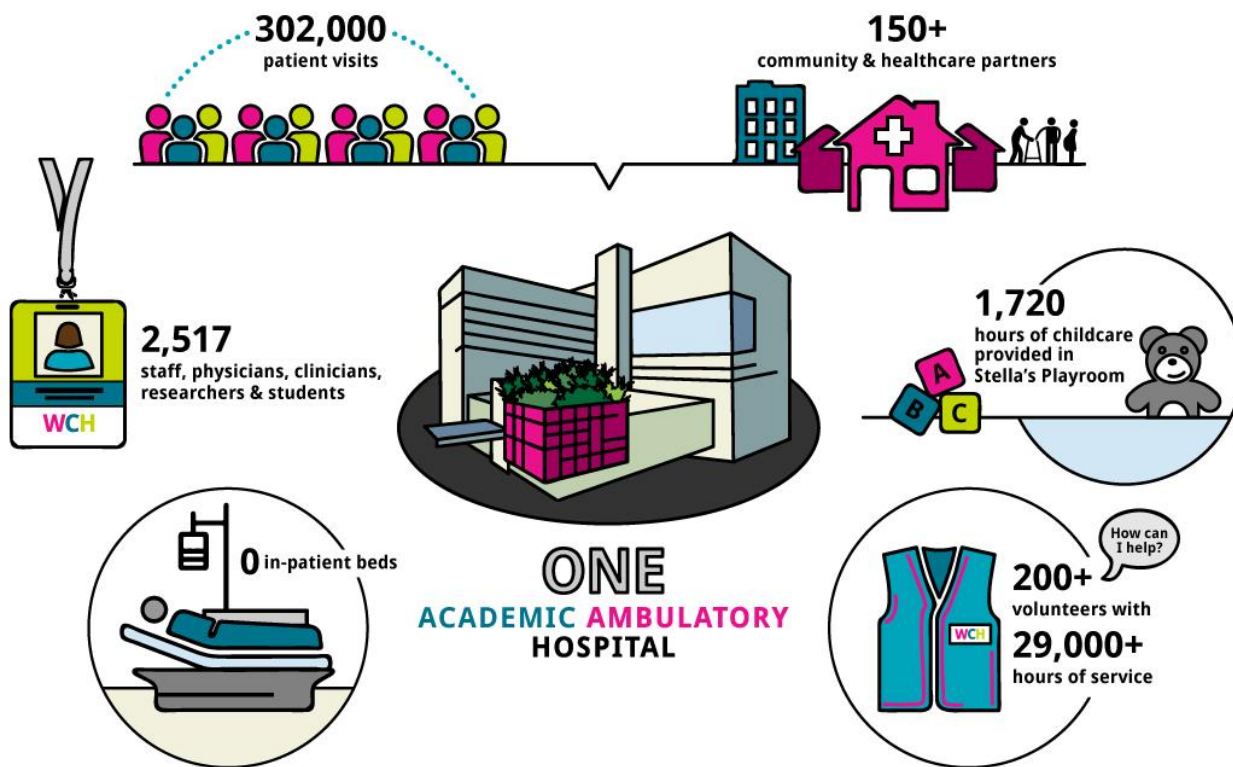
## REVOLUTIONIZING HEALTHCARE FOR A HEALTHIER, MORE EQUITABLE WORLD

Women's College Hospital is now a leader in health for women, health equity and health system solutions – a hospital designed to keep people out of hospital. We are developing ground-breaking innovations that address the most pressing issues related to population health, patient experience and system costs. We advocate for health equity because we know that a healthy society requires a level playing field where everyone has access to timely, high quality, efficient and compassionate care.

In this next great era for Women's College Hospital, we are building on an ambitious vision - to revolutionize healthcare for a healthier and more equitable world. We are achieving this bold objective as a unified organization, in partnership with our diverse communities – patients, family members, thought leaders, philanthropists, innovators and disruptors in government, community, academia and the private sector.

We see a future of **Healthcare Revolutionized** – where we are setting a new pace for radically redesigning healthcare. Like our founders, we aim to shift the balance of power, to confront gender and social inequities that threaten people's health, to bring virtual care into the mainstream and to reimagine how ambulatory healthcare services are delivered so we can provide substantial health system solutions and close the health gaps for all.

# WOMEN'S COLLEGE HOSPITAL BY THE NUMBERS\*



\*2016



# The Equity and Accessibility Steering Committee

WCH's Equity and Accessibility Steering Committee membership includes an Executive Sponsor and representatives from:

- Human Resources
- Volunteer Services
- Clinical Directors
- Clinical Managers
- Patient Relations
- Strategic Communications
- Occupational Health, Safety & Wellness
- Facilities Management & Operations community (Patient/Family)
- Security

The Equity and Accessibility Steering Committee conducts its functions under the following assumptions:

- Improving Equity and accessibility is a shared responsibility
- Team members will work cohesively with the IM/IT Team members will provide active communication and liaison between the Equity and Accessibility Team and their hospital department or community constituency
- Development of the WCH Accessibility Plan is mandated by the Accessibility for Ontarians with Disabilities Act, 2005 and is strongly supported by senior levels of administration at Women's College Hospital .

The Steering Committee welcomes input from people with disabilities and other individuals who are willing to provide their feedback regarding issues they have identified during their visits to WCH. Please contact us by email at [patientrelations@wchospital.ca](mailto:patientrelations@wchospital.ca)

# Status of Accessibility Legislation in Ontario

## Ontarians with Disabilities Act, 2001

In 2001, the Provincial government enacted the Ontarians with Disabilities Act, 2001 (ODA). This Act required organizations within the public sector (the provincial government, municipalities, hospitals, educational institutions and public transportation providers) to undertake activities aimed at reducing and eliminating barriers to persons with disabilities.

## Accessibility for Ontarians with Disabilities Act, 2005

In 2005, the Provincial government passed the Accessibility for Ontarians with Disabilities Act, 2005 (AODA). The AODA requires the development of accessibility standards in five areas: customer service; information and communications; employment; transportation and the built environment.

## Accessibility Standards for Customer Service

The first Regulation enacted under the AODA was Ontario Regulation 429-07— Accessibility Standards for Customer Service. Designated public sector organizations were to be in compliance by January 1, 2010 and submit a compliance report to the Provincial government by March 31, 2010. WCH submitted its compliance report in advance of the deadline, indicating it had addressed the requirements of the Regulation and had met its compliance obligations.

Goals — Customer Service Accessibility Standard	Status
Establish policies, practices and procedures for providing goods or services to person's with disabilities	√
Ensure that policies, practices and procedures are consistent with the core principles of independence, dignity, integration and equality of opportunity	√
Communicate with a person with a disability in a way that takes their disability into account	√
Establish a policy to allow people to use their own personal assistive devices to access our services	√
Allow people with disabilities to be accompanied by their guide dog or service animal in those areas of our premises that are open to the public, unless the animal is excluded by law	√
Permit persons with disabilities who use a support person to bring the person with them while accessing services	√
Train staff, physicians, volunteers and any other people who interact with the public on our behalf on a number of topics as outlined in the Customer Service Standards	√
Establish a process for people to provide feedback on how our organization provides care or services to people with disabilities and how to respond to their feedback and take action on their concerns	√
Provide notice when facilities or services that people with disabilities rely on are unavailable	√

## Integrated Accessibility Standards (IASR)

The IASR was enacted in July 2011. It includes a number of general and specific accessibility requirements in the areas of information and communications, employment and transportation the requirements have compliance dates ranging from when the IASR was enacted (July 2011) to the year 2021. The requirements apply to the public, private and not-for-profit sectors. The sections of the IASR that most impact WCH are those related to accessible information and communications, and employment. As WCH is not a provider of public transit, the transportation requirements do not apply.

The categories and requirements addressed in the Regulation (except those related to accessible transportation) are summarized below.

### General Requirements

- Development of an integrated accessibility standards policy;
- Development of a multi-year accessibility plan;
- Annual reporting on the progress of the multi-year accessibility plan;
- Training staff and volunteers on the requirements of the Regulation and the Ontario Human Rights Code, as it pertains to people with disabilities; and,
- Ensuring that accessibility considerations and features are reflected in procurement processes.

### Information and Communications

Organizations are required to create, provide and receive information and communications in ways that are accessible to people with disabilities. The specific requirements include the following:

- Ensuring that feedback processes are accessible, upon request;
- Providing accessible formats and communication supports, upon request;
- Providing publicly available emergency procedure, plans or public safety information in accessible formats, upon request; and,
- Improving the accessibility of websites and web content.

## Employment

Employers are required to provide for accessibility across all stages of the employment cycle and integrate accessibility into regular workplace processes. The specific requirements include the following:

- Notifying employees and the public of the availability of accommodation for applicants with disabilities in recruitment and assessment processes;
- Notifying successful applicants of the availability of accommodations;
- Informing employees of policies to provide support to employees with disabilities;
- Providing accessible formats and communication supports for employees with disabilities;
- Providing workplace emergency response information to employees with disabilities;
- Establishing processes to develop documented individual accommodation plans;
- Developing a return to work process for employees who have been absent from work due to a disability or who require disability-related accommodations to return to work; and,

Considering the accessibility needs of employees with disabilities and accommodation plans in performance management processes, when providing career development opportunities or when considering redeployment.

## Barrier-Identification methodologies

The Equity and Accessibility Steering Committee has used the following barrier-identification methodologies to identify issues and to create annual priorities for the Accessibility Plan.

- Staff feedback
- Website feedback via [patientrelations@wchospital.ca](mailto:patientrelations@wchospital.ca) email address
- Community Stakeholder consultations
- Periodic review of advances in accessibility-related products and/or trends

## Identified Barriers

The Equity and Accessibility Steering Committee continues to address barriers each year. Although some work has been done to eliminate barriers, the Group continues to look at alternative ways to ensure persons with disabilities are not faced with barriers.

### Identified Barriers include:

- Physical
- Informational
- Attitudinal
- Architectural
- Communication
- Technological
- Policies and Procedures

### The new hospital was designed to remove identified barriers including:

- Large, wide hallways free of clutter to allow easy movement
- Large buttons and voiceover on the elevators
- Door paddles
- Wayfinding plan
- Braille on wayfinding signs
- Accessible public washrooms on all levels of the Hospital
- TTY phones are available in two locations within the Hospital
- Parking improvements

## Previous WCH Accessibility Initiatives

Over the years, Women's College Hospital has been involved in a variety of accessibility initiatives related to addressing the needs of people with disabilities, whether staff, patients or visitors. This Accessibility Planning process and related initiatives will allow WCH to formalize these activities and to review and monitor achievements on an ongoing basis.

A sample of achievements and highlights of previous accessibility initiatives conducted by WCH, include:

Development of its annual Accessibility Plan and conducted a comprehensive Barrier Removal Action Plan, providing ongoing monitoring of activities and conducting annual updates;

Establishing a "fragrance-free" policy for facilities, beneficial to people with environmental sensitivities;

Exterior surface upgrades for main building, to allow safe passage for users of mobility aids and people with a vision loss;

Removal of redundant and improper interior signage (e.g., confusing messages) to assist all users with wayfinding;

Upgrading of power door operator controls at strategic locations, for easy use and visibility when approaching;

New office furniture provides important accommodations for staff with disabilities, including knee space below working surface for users of mobility aids, adjustable keyboards and ergonomic seating (e.g., with back support, arm-rest adjustable height). Additional improvements can be addressed over time through strategic procurement strategies;

Accessible seating, with arm rests and different sizes to accommodate users is in all waiting areas of the hospital

There is consistent provision and placement of information boards and notices, with key information in accessible print formats. This includes displays at elevators, currently mounted above 3"-11" from the floor which presents easy reach for most users.

Lobby reception desk is at accessible height

Hand sanitizer dispensers are mounted on the wall at an accessible height

Accessible washroom upgrades including: increasing available floor space for larger mobility devices; grab and transfer bars; accessible sinks with lever faucets and tilted mirrors; Lowered amenities (e.g., coat hook, soap and paper towel dispensers);

Door hardware was upgraded to lever handles, for high use staff and public areas, rooms and spaces, throughout Main building;



Actions

General Requirements

This section of the Regulation requires:

- Development of accessibility policies and a multi-year accessibility plan
- Incorporation of accessibility features and considerations in procurement processes
- Annual reporting on the progress of the multi-year plan
- Ensuring that staff and volunteers have been trained on the Integrated Accessibility Standards Regulation and the Ontario Human Rights Code

Regulatory Requirement	Compliance Deadline	Actions to be Taken	Status as of March 1, 2017
<p><b>Develop Accessibility Policies</b></p> <ul style="list-style-type: none"> <li>• Develop, implement and maintain policies, including a statement of organizational commitment</li> <li>• Make policies publically available</li> </ul>	<p>January 1, 2013</p>	<p>WCH has developed a policy that addresses the requirements in the Integrated Accessibility Standards Regulation (IASR) and includes a statement of organizational commitment.</p> <p>The policy is available on WCH's website.</p>	<p><b>Complete &amp; Compliant</b> Included in Dec. 31, 2013 Report.</p>
<p><b>Develop Multi-Year Accessibility Plan</b></p> <ul style="list-style-type: none"> <li>• Establish, implement, maintain and document a multi-year accessibility plan</li> <li>• Post multi-year accessibility plan on website and provide in an accessible format upon request</li> </ul>	<p>January 1, 2010</p>	<p>A multi-year accessibility plan that sets out how WCH will comply with requirements of the IASR has been developed.</p> <p>The plan is placed on WCH's website.</p>	<p><b>Complete &amp; Compliant</b> Included in January, 2013 Report.</p>

<p>Report annually on the multi-year accessibility plan</p> <ul style="list-style-type: none"> <li>• Prepare an annual status report on the progress of measures set out in the multi-year plan</li> <li>• Post annual status report on website and provide in an accessible format upon request</li> </ul>	<p>2014 &amp; Ongoing</p>	<p>Annual status report on progress of multi-year accessibility plan will be developed and shared with Senior Leadership and the Board of Directors</p>	<p>Ongoing</p>
<p>Incorporate accessibility in procuring or acquiring goods, services or facilities</p> <ul style="list-style-type: none"> <li>• Incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practical to do so</li> </ul>	<p>January 1, 2013</p>	<p>RFP template that Plexxus has adopted and that WCH will be adopting includes a section 3 titled Compliance with Accessibility Standards.</p>	<p>Complete &amp; Compliant Included in Dec. 31, 2013 Report.</p>
<p>Training</p> <ul style="list-style-type: none"> <li>• Ensure that training on the IASR and the Human Rights Code as it pertains to persons with disabilities is provided to employees, volunteers, persons who participate in developing policies and others who provide goods, services or facilities on behalf of the organization</li> </ul>	<p>January 1, 2013</p>		<p>Complete &amp; Compliant Hospital has made E-Learning available to employees, volunteers and persons who participate in developing policies on behalf of the organization. The Steering Committee is committed to updating IASR training as required and to communicate changes in accessibility requirements</p>

### Information and Communication Standards

This section of the Regulation includes requirements related to:

- Accessible feedback processes
- Accessible formats and communication supports
- Publically-available emergency procedures, plans, public safety information
- Accessible websites and web content

#### Feedback processes

- Ensure that processes for receiving and responding to feedback are accessible to persons with disabilities by providing/ arranging for accessible formats and communication supports, upon request
- Notify the public about the availability of accessible formats and communication supports

January 1, 2014

As part of the Accessible Customer Service Standard, WCH created a policy for feedback processes.

WCH's website currently has a statement that documents are available and can be made available in alternate formats upon request.

Committee is reviewing feedback methods and processes.

**Complete & Compliant**  
Included in 2013 Report.

Updates to the hospital's public website to be completed in 2013; emphasis on accessibility requirements/ enhancements as part of specified requirements.

Committee collects and reviews staff and patient feedback to prevent and remove barriers for persons with disabilities.

Feedback is collected from patients and families which are reported to the Steering Committee quarterly. Feedback is collected from staff via email.

A project is underway to be completed by June 2018 to enhance awareness of

			accessibility and to collect feedback in alternate formats from staff, patients, visitors and Community representative.
<p>Accessible formats and communication supports</p> <ul style="list-style-type: none"> <li>• Upon request, provide for provision of accessible formats and communication supports for persons with disabilities</li> <li>• Notify the public about the availability of accessible formats and communication supports</li> </ul>	January 1, 2015	<p>WCH's website currently has a statement that documents are available and can be made available in alternate formats upon request.</p> <p>Review how WCH notifies the public of communication supports available.</p>	<p>Complete &amp; Compliant</p> <p>Communications representative has joined the Committee. 2017/2018 focus will be Information and Communication; including ensuring all new web content meets AODA requirements.</p>
<p>Emergency procedures, plans or public safety information</p> <ul style="list-style-type: none"> <li>• Provide emergency procedures, plans or public safety information that are available publicly, in an accessible format or with appropriate communication supports, upon request</li> </ul>	January 1, 2012	<p>Documents can be provided in alternative formats upon request.</p> <p>Emergency procedures at WCH are not considered public documents.</p>	<p>Complete &amp; Compliant</p> <p>Included in October, 2017 Report.</p>
<p>Accessible websites and web content</p> <ul style="list-style-type: none"> <li>• Websites/content to conform to WCAG 2.0 Level AA</li> </ul>	January 1, 2015	<p>Review the website and work with IS team to determine the needs for WCH's website.</p>	<p>Complete &amp; Compliant</p>

Employment Standards

This section of the regulation includes requirements related to:

- Recruitment, assessment and selection
- Accessible formats and communication supports for employees
- Workplace emergency response
- Return-to-work processes
- Performance management, career development and redeployment

<p><b>Recruitment</b></p> <ul style="list-style-type: none"> <li>• Notify employees and the public about the availability of accommodation for applicants with disabilities in recruitment process</li> <li>• Notify job applicants when selected to participate in an assessment or selection process that accommodations are available</li> <li>• When making an offer of employment, notify successful applicants of policies for accommodating employees with disabilities</li> </ul>	<p>January 1, 2014</p>	<p>Review and update postings so they include appropriate wording so persons with disabilities are aware of the availability of accommodations.</p> <p>Update HR recruitment processes so applicants are made aware of the availability of accommodations.</p> <p>Review onboarding processes to ensure that policies related to accommodations are more freely shared with new hires.</p>	<p><b>Complete &amp; Compliant</b> All internal and external postings include accessibility statement.</p> <p>Internal and External application forms include a question pertaining to accessibility.</p> <p>Standard onboarding email includes language regarding accessibility.</p>
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<p>Informing employees of supports</p> <ul style="list-style-type: none"> <li>• Inform employees of policies to support employees with disabilities</li> </ul>	<p>January 1, 2014</p>	<p>Review onboarding processes to ensure that policies related to accommodations are more freely shared with new hires.</p> <p>Review and share accommodation policies with existing staff.</p>	<p><b>Complete &amp; Compliant</b> Accommodation Policy in HR, approved with input from Occupational Health and Safety and Wellness and posted in the HR Policy Manual.</p> <p>New employees are provided with information regarding accessibility at the time of hire (on-boarding phase) and provided with an opportunity to discuss any requirements with the Occupational Health Nurse.</p> <p>Steering Committee will work with Human Resources to provide education to staff on the accommodation policy.</p>
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<p>Workplace emergency response information</p> <ul style="list-style-type: none"> <li>Provide individualized workplace emergency response information to employees who have a disability, as required.</li> </ul>	<p>January 1, 2012</p>	<p>Emergency Response procedures are currently made available on the Intranet. They are not currently made available to public. The external website includes a statement that says: 'Accessibility documents can be provided by the Hospital upon request, and in alternate formats as required'.</p>	<p>Complete &amp; Compliant Included in Dec. 31, 2013 Report.</p> <p>Accessibility Steering Committee is partnering with emergency response committee to roll out communication and information to employees who require accommodation in the event of an emergency.</p>
<p>Documented individual accommodation plans</p> <ul style="list-style-type: none"> <li>Develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities.</li> </ul>	<p>January 1, 2014</p>	<p>Letters of Understanding are already in place for individuals who require accommodations for varying reasons.</p>	<p>Complete &amp; Compliant Process included with new Accommodation Policy (HR).</p>
<p>Return-to-work process</p> <ul style="list-style-type: none"> <li>Develop and have in place a return-to-work process for employees who have been absent from work due to a disability and require disability-related accommodations to return to work.</li> </ul>	<p>January 1, 2014</p>	<p>Return-to-work processes are in place.</p> <p>Review and update as required.</p>	<p>Complete &amp; Compliant In 2017, return-to-work and modified work processes are under full review, which includes assessment through an accessibility lens.</p>

<p>Performance management, career development and redeployment</p> <ul style="list-style-type: none"> <li>• Take into account accessibility needs of employees with disabilities and individual accommodation plans as part of performance management processes, when providing career development opportunities and considering redeployment.</li> </ul>	<p>January 1, 2014</p>	<p>Existing policies to be reviewed and updated as required.</p>	<p>Complete &amp; Compliant Performance Management policy approved March 2017.</p>
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## Next Steps

Throughout 2017 and onwards, the Equity and Accessibility Steering Committee will focus on:

- Reviewing and expanding committee membership where necessary; including securing a full-time patient/family representative to advocate a patient and family voice
- Enhancing communication and information-sharing with WCH employees, volunteers and physicians
- Establishing relationships with community partners on community-based Accessibility Committees
- Meeting the requirements of the IASR associated with training and accessible Communication
- Developing an annual update on the multi-year accessibility plan
- Reviewing existing accessibility procedures and updating them as required
- Supporting building projects, such as the plan to establish a fully accessible washroom on every floor
- Piloting accessibility-focused initiatives, such as foldable stadium seating in areas with long hallways as 'rest stops' for people

## Review and monitoring process

The Equity and Accessibility Steering Committee will meet a minimum of four (4) times annually. According to the Terms of Reference, the Accessibility Steering Committee functions to:

- Raise awareness of Equity and accessibility issues at WCH and facilitate identification of barriers to access by persons with disabilities
- Provide information and act as a resource to staff on issues related to accessibility for persons with disabilities
- Advocate for and recommend actions to prevent, reduce, and eliminate access barriers
- Prepare the annual Accessibility Plan as required by the new Accessibility for Ontarians With Disabilities Act, 2005
- Monitor access for disabled persons within the hospital, in partnership with Risk Management
- Audit accessibility measures to ensure sustained access

The Equity and Accessibility Steering Committee is responsible for monitoring and following up on recommendations identified in the annual Accessibility Plan. The Accessibility Steering Committee will also receive and review responses to complaints related to Equity and accessibility on a quarterly basis, and make recommendations for future action.

## Communication of the Plan

The WCH Equity and Accessibility Plan will be posted on the hospital website and the internal employee portal. Hard copies will be available through Patient Relations. On request, the plan can be made available in alternative formats, such as computer disk in electronic text, in large print or in braille.

A communication tool (i.e. brochure or pamphlet) will be developed to provide key accessibility information in one resource (i.e. how to obtain alternate formats of materials, where to find information, how to obtain interpreter services, where accessible parking is located etc.).