

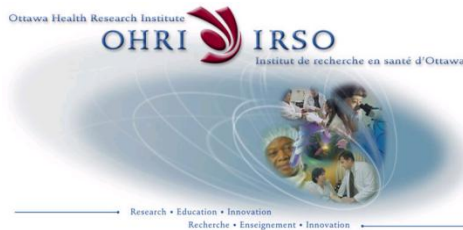


**The Ottawa
Hospital** | **L'Hôpital
d'Ottawa**



**UNIVERSITY OF OTTAWA
HEART INSTITUTE**

**INSTITUT DE CARDIOLOGIE
DE L'UNIVERSITÉ D'OTTAWA**



Annual Report on Accessibility 2013

The Ottawa Hospital and Affiliate Organizations

University of Ottawa Heart Institute
Ottawa Hospital Research Institute

This publication is available on the following web sites:

www.ottawahospital.on.ca

www.ottawaheart.ca

www.ohri.ca

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Executive Summary

The Integrated Accessibility Standards Regulation (IASR) 2011 of the Accessibility for Ontarians with Disabilities Act (AODA) 2005 requires all public sector organizations to develop multi-year accessibility plans that outline targets and strategies for the identification, removal and prevention of barriers for persons with disabilities. At The Ottawa Hospital (TOH) this was achieved in January 2013 when the 2013-2017 Multi-year Accessibility Plan was published and posted on the external website.

The legislation also requires all organizations to prepare an Annual Status Report relative to the multi-year accessibility plan, and to consult with people with disabilities within this process.

The **Annual Report on Accessibility 2013** documents the planning and implementation activities undertaken by the organization in 2013 in order to demonstrate both compliance with legislation (as outlined in the multi-year plan) as well as our firm and ongoing commitment to creating and expanding the accessibility of services and processes for patients, visitors, families, employees, physicians and volunteers.

The Ottawa Hospital and its affiliate organizations The University of Ottawa Heart Institute (UOHI) and the Ottawa Hospital Research Institute (OHRI) are committed to providing equal treatment to people with disabilities with respect to the use and benefit of services, programs, goods and facilities. We are committed to giving people with disabilities the same opportunity to access services and to allowing them to benefit from the same services, in the same place and in similar ways as other patients/clients. This commitment extends to patients, families, visitors, employees, physicians and volunteers with visible or non-visible disabilities.

The **Annual Report on Accessibility 2013** and **The Multi-year Accessibility Plan 2013-2017** are posted on The Ottawa Hospital website at www.ottawahospital.on.ca under Patients and Visitors/Accessibility, as well as on myHospital, the internal employee portal.

This report will be made available in alternate formats or with communication support, upon request. Please direct your enquiries to:

accessibility@toh.on.ca
(613) 798-5555 ext. 75535 or 75303
The Accessibility Awareness and Planning Program
The Ottawa Hospital Rehabilitation Centre
505 Smyth Road
Ottawa, Ontario
K1H 8M2

Introduction and Legislation

The Integrated Accessibility Standards Regulation (IASR) came into effect in June 2011 and outlines multiple compliance requirements for The Ottawa Hospital. The IASR contains new accessibility standards in the areas of:

- Information and Communication
- Employment
- Transportation
- The Built Environment

In addition, IASR contains several General Requirements that underpin the other areas. The IASR requirements are being phased in over a ten-year period with the objective of creating a fully accessible Province by 2025.

In December 2013, The Ottawa Hospital submitted the first IASR online compliance report directly to the Ministry of Economic Development, Trade and Employment as per Provincial reporting requirements. Within this report, TOH reported full compliance with the legislation.

The Annual Accessibility Report contains a summary of the actions taken in 2013 and the targets set for 2014 in order to maintain ongoing compliance with the IASR legislation. It also includes a summary of accessibility achievements that have occurred as a result of ongoing barrier-identification, prevention and removal in 2013.

The Annual Accessibility Report, like the Multi-year Accessibility Plan, is equally applicable to all employees and operations of The Ottawa Hospital that function in either the Ottawa Hospital Research Institute or the University of Ottawa Heart Institute environments. It is not, however, directly applicable within the independent operations of these affiliate organizations.

Accessibility Committee Structure

In 2012, The Ottawa Hospital created a multi-faceted work plan to ensure full compliance with the IASR on a go forward basis. The work plan is maintained by the Accessibility Awareness and Planning program and is monitored on a quarterly basis by the Corporate Accessibility Committee. In addition to this work plan, the Accessibility Committee monitors ongoing compliance with the Customer Service Standard of AODA, and acts as a mechanism for the identification, removal and prevention of accessibility barriers in the hospital environment.

In 2012-2013, The Accessibility Committee was co-chaired by Helen Zipes, Clinical Director of Rehabilitation and the Academic Family Health Teams and Brenda Morris, Accessibility Awareness and Planning Coordinator. In September of 2013 Ms. Zipes was replaced as co-chair by Denise Picard-Stencer, Director of Occupational Health and Safety.

The Accessibility Committee includes broad representation from multiple hospital departments and services, from both affiliate organizations and from the community at large through the participation of numerous community accessibility advisors. The role of the community advisors is to ensure that the work of the committee includes full and ongoing consultation with persons with disabilities.



TOH Accessibility Committee 2013

2013 IASR Compliance and Targets for 2014

The following is a summary of actions taken in 2013 to achieve compliance with the Integrated Accessibility Standards Regulation (IASR) of the Accessibility for Ontarians with Disabilities Act (AODA) at TOH.

Compliance deadlines appear in brackets and refer to January 1st of the given year.

^ Green	Indicates full compliance with the legislation, and may have ongoing or repeating components
+ Yellow	Indicates approaching compliance, with a detailed plan in place to ensure success
# Red	Indicates a delay in achieving full compliance on schedule

The * symbol indicates where an item has been produced in accessible format and in consultation with persons with disabilities.

The General Requirements

^ Section 3: Accessibility Policy (2013)

Achievements 2013:

- Corporate accessibility policy revised in 2012 to fully represent IASR requirements*

Targets for 2014:

- All implemented IASR changes to be reflected in related policy as it's developed*
- Policy Advisory Committee will add accessibility to list of stakeholders consulted when new policy is approved

^ Section 4: Accessibility Plans (2013)

Achievements 2013:

- 2013-2017 accessibility plan approved and posted on website*
- Plan monitored by Accessibility Committee (AC), June and September 2013
- Annual Report on Accessibility prepared prior to year-end*

Targets for 2014:

- Annual report 2014 due by year-end*

+ Section 5: Procurement #(2013)

Achievements 2013:

- RFP process and all new contracts have added accessibility language/references
- Training has occurred and online resources posted on MyHospital portal
- Purchasing and Capital Acquisition policy revised to reflect changes

Targets for 2014:

- Accessibility prompts in online PESC and purchase request process will launch with new software – expected early in 2014

^Section 6: Self-Service Kiosks (2013)

Achievements 2013:

- Training has occurred with Directors and Managers in Information Systems department
- Procurement of self-service kiosks is covered by accessibility changes made in TOH Purchasing. RFP process shared with TOH – compliant as per Section 5 above
- Accessibility prompt successfully integrated into online capital equipment purchase requests

^ Section 7: Training (2014)

Achievements 2013:

- Senior leaders, Directors and Managers informed of IASR and implications for TOH
- Targeted training in Purchasing, Information Systems, Organizational Development and Human Resources (advisors)
- myHospital page redeveloped as an accessibility training resource centre for staff
- Accessibility communications strategy delivered and ongoing (25+ publications etc.)
- Record of training kept current in Accessibility Awareness and Planning office
- New IASR training module for all staff launched on ELM – December 2013

Targets for 2014:

- Continue provision of targeted training and consultation throughout organization
- Maintain data re: compliance with IASR training module on ELM
- Identify and revise related policy as necessary*
- Provide IASR training to all TOH volunteers

Information and Communication Standards

^ Section 11: Accessible formats for providing feedback (2014)

Achievements 2013:

- Confirmed that TOH solicits and receives feedback from service users in multiple ways: NRC picker, patient advocacy, at accessibility committee, internal and external website, by phone, by mail etc.
- Options for providing feedback appear on external website and myHospital for staff

Targets for 2014:

- Statement re: availability of alternate formats upon request will be added to external and internal website as part of Section 12 (below)
- Identify and revise related policy as necessary*

+ Section 12: Accessible formats/communication support for all information, upon request (2015)

Achievements 2013:

- Information and Communications subgroup formed to determine action plan
- Identification of best practices for provision of alternate formats including accessible document creation, digital accessibility, plain language and provision of communication supports
- 12 staff from across the organization trained in accessible document creation in Word 2010
- Printing staff previously trained in production of accessible PDF's with WCAG 2.0
- Additional staff (2) attending introductory PDF training (December 2013)

Targets for 2014:

- Create centralized process for requesting alternate format by patients, visitors, volunteers, employees or physicians
- Track and monitor requests for alternate formats/communication supports
- Begin conversion of highly-used documents as identified by Accessibility Committee and subgroup using a "best practices" in accessibility approach
- Continue to build capacity in creation of accessible documents across organization
- Identify and revise related policy as necessary*

^ Section 13: Public safety information in accessible format (2012)

Achievements 2013:

- Confirmation that disaster/emergency planning information is not currently provided to the public (Note: It does not appear on external website)

Targets:

- Statement re: alternate formats will be added if/when public safety information or Emergency Preparedness information is posted on external website

^ Section 14: Website conforms to Web Content Accessibility Guidelines - WCAG 2.0 – Level A (2014)**Achievements 2013:**

- Identified that all content posted after January 1, 2012 will need to be fully accessible by 2021

+ Section 14: Website conforms to Web Content Accessibility Guidelines - WCAG 2.0 – Level AA (2021)**Achievements 2013:**

- Attendance at WCAG liaison meeting with other public sector organizations
- 12 staff from across the organization trained in accessible document creation
- Printing staff trained in accessible PDF creation
- Information and Communications subgroup of AC formed to create action plan

Targets for 2014:

- Develop staged plan to upgrade by 2021
- Identify and revise related policy as necessary*

Employment Standards

^ Section 22: Notify about availability of accommodations in recruitment process (2014)

Achievements 2013:

- Statement drafted for addition to all job postings
- Statement approved and implemented

Targets for 2014:

- Identify and revise related policy and notify all employees*

^ Section 23: Notify applicants of accommodations available during selection and consult (2014)

Achievements 2013:

- Strategies for notification and consultation with applicants during selection have been chosen, including scripting for managers and testing clerk in HR. Training for HR advisors (November 2013)
- Details of script finalized and implemented

Targets for 2014:

- Identify and revise related policy as necessary *

^ Section 24: Notify successful applicants of policies for accommodating employees with disabilities (2014)

Achievements 2013:

- Statement drafted for offer letters template, and will refer to TOH accommodation policy (under development)
- Statement approved and implemented

Targets for 2014:

- Identify and revise related policy as necessary*

^ Section 25: Inform employees of policies supporting those with disabilities (2014)

Achievements 2013:

- Occupational Health and Safety Services presentation currently includes information on supports for employees with disabilities

Targets for 2014:

- Accommodation and Return to Work policies to be finalized and approved*
- Accommodation and Return to work policy changes, when finalized, are communicated to all staff, as per policy protocol
- Update Corporate Orientation Occupational Health presentation as needed

+ Section 26: Provide alternate formats for workplace information, upon request #(2014)

Targets for 2014:

- Develop process for request of information in alternate formats by employees and implement (Information and Communication subgroup of Accessibility Committee)
- Statement to be placed on HR landing page of myHospital

^ Section 27: Provide workplace emergency response info to employees with disabilities (2012)

Achievements 2012-2013

- Emergency planning templates for managers include checklist for creating individual plans as needed
- Accessibility needs of employees highlighted in updating of departmental emergency plans across TOH in 2013 (Journal article, communications with Managers and Directors from VP)

+ Section 28: Develop written process for documented individual accommodation plans #(2014)

Achievements 2013:

- Draft Corporate Accommodation policy created

Target for 2014:

- Finalize policy and communicate to all employees*

+ Section 29: Develop a documented return-to-work process #(2014)

Achievements 2013:

- Draft Corporate Return to Work policy (as part of Accommodation policy) created

Target for 2014:

- Finalize policy and communicate to all employees

^ Section 30: Include accessibility considerations in performance management process (2014)

Achievements 2013:

- Integrated accessibility prompt questions into new ePerformance tool and probationary period assessment
- Accessibility components included in training on ePerformance tool

^ Section 31: Include accessibility considerations in career development and advancement (2014)

Achievements 2013:

- Integrated questions that ensure accessibility needs are identified relative to career development, within ePerformance tool
- Training as per Section 30

^ Section 32: Include accessibility considerations and individual accommodations in redeployment (2014)

Achievements 2013:

- HR presented process used at TOH to consider accessibility needs in redeployment to Accessibility Committee (September 2013)

Target for 2014:

- Identify and revise related policy as necessary*

Built Environment Standards

+ Sections 80.33 to 80.37: Design of Public Spaces – Accessible Parking (2016)

+ Sections 80.16, .22,.28: Design of Public Spaces – Exterior paths of travel and Outdoor eating areas (2016)

+ Sections 80.39 to 80.41: Design of Public Spaces – Service counters, fixed queuing guides, waiting areas (2016)

Achievements 2013:

- Directors and Managers of Facilities, Development and Parking at TOH informed of new standards

Target for 2014:

- As needed, build to standard

Initiatives and Achievements 2013

In addition to IASR implementation, the following initiatives and accessibility achievements have been realized at the Ottawa Hospital in 2013.

Accessibility Consultation

Accessibility consultation in 2013 has been provided primarily by the Accessibility Coordinator (Brenda Morris) and Occupational Therapy (Alex Priest-Brown). This input has been integrated into a number of hospital operations throughout 2013 and as awareness grows, so too does demand for this input.

Accessibility Coordinator:

- One RFP and one sole-source contract for sign language and cultural interpretation services
- Numerous patient advocacy scenarios and responses
- Corporate emergency planning update process

Occupational Therapy:

- Civic campus projects: Kaminski room, bed planning, wheelchair ports, cafeteria entrance
- Riverside campus projects: Family Health Team and Phlebotomy
- Full accessibility assessments: Heart Institute H2 area, General campus Haematology, 2 rental units for Bone Marrow Transplant unit

Research on Accessibility

In partnership with the University of Ottawa, 7 research projects have been supervised by the Occupational Therapy department (Alex Priest-Brown) since 2009. This research has resulted in the creation of a comprehensive Hospital Accessibility Measure (HAM). This tool provides guidelines for the design and renovation of many public spaces in a healthcare environment such as parking, signage, elevators, entrances and public washrooms.

It is expected that this research will be published in the professional literature and presented publicly within the next year.

Accessible Washroom Working Group

Background:

A subgroup of the Accessibility Committee was set up to respond to the insufficient number of accessible washrooms identified at the committee level and by ongoing patient and staff feedback.

Objective:

To identify priorities for change to existing washrooms and washroom signage, and to make recommendations in this regard to appropriate internal departments.

Composition:

Accessibility Committee members from Occupational Therapy, Occupational Health and Safety Services, Accessibility Awareness and Planning, Employees with accessibility needs and Facilities.

Achievements 2013:

Walkthroughs and review of plans of all 3 campuses: Civic, Riverside and General. Identification and communication of recommendations/priorities for change: Civic and Riverside campuses.

Results:

Renovations and improvements to accessibility of washrooms are reported below under Built Environment Improvements.

Targets for 2014:

Analyze results of General walkthrough and make recommendations for change. Consider needs for bariatric-friendly washrooms throughout the organization.



Accessible Washrooms Working Group

Accessibility Improvements in the Built Environment

In response to patient/staff feedback and as part of overall strategy to increase accessibility in the built environment at TOH, the following projects have been undertaken and completed:

Civic:

- New accessible washroom built across from MDCU on D1 (Aug. 2012)
- Ambulatory Care Phase 1 (Plastic Surgery Clinic): accessible seating selection and waiting room design, levered doors, bariatric washroom, patient ceiling lifts in exam rooms, accessible counter height, new family of signs installed
- Ambulatory Care Phase 2 (Wound, Vascular, ID): Accessible reception counter, lift in exam room, levered doors, new signage.
- A3: 6 ceiling lifts installed
- E5: 1 lift installed, all bathtubs removed to allow wheelchair access in patient washrooms
- Installation of levered door handles: E5, Bariatrics, D, E and F 7 renovations, Angio suite, A and B-1 renovations
- PACU: ceiling lifts installed and new family of signs
- New accessible washroom and ramp at Kaminski room on CPC (Parkdale Clinic) Level 1 (Dec 2013)



Ramp to Kaminski Room, Civic Parkdale Clinic

Automatic Doors Civic:

- Level 4A elevator lobby from Patterson Education center to A
- Level 4DB corridor doors
- Washroom doors outside Civic amphitheatre
- Ambulatory Care Phase 1 (Plastic Surgery Clinic) front door and clinic

Riverside:

- New Accessible washrooms – Main building level M, 4, 5, 7 (Summer 2013)

General (Including Rehabilitation Centre and Cancer Center):

- Installation of grab bars in public washroom, main entrance (October 2013)
- Modules (Thrombosis and Urology): 1 lift per clinic, bariatric seating, wayfinding assists in flooring, paint, wall photos. New family of signs installed
- Replacement of Admitting and Cash counters to meet ergonomic requirements
- Cafeteria: improved lighting, reserved seating, large new cafeteria sign
- W9 Fluoroscopy: enlarged door widths for larger stretchers
- Rehabilitation Centre: Planning process for bariatric patient room
- Rehabilitation Centre: Replacement of grooved tile flooring, Main Level

Automatic doors General:

- Cancer Center entrance
- Wells/Poulin Project main entrance and men's washroom
- D1/W11 door to accessible washroom
- Central warehouse, with motion sensor for high utility doors

Collaboration with Patient and Family Experience Team (PFET)**Achievements 2013:**

Accessibility representation at the Corporate PFET Committee including AAP Coordinator and 1 Community Accessibility Advisor. Participation in patient focus groups by accessibility advisors as needed.

Accessibility involvement (Coordinator and advisor) in the Way finding and Parking subgroup of PFET, aimed at identifying strategies and initiatives to assist patients and families with these issues. In collaboration with community partners from the Council on Aging, the Ottawa Seniors Transportation Committee and the Old Forge Community Center.

Targets for 2014:

Continued collaboration to support improved patient experience at TOH.
Creation of hard copy parking map/information brochure for General campus.

National Access Awareness Week Activities May 2013

Background:

In response to the identified need to address the lack of awareness and sensitivity regarding the needs of persons with disabilities, AAP and members of the Accessibility Committee participated in the Nursing Skills Fair at all three campuses in May 2013

Achievements 2013:

At the “Think Accessibility” booth participants had the opportunity to engage in common healthcare-related activities while wearing disability-simulating equipment (vision loss goggles, earplugs and earmuffs, limited use of hands and fingers).

Accessibility committee members, community advisors and AAP staff were available at the booth for support and questions.

Participant feedback indicated that the booth was successful in raising awareness of the impact of various disabilities on communication and interaction between caregivers and patients/families.



Accessibility Booth at Nursing Skills Fair for National Access Awareness Week 2013

Report Approval and Communication Strategy

In the preparation of this Annual Accessibility Report, the Accessibility Awareness and Planning program has conducted the following consultation activities:

- Input was sought from all Accessibility Committee members and advisors on content, progress toward objectives and other achievements for inclusion in the report
- Draft report was presented to the Accessibility Committee for review and feedback on December 2, 2013
- Report was presented to the Corporate Operations Committee, under the leadership of Cameron Love, Senior Vice-President of Clinical Programs, Planning and Support Services, for review, feedback and approval on December 4, 2013

The communication of this Annual Report will be achieved through postings on the external TOH website, as well as the internal MyHospital employee portal. It will also be posted on the external websites of both affiliate organizations.

Conclusion

The Ottawa Hospital and its affiliate organizations, the Ottawa Hospital Research Institute and the University of Ottawa Heart Institute, have made great strides toward greater accessibility for patients, visitors, families, employees, physicians and volunteers in 2013. With the Integrated Accessibility Standards Regulation acting as a primary driving force, the Accessibility Committee has focused its efforts on achieving legislative compliance through the development and implementation of best practices approaches to accessibility in the healthcare environment. In addition, there have been significant achievements generated by the ongoing process of identifying, removing and preventing barriers to access, with specific targets and action plans in this regard being created for the coming year.

The 2013 achievements in the areas of the built environment, research, education and training, accessible washrooms, collaboration and consultation have led The Ottawa Hospital to emerge as an accessibility leader in healthcare. As awareness of how accessibility contributes to patient and staff engagement expands, so too will the barrier-identification processes and responses that bring continuous improvement in accessibility for persons with disabilities. The Ottawa Hospital is committed to this ongoing process of improvement and to the accessibility initiatives and achievements that will be realized in 2014 and the years beyond.

Think Accessibility!

For More Information

For more information on this report, please contact:

The Accessibility Awareness and Planning (AAP) Program
The Ottawa Hospital
accessibility@toh.on.ca
613-798-5555 ext. 75535 or ext. 75303

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Please contact the AAP program at the above coordinates.