



**2019/2024**

## **ACCESSIBILITY PLAN**

# **HORNEPAYNE COMMUNITY HOSPITAL**

Updated July 2023

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## **EXECUTIVE SUMMARY**

The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is to benefit all Ontarians by, a) developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodation, employment, buildings, structures on or before January 1, 2025; and b) providing for the involvement of persons with disabilities, of the Government of Ontario and of representatives of industries and of various sectors of the economy in the development of the accessibility standards.

The hospital's Accessibility Program is intended to establish accessibility standards for all persons at the hospital. The report describes:

1. The measures that the Hornepayne Community Hospital has taken in the past, and
2. The measures that the Board proposes to take during the year to identify, remove, and prevent barriers to people with disabilities who use the facilities and services of the Hospital, including patients, staff, visitors, and other members of the community.

Again this year, the Hornepayne Community Hospital has committed itself to the continual improvement of access to hospital premises, facilities, and services for patients and staff with disabilities; the participation of people with disabilities in the development and review of its annual access plans; and the provision of quality services to all patients, visitors, and members of the community with disabilities.

The accessibility working group will endeavor to identify barriers to people with disabilities. Once the group has identified the significant barriers, recommendations will be made by the working group to the Board.

## **Aim**

The aim of this report is to describe measures that the Hornepayne Community Hospital will take in the years from 2019/2024 to identify, remove, and prevent barriers to all Ontarians in accessing hospital services, including staff, patients, and visitors.

## **Objectives**

This report:

1. Describes the process by which the Hornepayne Community Hospital will identify, remove, and prevent barriers to people with disabilities.
2. Reviews earlier efforts to remove and prevent barriers to people with disabilities.
3. Lists the facilities, policies, programs, practices, and services that the Board may review in the coming year to identify barriers to people with disabilities.
4. Describes the measures the Hornepayne Community Hospital will take in the coming year to identify, remove, and prevent barriers to people with disabilities.
5. Describes how the Board will make this accessibility plan available to the public.

## **Description of the Hornepayne Community Hospital**

The Hornepayne Community Hospital is a 20-bed facility that is located in Northern Ontario. It services a community population of approximately 1,000 citizens, with 65 employees. The Hospital is 29 years old.

It offers several health care services:

1. 24-Hour Emergency Department
2. Family Medicine Clinic
3. Diagnostic Services
4. Long Term Care facility
5. Acute Care beds
6. Hospice Suite

## **Vision**

Leading sustainable health care delivery in rural communities.

# **The Accessibility Working Group**

## **Establishment of the Accessibility Working Group**

The Chief Executive Officer in consultation with the Board of Governors formally constituted the accessibility working group in September of 2003.

The CEO authorized the accessibility working group to:

1. Conduct research on barriers to people with disabilities, regulations, policies, programs, practices, and services offered by the Hornepayne Community Hospital.
2. Identify barriers that will be removed or prevented in the coming year.
3. Describe how these barriers will be removed or prevented in the coming year.
4. Prepare a report on these activities, and after its approval by the CEO, make the plan available to the public.

## **Co-Ordinator**

Mrs. Pam Moore, Health Records/Privacy Lead, has been appointed as the Co-Ordinator of the group.

## **Members of the Working Group**

<b>Working Group Member</b>	<b>Department</b>	<b>Contact Information</b>
Pam Moore	Health Records	807-868-2442 Ext. 5127
Alison Morrison	Nursing	Ext. 5123

Linda Kozlowski  
Donna MacInnis  
Marilyn Verrino

Finance & HR  
Outpatient Clinic  
Support Services

Ext. 5150  
Ext. 5230  
Ext. 5158

## **HCH Commitment to Accessibility Planning**

The Hornepayne Community Hospital is committed to:

1. The continuous improvement of access to hospital services, facilities, and premises for patients, residents, staff, and visitors with disabilities.
2. The participation of people with disabilities in the development and review of its annual access plans.
3. The provision of quality services to all patients, residents, staff, visitors, and residents of the community with disabilities.

The Chief Executive Officer authorized the working group to prepare an accessibility plan that will enable the HCH to meet these commitments.

## **Recent Barrier-Removal Initiatives**

During the last several years, there have been several informal initiatives to identify, remove and prevent barriers to people with disabilities.

1. Automatic/push button door openers for the front of the facility
2. Door openings wheelchair accessible
3. Call bell system, at chair level in all public washrooms and patient rooms
4. Elevator to basement
5. Signs posted at all sight levels, in both French and English
6. Interpreters
7. Education to the staff and physicians on an informal level regarding communication tools with individuals with disabilities.
8. Individual education for individuals and their families, who have disabilities, services that are offered in the community, physician

- house calls, etc.
9. Installation of an additional after-hour's entrance buzzer/speaker/video which is low enough to be wheelchair accessible.
  10. Public washrooms have had "universal" washroom signs affixed to the doors.

## **Identification of Barriers**

The working group will consider several options to identify barriers:

1. Group brainstorming and Accessibility Committee issues
2. Patient issues, concerns, and/or suggestions received by discharge questionnaires
3. Employee input
4. Interview the physicians; collect information on their perspective, what they deem as barriers.

## **Review & Monitoring Process**

The working group will meet on an adhoc basis to review progress. At each meeting, the working group will remind staff, either through personal contacts or by e-mail, about their roles in implementing the plan.

## **Communication of the Plan**

Copies of this plan are available on our website and throughout the hospital and in all departments. The plan will be shared, communicated and discussed at all department and managers' meetings. The public will be made aware of the plan by leaving copies in the patient waiting areas of the hospital. Upon request the plan will be made available in the French language, computer disk,

and large print.

## **Individual Accommodation Plan Process**

The Hornepayne Community Hospital is committed to accommodating people with disabilities and will use the following process to identify and meet employee accommodation needs.

### **1. Recognize the need for accommodation**

Accommodation can be:

- Requested by the employee
- Identified by the employee's manager or human resources

### **2. Gather relevant information and assess individual needs**

The employee is an active participant in this step

- Information will be collected on the employee's functional abilities, not the nature of the employee's disability
  - The employee's personal information, including medical information, is kept secure and dealt with in a confidential manner. It will only be disclosed to individuals who need it to perform the accommodation process.
- The employee and his/her manager will work together to find the most appropriate accommodation
  - A medical or other expert may be engaged (at the Hospital's expense) to help determine if/how the employee's needs can be accommodated
  - The employee may ask a bargaining agent to participate in the process

### **3. Write an individual accommodation plan**

After identifying the most appropriate accommodation(s), the details will be documented in a written plan, including:

- What accommodation(s) will be provided
- How to make information accessible to the employee, including accessible formats and communication supports
- Employee emergency information and/or emergency response plan (if applicable)
- When the plan will be reviewed and updated

The manager will give the employee in an accessible format (if required), a copy of the individual accommodation plan, or written reasons for denying accommodation.

#### **4. Implement, monitor and update the plan**

After implementing the accommodation plan, the employee and his/her manager will monitor and review the plan to ensure that it is effective. Formal reviews and updates will take place on the mutually agreed upon, predetermined schedule in the employee's accommodation plan. If the accommodation is no longer appropriate, the employee and the manager will reassess the situation and update the plan.

The accommodation plan will also be reviewed and updated if:

- The employee's position changes
- The nature of the employee's disability changes