



## **ANNUAL ACCESSIBILITY PLAN**

**under**

***The Ontarians with Disabilities Act***

**Submitted to**

**Elizabeth Vosburgh,  
The Vice President of Human Resources and Quality**

**Prepared by:  
Wayne Goodwin, Director of Environmental Services  
Accessibility Working Group  
of the Joint Occupational Health and Safety Committee  
Northumberland Hills Hospital**

## **Executive Summary**

The purpose of the *Ontarians with Disabilities Act, 2001* (ODA) is to improve opportunities for people with disabilities, and to provide for their involvement in the identification, removal and prevention of barriers to their full participation. To this end, the ODA requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

This is the seventh plan prepared by the Accessibility Working Group of the Northumberland Hills Hospital. The plan describes (1) the measures that the hospital had taken in the past, and (2) the measures that the hospital will take during the year 2009–2010 to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of Northumberland Hills Hospital, including patients and their family, members, staff, health care practitioners, volunteers and members of the community.

This year, Northumberland Hills Hospital committed itself to the continual improvement of access to hospital facilities, policies, programs, practices and services for patients and their family members, staff health care practitioners, volunteers and members of the community with disabilities.

Northumberland Hills Hospital identified a number of barriers to persons with disabilities. The identification of barriers was based on a formal audit of the facility by the members of the Joint Occupational Health and Safety Committee and persons with disabilities from the community.

## **1. Aim**

This plan describes; (1) the measures that Northumberland Hills Hospital has taken in the past and (2) the measures that Northumberland Hills Hospital will take during the next year (2008-2009) to identify, remove and prevent barriers to people with disabilities who live, work in or use the hospital, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

## **2. Objectives**

The plan includes the following objectives:

1. Identifying, removing and preventing barriers to people with disabilities.
2. Reviewing efforts at Northumberland Hills Hospital to remove and prevent barriers to people with disabilities over the past year.
3. Listing the by-laws, policies, programs, practices and services that Northumberland Hills Hospital that identifies barriers to people with disabilities.
4. Describing the measures Northumberland Hills Hospital will take in the coming year to identify, remove and prevent barriers to people with disabilities.
5. Describing how Northumberland Hills Hospital makes this accessibility plan available to the public.

## **3. Description of the Northumberland Hills Hospital**

Opened in 2003, the Northumberland Hills Hospital (NHH) is located directly off Highway 401, approximately 100 kilometers east of Toronto. The 137-bed hospital delivers a broad range of services, including medical/surgical care, complex/long term care, rehabilitation, palliative care, obstetrical care and intensive care. NHH also sponsors a Community Mental Health Centre and an Assertive Community Treatment Team.

### **Additional services include:**

- Fully digitalized diagnostic imaging
- Three operating room suites and six birthing suites
- Ambulatory care and specialty clinics, including chemotherapy and dialysis
- Emergency and "Fast Track" services
- Videoconferencing

The hospital serves a catchment area known as west Northumberland County. A mixed urban and rural population of approximately 60,000 residents, west Northumberland is comprised of the Town of Cobourg, the Municipality of Port Hope and the townships of Hamilton, Cramahe and Alnwick/Haldimand.

NHH employs over 500 people and is an active member of the Central East Local Health Integration Network (LHIN). The current operating budget for the hospital is more than \$50 million.

## **Vision**

To excel as a community hospital.

## **Mission**

To provide excellent health care in an environment that promotes the dignity and well-being of everyone.

## **Values**

- Teamwork
- Compassion
- Respect
- Integrity
- Excellence

#### **4. Establishment of the Northumberland Hills Hospital Working Group**

The VP Human Resources and Quality authorized the Joint Occupational Health and Safety Committee under the direction of Wayne Goodwin to:

- Review and list by-laws, policies, programs, practices and services that cause or may cause barriers to people with disabilities;
- Identify barriers that will be removed or prevented in the coming year;
- Describe how these barriers will be removed or prevented in the coming year and
- Prepare a plan on these activities, and after approval by the President and CEO, make the plan available to the public.

#### **Coordinator**

The Vice President of Human Resources and Quality appointed Mr. Wayne Goodwin as the Coordinator at Northumberland Hills Hospital.

Mr. Goodwin is the Director of Environmental Services at Northumberland Hills Hospital and has been with the hospital for many years. He also has broad knowledge of accessibility including assistive devices through his previous work as Director of Materials Management.

#### **Members of the Accessibility Working Group**

The Members of the Occupational Health and Safety Committee were chosen to represent the members of the Accessibility Working Group. These members are as follows:

<b>Members Name</b>	<b>Position</b>	<b>Certified Member</b>	<b>Department</b>	<b>Telephone Extension</b>
Elizabeth J. Vosburgh (Co-chair)	Vice President of Human Resources and Quality	Yes	Human Resources	4019
Elaine Brown (Co-chair)	Medical Laboratory Technologist	Yes	Laboratory	4318
Wayne Goodwin	Director of Environmental Services	No	Engineering and Housekeeping	7774
Karen Bruton	RN	No	Clinical Practice Leader	4237
Andrea Doyle	RN	No	ER Registered Nurse	
Brenda Weir	Program Director	No	2B Medical Surgical, ICU, Surgical Suites, Pharmacy, Medical Surgical (2A) and Birthing Suites	4109
Myonne Allan (ad hoc)	Manager of Lab and Infection Control	No	Laboratory	4439
Michelle Verbeem (ad hoc)	Occupational Health and Safety	No	Human Resources	4814

Kelly Walker	Support Service Attendant	No	Support Services	3416
Linda Stevenson	Support Service Attendant	No	Support Services	3416
Don Ubell	Community Representative		Community	

## 5. Hospital Commitment to Accessibility Planning

The Joint Occupational Health and Safety Committee recommends to the Vice President of Human Resources and Quality of the Northumberland Hills Hospital that the following principles be adopted:

The Northumberland Hills Hospital is committed to:

- The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community;
- The participation of people with disabilities in the development and review of its annual accessibility plans;
- Ensuring hospital by-laws and policies are consistent with the principles of accessibility; and
- The establishment of an Accessibility Working Group at the hospital.

The Vice President of Human Resources and Quality authorized the Accessibility Working Group to prepare an accessibility plan that will enable Northumberland Hills Hospital to meet these commitments within available resources.

## 6. Recent barrier-removal initiatives

During the last several years, there have been a number of initiatives at Northumberland Hills Hospital to identify, remove and prevent barriers to people with disabilities.

### a) Review of complaints received by patient representative

A policy and process is in place to deal with informal and formal complaints. If a complaint is received on the unit, it is addressed immediately by the Team Leader. An audit was conducted regarding the number of formal complaints filed because of barriers to people with disabilities. In 2008/2009 there were a number of complaints around accessible parking and one complaint regarding the drop down supports in accessible washrooms.

### b) Site audit

The Joint Occupational Health and Safety Committee members conduct a site audit on a monthly basis. Barriers are noted and addressed.

A site audit of the facility was conducted in February 2009 and recommendations are attached. Representatives from the municipal committee including Don Ubell and Gerri Ford assisted with the audit.

### c) Barrier-free redevelopment planning

**The following plans were implemented in 2007/2008:**

Location	Barrier	Action Taken
1. ER	<ul style="list-style-type: none"> <li>• Entrance door from the main part of the hospital is easy to</li> </ul>	<ul style="list-style-type: none"> <li>• A hold open device was inserted.</li> </ul>

	open, but a hold open device would be helpful.	
<b>2. Policy and Practice Issues</b>	<ul style="list-style-type: none"> <li>• Questions were raised regarding dogs and where they could be walked etc.</li> <li>• Education to staff regarding visual impairments.</li> <li>• Utilize a variety of venues for communicating to persons with disabilities e.g. hearing impairments etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Information to the general public on how to treat persons with disabilities was included in some of our newsletters.</li> <li>• Signage is of a consistent format with darker borders.</li> <li>• A self learning package was developed for staff regarding diversity and bullying in the workplace. This package is on line for use on an individual basis or on a group basis.</li> </ul>
<b>3. Ambulatory Care</b>	<ul style="list-style-type: none"> <li>• Waiting area is congested and does not have room for a wheelchair or scooter.</li> <li>• Cannot access the window in a wheelchair or scooter.</li> </ul>	<ul style="list-style-type: none"> <li>• Plans were developed for waiting areas.</li> </ul>

**The following plans were initiated in previous years based on audits. Please note that this list is not all inclusive.**

#### **Signage**

- CNIB and Occupational Therapists were consulted on all signage. Clearer signage with more distinct borders will be introduced.
- As new signs are purchased, new easy to read formatting will be used

#### **Telephones**

- Barrier free telephones are available in the ER.

#### **Washrooms**

- Barrier free washrooms are available in all areas
- Visitor washrooms are all barrier free including barrier free entry and exit
- There are large locks placed on the bathroom doors for ease of use

#### **Education Centers**

- A practice was established that in the Education Centers that aisles will be large enough to accommodate assistive devices including wheel chairs and carts

#### **Lab Office**

- An external bell system allows persons in a wheel chair to notify staff of their presence.

#### **External Grounds and Entrance to the Building**

- The courtyards were designed for wheelchairs
- The front doors are sliding

#### **Parking Lots**

- Larger parking spots are available for persons with wheel chairs
- Van parking signs are posted.
- Wheel chair accessible curbs are highlighted in yellow

#### **Public Rooms**

- The cafeteria, Spiritual Care Centre and other public areas will have moveable tables and chairs
- Barrier free chairs are available throughout the facility
- Flooring in public areas is finished with a non slip barrier free material

#### **Doors**

- Doors throughout the facility are push button and barrier free

#### **Telephones**

- A variety of telephones that are barrier free are placed throughout the facility. These barrier free telephones include: hands free sets, volume adjustments and large number push pads.

#### **Emergency Measures**

- Fire pull stations are placed at a lower level
- The fire alarm system has a visual light to assist the hearing impaired
- The nurse call system allows for an intercom system to speak directly to patients from the nursing station

#### **Additional Initiatives**

- Mechanical lifts are available in each patient room
- TV system will have closed caption
- There is a "Falls Prevention Program" in place

#### **Changes to Practice**

- A system was developed in the ER to assist patients with hearing impairments. A ear symbol is distributed to patients who are deaf or hard of hearing. This allows the nurse to easily identify patients with hearing disabilities.

### **d) Policy review and development**

Policies and procedures are reviewed on a regular basis to ensure that the challenges that people with disabilities encounter are addressed in a proactive manner.

## **7. Barrier-identification methodologies**

The Accessibility Working Group used the following barrier-identification methodologies:

Methodology	Description	Status

Canvassing hospital committees	Each member of the Joint Occupational Health and Safety Committee serves as Accessibility Ambassadors and will take forward information regarding the action plans to the various committees that they represent.	Ongoing
Brainstorming exercise and accessibility audit	This legislation will be formally addressed on a monthly basis as an agenda item at the Joint Occupational Health and Safety Meetings. Each team will address accessibility issues on an annual basis.	Ongoing
Presentations to Staff	Education to staff will be presented on multiple levels including staff in service education and ongoing educational information placed in the Monday report and communicated at Team meetings.	<ul style="list-style-type: none"> <li>• July 2008 –Lexicon of appropriate terms was distributed</li> <li>• Instructions regarding helping a person with a visual impairment were reviewed</li> <li>• Instructions regarding helping a person with a hearing impairment were reviewed.</li> <li>• Ongoing educational information is provided to staff</li> </ul>
Focus Groups/Community Consultations	Members of the Municipal Committee will be invited to participate on this committee and assist with the audit.	Two members from the Municipal Committee participated in the audit

## 8. Barriers identified

In its review, the Accessibility Working group identified a number of barriers. Over the next several years, the Accessibility Working Group has decided to focus on a variety of barriers. The list is divided into six types: 1) physical, 2) architectural, 3) informational or communication-based, 4) attitudinal, 5) technological and 6) policies and practices.

Type of Barrier	Description of Barrier
1) Physical	A complete audit will be conducted in February 2009 A list of physical barriers will be developed and an action plan for their removal will also be developed



2) Architectural	A complete audit will be conducted in February 2009. A list of physical barriers will be developed and an action plan for their removal will also be developed.
3) Informational and Communications	The current strategy will be reviewed to ensure that persons with disabilities will have ongoing access to information and communications of the Northumberland Hills Hospital
4) Technological	A complete audit will be conducted in February 2009 A list of technological barriers will be developed and an action plan for their removal will also be developed.
5) Policies and Practices	Policies and practices supporting this legislation will be continually developed.

## 9. Barriers addressed 2009 - 2010

The Accessibility Working Group will address the following plan during the coming year.

Item Noted	Action Required	Comment
Cafeteria- tables not accessible	Purchase of adjustable table	Researching a new supplier
Changes to the parking lot front circle	A review of proposed changes to the parking lot to be conducted	Ongoing Spring 2009
Ambulatory Care	Not enough waiting area for scooters and not enough room for a scooter to go to the reception window.	Currently being addressed via future planning.
Signage is difficult to read for a person with a visual impairment.	Continue with our plan to change signage that has more distinct contrasts.	Ongoing review with Communications Department.
On Bridge Street, the railing goes behind the support pillar rather than around it.	Ensure that visually impaired person can navigate around pillars on Bridge Street.	Review options of tactile cue on existing rail or change railing

## 10. Review and monitoring process

The Joint Occupational Health and Safety Committee will review progress on a monthly basis. At each meeting, the Working Group of the committee will remind staff, either through personal contacts or by e-mail, about their roles in implementing their plan. Members of the working

group will also commit to updating the Quality Care Committee as requested by the President and CEO.

#### **11. Communication of the plan**

The hospital's accessibility plan will be posted on the Northumberland Hills Hospital website and hard copies are available upon request from the Communications Coordinator. On request, the plan can be made available in alternate formats such as computer disk in electronic text, in large print or on audio cassette. The plan will also be included within the hospital orientation package to new staff.