

PERTH AND SMITHS FALLS DISTRICT HOSPITAL

POLICY AND PROCEDURE

TITLE: Accessibility

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APPROVED BY: Senior Leadership Team

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Policy:

The Perth and Smiths Falls District Hospital is committed to eliminating barriers and improving access for persons with disabilities in a manner that respects dignity, independence, integration and equality of opportunity. The Perth and Smiths Falls District Hospital permits persons with a disability to use their own assistive devices when accessing services at the Hospital. These assistive devices may include: support persons, service animals, communication aids, mobility aids and cognition aids. This policy is intended to meet the requirements of the Accessibility for Ontarians with Disabilities Act, 2005 and all related standards and regulations introduced under this legislation. This policy addresses the accessibility requirements of Regulation 191/11 Integrated Accessibility Standards under the Accessibility for Ontarians with Disabilities Act, 2005.

Reasonable efforts will be made to ensure that:

- Persons with disabilities are provided equal opportunity to obtain, use and benefit from the Hospital services.
- Services are provided in a manner that respects the dignity and independence of persons with disabilities.
- Communications with a person with a disability are conducted in a manner that takes the person's disability into account.
- Persons with disabilities may use assistive devices, service animals or support persons as necessary to access the Hospital services unless superseded by other legislation.

Purpose:

The purpose of this policy is to outline practices and procedures in place at PSFDH to help identify and remove barriers that impede a person's ability to access care and services.

Definitions:

Assistive Device: technical aid, communication device, or medical aid modified or customized, that is used to increase, maintain or improve the functional abilities of people with disabilities.

Barrier: Defined by the Accessibility for Ontarians with Disabilities Act, 2005 as meaning aspects of society because of his or her disability, including a physical barrier, an architectural barrier, information or communication barrier, a technological barrier, an attitudinal barrier, a policy or a practice.

Disability (As defined by the Accessibility for Ontarians with Disabilities Act, 2005 and the Ontario Human Rights Code):

- Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes epilepsy, diabetes mellitus, a brain injury, and degree of paralysis, amputation, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device.
- A condition of mental impairment or a developmental disability
- A learning disability or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language
- A mental disorder, or
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

Service Animals: animals as defined in Ontario Regulation 191/11 s80.45(3). Examples include animals who have been individually trained to assist people with disabilities in the activities of daily living and include Guide dogs or animals that guide individuals who are legally blind. A service animal is also considered necessary if the person provides a letter from a physician or nurse confirming that the person requires the animal for reasons relating to the disability.

Support Persons: defined in Ontario Regulation 191/11 s80.45(3) as meaning another person who accompanies a person with a disability in order to help with communication, mobility, personal care or medical needs or with access to goods or services.

Individual Emergency Response Plan: A written, documented plan tailored to meet

the needs of a staff member with a permanent or temporary disability to aid and assist the individuals to respond to an emergency and/or to safely exit the building if necessary.

Procedure:

1. Policies and practices:
 - 1.1. Adhering to the Human Rights Code.
 - 1.2. Ensuring hospital by-laws and policies are consistent with the principles of accessibility.
 - 1.3. Incorporating inclusionary practice when designing, redesigning or renovating facilities.
 - 1.4. Supporting and consulting the Accessibility Advisory Committee of the hospital.
 - 1.5. Developing and maintaining a multi-year accessibility plan. The accessibility plan shall address the identification, removal and prevention of barriers to persons with disabilities and include a process to consult with persons with disabilities.
 - 1.6. Consulting with persons with disabilities in the development and review of its annual accessibility plans.
 - 1.7. Working towards the continual improvement of access to facilities, programs and services for patients and their family members/guests, staff, healthcare practitioners, volunteers and members of the community.
 - 1.8. Providing goods, services or facilities in a manner that respects the dignity and independence of persons with disabilities and takes into account their disabilities.
 - 1.9. Ensuring that the provision of goods, services or facilities to persons with disabilities are integrated with the provision of goods, services or facilities of others, unless an alternate measure is necessary, whether temporary or on a permanent basis, to enable a person with disability to obtain, use or benefit from the goods, services or facilities.
 - 1.10. Providing people with a disability with an opportunity equal to that given to others to obtain, use and benefit from goods, services or facilities.
 - 1.11. Communicating with persons with a disability in a manner that takes into account the persons' disability.
 - 1.12. Supporting the use of assistive devices by persons with disabilities to obtain, use or benefit from the goods, services or facilities or with the availability of other measures, if any, which enable them to do so.
 - 1.13. Preparing policies governing the provision of goods, services or facilities to persons with disabilities and on request provide a copy of any such document to any person.
 - 1.14. Providing posted accessibility policies in alternate formats, on request.
 - 1.15. Notifying persons to whom the hospital provides goods, services or facilities that these policies are available on request, and post the notification in a conspicuous place on the hospital premises.
2. Use of service animals and support persons
 - 2.1. Permitting at all times, unless otherwise excluded by law, a guide dog or service animal that is accompanying a person with a disability to enter the hospital premises and remain with the person with a disability.
 - 2.2. Ensuring that other measures are available to enable a person with a disability to obtain, use or benefit from the hospital's goods, services and facilities if their service animal is excluded from hospital premises by law.
 - 2.3. Ensuring that a person with a disability who is accompanied by support person can enter the hospital premises together and continue to have access to the support person while they are on the premises.

- 2.4. Consulting with a person with a disability and considering available evidence (necessary to provide the health and safety of the person with a disability or other on the premises; and there is no other reasonable way to protect the health of safety of the person with disability or others) before determining that a person with a disability is required to be accompanied by a support person when on the hospital premises.
 - 2.5. Giving notice in advance about the amount, if any, payable in respect to a support person for their admission to or presence on the premises.
3. Notice of temporary disruptions
 - 3.1 Providing public notification should there be any temporary disruption (planned or unexpected) of the facilities in whole or in part. Notice will include:
 - 3.1.1 Reason for disruption of service
 - 3.1.2 Anticipated length of duration
 - 3.1.3 Description of alternative facilities or services, if any is available.
 - 3.2 Preparing and posting in a conspicuous place on the premises, a document that sets out the steps the hospital will ensure are taken in connection with a temporary disruption and, upon request give a copy the document to any person.
- 4 Training of staff
 - 4.1 Providing employees, volunteers, those who participate in the developing of the hospital's policies, practices and procedures, and every other person who provides goods, services or facilities on behalf of the hospital with training about the provision of goods, services or facilities to persons with disabilities.
 - 4.2 Included in the training a review of the purposes of the Act, the requirement of this Regulation and instruction about:
 - 4.2.1 How to interact and communicate with persons with various types of disability;
 - 4.2.2 How to interact with persons with disabilities who use an assistive device, require assistance of a service animal or the assistance of a support person;
 - 4.2.3 How to use equipment or devices available on the hospital's premises or otherwise provided by the hospital that may help to provide goods or services to a person with disability;
 - 4.2.4 What to do if a person with a particular type of disability is having difficulty accessing the hospital's goods or services.
 - 4.3 Providing training as soon as practicable after a staff member is assigned their applicable duties.
 - 4.4 Ensuring training is ongoing in connection with any changes to policies and practices.
 - 4.5 Keeping records of the training provided including the dates on which the training was provided and the number of individuals to whom it is provided.
 - 4.6 Preparing a document that describes the hospital training policy, summarizes the content of the training and specifies when the training is to be provided; and on request, give that document to any person.
 - 4.7 Provide annually or more often as required, the opportunity for staff to self-disclose a disability, whether permanent or temporary, which may affect their ability to respond or escape from an emergency and to work with the employee to create a written and documented Individual Emergency Response Plan.
- 5 Feedback process required

- 5.1 Maintaining a feedback process for receiving and responding to feedback about the manner in which goods, services or facilities are provided to persons with disabilities; and the feedback process.
 - 5.2 Specifying in the feedback process the actions the hospital will take if a complaint is received.
 - 5.3 Ensuring the feedback process is accessible to persons with disabilities by providing, or arranging for accessible formats and communication supports, on request.
 - 5.4 Making information about the feedback process readily available to the public.
 - 5.5 Preparing a document describing the hospital's feedback process, and on request, give that document to any person.
- 6 Format of documents
- 6.1 Ensuring that a person with a disability, upon request, will be provided with or have arrangements made for the provision of a required Customer Service Standards document or the information in that document in an accessible format or with communication support. The response to the request will be:
 - 6.1.1 in a timely manner that takes into account the persons accessibility needs due to disability; and
 - 6.1.2 at a cost that is no more than the regular cost charged to other persons.
 - 6.2 The hospital will consult with the person making the request in determining the suitability of an accessible format or communication support.

Relevant Policies:

Patient Complaint Policy
Service Animals
Pet Therapy
Pet Visitation
PSFDH Patient Rights and Responsibilities

References:

Sunnybrook Hospital Accessibility Policy
Kingston Health Sciences Centre Accessibility Policy
Accessibilities for Ontarians with Disabilities Act 2005
Regulation 191/11 Integrated Accessibility Standards under the Accessibility for Ontarians with Disabilities Act 2005
Human Rights Code, R.S.O. 1990, c. H. 19