

**CORPORATE POLICY & PROCEDURE
PROVIDING A BARRIER-FREE ENVIRONMENT
ROHCG
CORP II-i – 150**

PROVIDING A BARRIER-FREE ENVIRONMENT			
SECTION: II-i ADMINISTRATION - Leadership		NO: 150	
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1. PURPOSE:

To outline the measures the Royal Ottawa Health Care Group (ROHCG) uses to comply with the *Accessibility for Ontarians with Disabilities Act, 2005 (AODA)*, the *Integrated Accessibility Standard Regulations* and the *Ontario Human Rights Code*.

2. POLICY STATEMENT:

In keeping with our Mission, Vision and Value statements, the ROHCG recognizes and respects the diversity of our patients, visitors and staff. We serve a growing community of diversity and welcome the involvement of all individuals in our organization. Our leadership, our patient services and our employment practices demonstrate respect of diversity. The ROHCG will, whenever possible and reasonable, implement measures for the identification and removal of barriers with respect to goods, services, facilities, accommodation, employment, buildings, structures, premises, or such other things. Specifically, this identification will follow the guidelines within the *AODA*.

3. SCOPE:

This policy applies to all patients, staff and visitors and to all physical sites of the ROHCG.

4. GUIDING PRINCIPLES:

Recognizing the principles of Dignity, Independence, Integration and Equal Opportunity are core values in our interaction with the population we serve, the ROHCG will endeavor to:

- Recognize diversity as a fundamental characteristic of our organization and the communities we serve;
- Respect the diversity of the people we work with and serve acknowledging that all people are equal in dignity and rights;
- Reflect diversity throughout our organization;

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- Respond to the diversity of our organization and the communities we serve in a manner that is free from discrimination; that provides for responsible accommodation of people's diverse needs and assures sensitive, appropriate and fair treatment.

The ROHCG is responsible to the population we serve and will endeavor to:

- Address all barriers to service access for our patient population within our resource allocations;
- Provide specific training/education to staff on the diversity of our patients and impact on care;
- Integrate cultural health practices into care processes;
- Offer an interpreter service for all patients as available.

The ROHCG is committed to being a fair and equitable employer and will endeavor to:

- Support diversity in our workforce at all levels and will not tolerate any form of discrimination and strive to accommodate the special requirements of staff;
- Proactively undertake equity initiatives that will recognize and support the needs of a diverse workforce including diversity education and training;
- Create a work environment where all staff contributions are valued, where differences and individuality are celebrated and where every person is treated with dignity and respect;
- Recognize the need for a balance among workplace, personal and community responsibilities;
- Foster positive, co-operative relationships among the managers, staff and staff representatives;
- Strive to assume a leadership role in the community in order to demonstrate our commitment to workplace equity and diversity.

All discussions, decisions and determinations in regards to providing a barrier free environment are made in a collaborative, transparent manner, ensuring inclusiveness of all parties involved.

5. DEFINITIONS:

Accessible Customer Service: includes various forms of customer service – in person, telephone, electronic, mail, oral, visual, written; delivered by staff, volunteers or third parties.

Barrier: anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

Disability:

- a) 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 diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, 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,
- b) a condition of mental impairment or a developmental disability,

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- c) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d) a mental disorder, or
- e) an injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act, 1997*.

Diversity: unique characteristics exhibited by individual(s) or group(s) including but not limited to dimensions of race, ethnicity, language, socio-economic status, class, gender, religion, sexual orientation, disability, and every other difference(s).

Goods: items, commodities or related deliverables that are consumed during the provision of service or care.

Guide Dog: is defined in section 1 of the AODA and means a dog trained as a guide for a blind person and having the qualifications prescribed by the regulation.

Service Animal: an animal described in subsection (9) of the AODA. An animal is a service animal for a person with a disability:

- a) if it is readily apparent that the animal is used by the person for reasons relating to his or her disability; or
- b) 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 Person: in relation to a person with a disability, another person who accompanies him or her in order to help with communication, mobility, personal care or medical needs or with access to goods and services. This assistance is outside of the parameters provided by ROHCG staff during the course of their prescribed duties/roles.

Workplace: “means any land, premises, location or thing at, upon, in or near which a worker works” (*Occupational Health and Safety Act, R.S.O. 1990, c. O.1*).

6. PROCEDURE:

6.1 The purpose of the AODA is to achieve accessibility with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises in Ontario on or before January 01, 2025. The *Act* applies to organizations of all kinds (public, private, profit, non-profit, large, small), including hospitals, and requires the annual development of an Accessibility Plan to address barriers for individuals with disabilities. Common and sector-specific standards will be implemented by regulation: customer service, transportation, information and communications, built environment and employment.

6.1.1 The ROHCG’s Accessibility Plan will identify barriers for individuals with disabilities and set priorities for barrier removal; report on measures taken to consider the needs of those with disabilities and; outline plans for the coming year.

6.1.2 The ROHCG endeavours to provide an environment for staff that recognizes individual needs regarding accessibility issues during emergency situations. All staff with identified disabilities will have an individualized emergency protocol developed.

<http://oreo.rohcg.on.ca/departments/ohs/Resources-FormsTools.cfm>

The ROHCG is committed to excellence in serving all patients/clients including individuals with disabilities and will carry out its functions and responsibilities in the following areas, Communication, Assistance and Physical Barriers.

6.2 Communication: The ROHCG will take into consideration the nature of the individual’s disability in all forms of communication.

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- 6.2.1 Telephone services:** The ROHCG is committed to providing fully accessible telephone services to our patients, clients and staff.
- 6.2.2** The ROHCG will offer to communicate with individuals by e-mail, and/or relay services if telephone communication is not suitable to their communication needs or is not available.
- 6.2.3** The ROHCG is committed to providing accessible invoices to all individuals. For this reason, invoices will be provided in the following formats, upon request: Hard copy; large print; Braille or; email. The ROHCG will answer any questions patients/clients may have about the content of the invoice in person, by telephone or email.
- 6.2.4** The ROHCG will make all reasonable attempts to provide the community it serves with documentation of general information in alternate formats that are readily accessible to all (*CORP II-I 151 – Accessible Formats*).
- 6.2.5** Information about the ROHCG's feedback process will be available to the public. Feedback regarding the way the ROHCG provides services to individuals with disabilities can be made by email, in person, via telephone, and/or feedback card. The ROHCG will respond to this feedback and take appropriate action.
- 6.2.6** Concerns, questions or complaints regarding this policy will be addressed through Director-Occupational Health and Safety Services (OHSS) and may be made by email, verbally or in writing.
- 6.2.7** All policies, practices and procedures for providing accessible customer service and meeting other requirements set out in the Standards will be documented in writing. The ROHCG will publish this information on the public website and it will be made available to patients/clients on request. When providing required documents to an individual with a disability, the information will be provided in a format that takes into account the individual's disability.

6.3 Assistance:

- 6.3.1 Assistive devices:** Individuals accessing ROHCG services are entitled to use their own personal assistive devices to access services.
- 6.3.2** Upon admission to ROHCG inpatient programs/units individuals, and on any care provision changes, will be assessed and determination will be made as to the necessity for additional equipment, aids and/or support beyond what they are currently using.
- 6.3.3** Individuals with disabilities are permitted to be accompanied by their guide dog or service animal in those areas of the ROHCG open to the public, unless such animal is excluded by another law. If excluded by law, other measures will be used to provide services to the person with a disability.
- 6.3.4** Individuals with a disability who use a support person are entitled to bring that person with them while accessing services at the ROHCG. At no time will an individual with a disability who is accompanied by a support person be prevented from having access to his or her support person while on ROHCG premises. Accommodation for the support person to attend to the individual must be operationally plausible, taking into consideration the safety of the individual, other patients, staff and visitors.
<http://oreo.rohcg.on.ca/programs-and-service-teams/accessibility/Resources-FormsTools.cfm>

6.4 Physical Barriers: Notices will be provided (in both Official Languages), when facilities or services that individuals with a disability rely on are temporarily disrupted. Such notices will include information about the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if any, that are available. The notice

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will be placed at all public entrances and service counters on ROHCG premises. In addition, any disruptions will also be posted on the Accessibility pages on both the internal and external websites.

6.5 Training: The ROHCG will provide training to all staff who deal with the public on their behalf, and all who are involved in the development and approval of Accessibility policies, practices and procedures whether or not they are directly involved in providing care and/or services. This mandatory e-learning training will be provided annually to current staff and at orientation for new staff. Staff will also be notified by email and printed updates when changes are made to these policies, practices and procedures. Training will include but will not be limited to the following:

- The purposes of the *AODA, IASR and OHR Code* and the requirements of the associated legislation.
- How to interact and communicate with individuals with various types of disabilities.
- How to communicate with patients/clients over the telephone in clear and plain language and to speak clearly and slowly.
- How to interact with individuals with disabilities who use an assistive device or require the assistance of a service animal or a support person.
- What to do if an individual with a disability is having difficulty in accessing the ROHCG.
- ROHCG policies, practices and procedures relating to the way care and/or services are provided to individuals with disabilities

6.6 Evaluation: The Director-OHSS, in collaboration with the ROHCG Accessibility Committee, will ensure that a compliance plan that addresses barriers is developed, monitored and communicated to all staff on a yearly basis. The ROHCG Accessibility Committee will prepare an annual report with the outcomes from the compliance plan which will include progress made and areas still requiring improvement. In addition, results from ongoing monitoring of complaints received and resolution of the same will be included. These reports will be made available to the public via external website posting.

7. RELATED PRACTICES AND / OR LEGISLATIONS:

Canadian Charter of Rights and Freedoms (1982)
Accessibility for Ontarians with Disabilities Act 2005, O.R. 19/11
Mental Health Act (2001)
Public Hospitals Act
Ontario OH&S Act and Regulations
Ontario Human Rights Code
Health Care Consent Act, 1996
Personal Health Information Protection Act, S.O. 2004,
Personal Information and Protection of Electronic Documents Act, S.C. 2000,
Building Code Act, 1992, O.R. 368/13

8. REFERENCES:

Accessibility for Ontarians with Disabilities Act, 2005. Taking a close look at the Standards: Impact and Implications. Ontario Hospital Association Conference November 17, 2008. Toronto, ON

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9. APPENDICES: N/A