



Accessibility

Lennox & Addington County General Hospital Accessibility

Annual Status Report

of the
LACGH 2014-2019 Accessibility Plan

August 2017

Prepared By: The Lennox & Addington County General Hospital
Accessibility Working Group



Overview

The Lennox & Addington County General Hospital continually strives to improve quality of services and customer satisfaction. Accessibility to our services is important to us and consideration to persons with disabilities is always a priority. The following are initiatives taken in the past 36 months and strategies planned for the next year to improve accessibility and help us meet the standards set out in the AODA.

WHAT HAVE WE DONE?

Standard/Barriers	Completed
1. A pocket talker has been purchased to assist patients who are hard of hearing.	Sept 2016
A second Pocket Talker has been purchased and a sign out system set up by the Information Desk.	June 2017
2. Information and Communication:	
<ul style="list-style-type: none"> Emergency procedures have been revised and posted on the hospital intranet for staff. Can be viewed in larger font size. Emergency Information is posted in the patient handbook and on the hospital website in accessible format. 	July 2017
<ul style="list-style-type: none"> Notice informing clients that information can be made available in an accessible format is posted on the patient handbook, staff orientation binder and on the hospital website under the Accessibility Tab. 	Sept 2015
<ul style="list-style-type: none"> New staff receive one-on-one training on how to access information and how to request information in an accessibility format that meets their needs. Instructions also included in the orientation package which all new employees receive during orientation. 	Ongoing
<ul style="list-style-type: none"> Update on Accessibility standards including special accommodation to employees are posted in the hospital newsletter and have been distributed to staff, physicians and board members. Policies have been updated. Included in the orientation package for all new staff. 	Sept. 2015
<ul style="list-style-type: none"> Job postings both internal and external include statement "We accommodate applicants with disabilities during the selection process. Applicants requiring accommodation may contact the Human Resources Department at Ext 221." 	Sept 2016 Apr 2015 Ongoing
3. Elevator Signage:	Dec 2014
New more visible signage has been installed directing visitors to the location of the elevators.	

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4. Absent Management Program includes individualized plan for employees with disabilities. Accommodations are made whenever possible. Assessments are done by the Employee Health Nurse in collaboration with employee and Physician.	Jan 2014 Ongoing
5. New outpatient self- registration KIOSK's have been installed in the Front Lobby, ER Department and ground level Outpatient Clinic areas. The KIOSK's are wheelchair height, have large print, colour contrast screen and allow sufficient time to complete tasks. Use of the KIOSK is optional. A staff member is available to register the patient in the traditional way or assist them in using the KIOSK. An employee with a disability participated on the KIOSK implementation team.	June 2016
6. The General Orientation training module has been revised to include the Integrated Accessibility Standard. All existing and new staff have been trained.	January 2016
7. Purchased Book Mark magnifiers for patients who have vision impairments.	Nov. 2016
8. Two staff washrooms have been equipped with automatic doors to improve accessibility.	Jan. 2017



PLANS FOR 2017-18

Action	Target
1. Feedback was received regarding paper towel dispensers not being automatic. Automatic dispensers were previously installed but were very unreliable so have been since replaced by hand pull dispensers. The supplier has indicated they are working on procuring a more reliable automatic dispenser. When these become available the hospital will trial them with the intent of purchasing for public rest areas.	June 2018
2. Purchase 3 hand held magnifiers with light for patient use. Units can be signed out at nurses station on unit.	Sept. 2017
3. 2017 Accessibility Compliance Report will be filed with the Accessibility Directorate of Ontario.	Oct. 2017
4. Accessibility review will be posted in Hospital Newsletter and distributed to staff, physicians and Board members. A reminder to staff of TTY and Pocket Talker sign out procedure will be included.	Sept. 2017
5. CT scanning implementation is planned for LACGH in 2017/18. DI department will require restructuring. Accessibility standards will be followed.	Dec. 2018