



Accessibility

Lennox & Addington County General Hospital Accessibility

Annual Status Report

of the
LACGH 2014-2019 Accessibility Plan

June 2018

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



Overview

The Lennox & Addington County General Hospital continually strives to improve the 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 the initiatives that have been taken place in the past 48 months and the strategies planned for the next year to improve accessibility and help us meet the standards set out in the Accessibility for Ontarians with Disabilities Act (AODA).

WHAT HAVE WE DONE?

Standard/Barriers	Completed
1. A pocket talker has been purchased to assist patients who have challenges with hearing.	Sept 2016
A second Pocket Talker has been purchased and a sign out system has been set up at 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. These can be viewed in larger font size. Emergency Information is posted in the patient handbook and on the hospital website in an accessible format. 	July 2017
<ul style="list-style-type: none"> Notices, informing clients that information can be made available in an accessible format, are in 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 are 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. These updates are included in the orientation package for all new staff. 	September 2015
<ul style="list-style-type: none"> Job postings, both internal and external, include the following statement: <i>"We accommodate applicants with disabilities during the selection process. Applicants requiring accommodation may contact the Human Resources Department at Ext. 221."</i> 	September 2016
	Apr 2015
	Ongoing

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<p>3. Elevator Signage:</p> <p>New more visible signage has been installed directing visitors to the location of the elevators.</p>	December 2014
<p>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 the employee and Physician.</p>	January 2014 Ongoing
<p>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.</p>	June 2016
<p>6. The General Orientation training module has been revised to include the Integrated Accessibility Standard. All existing and new staff have been trained.</p>	January 2016
<p>7. Purchased Book Mark magnifiers for patients who have vision impairments.</p>	November 2016
<p>8. Two staff washrooms have been equipped with automatic doors to improve accessibility.</p>	January 2017



PLANS FOR 2018-19

Action	Target
<p>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.</p>	September 2018
<p>2. 2018 Accessibility Compliance Report will be filed with the Accessibility Directorate of Ontario.</p>	October 2018
<p>3. CT scanning implementation is planned for LACGH in 2018/19. DI department will require restructuring. Accessibility standards will be followed.</p>	December 2018