

LENNOX AND ADDINGTON COUNTY

GENERAL HOSPITAL

2021-2026

Accessibility Plan

Developed by: Accessibility Coordinator



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BACKGROUND

The purpose of the *Accessibility for Ontarians with Disabilities Act, 2005* (AODA) is to improve opportunities for people with disabilities and to engage their involvement in the identification, removal and prevention of barriers, enhancing their full participation in all aspects of life.

To accomplish this goal, the AODA requires employers to develop and maintain an Accessibility Plan, to consult with persons with disabilities in the preparation of this Plan, and to make the Plan available to the public.

To this end, the AODA requires that employers prepare an accessibility plan that will lead to compliance with five Accessibility Standards:

- 1) Customer Service
- 2) Information and Communication
- 3) Employment
- 4) Transportation
- 5) Built Environment

This multi-year Plan, prepared by the Lennox and Addington County General Hospital's (hereinafter referred to as "the Hospital") Accessibility Working Group (AWG) describes our commitment to make the Hospital accessible to all. The Plan describes the measures the Hospital has taken in the past and the path the Hospital will take during the current and future years to identify, remove and prevent barriers to all individuals with disabilities.

The AWG meets on an annual basis to focus on identifying or preventing new barriers, reviewing the requirements of the Accessibility Standards and developing a status report of outstanding barriers.

HOSPITAL AND COMMUNITY PROFILE

The Lennox and Addington County General Hospital opened in 1966. The Hospital is owned by the Lennox and Addington County General Hospital Association, a not for profit corporation chartered in 1959. The responsibility for operating the facility rests with a volunteer Board of Directors, elected from the community, as provided for in our Hospital's Corporate By-laws.



Mission

***“To be a progressive rural health system,
dedicated to improving the health of our patients and our communities.”***

Role

The Hospital functions as a community health care centre that provides a range of primary and selected secondary health care services (general surgery and general medicine). The Hospital provides these services and others on an inpatient, outpatient and emergency basis to residents of Lennox and Addington County, Deseronto, Tyendinaga Township, northern townships of Frontenac County and visitors to the area.

Inpatient services provide diagnosis and treatment for patients who require intensive nursing and specialized services. Ambulatory care and outpatient services are provided, as appropriate, to ensure that patients receive the best possible care while living in the community. Emergency services are available 24 hours each day and provide rapid assessment, treatment and basic stabilization of patients with life, limb function-threatening conditions.

The Hospital has established and maintains strong linkages with other health care and social service providers in Lennox and Addington County and broader areas. The Hospital is committed to ongoing relationships with specialized service providers affiliated with Queen's University Health Sciences and other health and social service providers in Frontenac and Hasting/Prince Edward Counties. These linkages ensure that our patients have access to a continuum of health care and social services in an appropriate and timely basis.

The Hospital is also committed to its role in teaching programs for health care professionals, having well established relationships with both Queen's University (Faculty of Health Sciences) and Community Colleges in neighbouring communities, which offer educational experience to


students and medical residents assigned to the Hospital for the purpose of acquiring experience in a community hospital setting.

The Hospital serves approximately 45,000 people in the surrounding communities and employs approximately 330 staff.

HOSPITAL COMMITMENT TO ACCESSIBILITY

ACCOMPLISHMENTS

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

1. **Elevators:** Braille signs have been placed outside of each elevator and signage has been installed directing traffic to elevators.
2. **Hazard Recognition:** The Hospital has implemented a Hazard Recognition and Reporting Policy (Health and Safety policy #4-70). This Program targets the identification of hazards which may impair accessibility, such as cluttered pathways, and monitors visitor incidents. All staff members have been educated and are aware of their responsibility to report and prevent workplace hazards such as impaired pathways, for example. Incidents are reviewed by the Joint Occupational Health and Safety Committee at their meetings.
3. **Work Accommodation:** The Hospital has implemented a Disability Management, Return to Work and Accommodation Program, which addresses accommodation for employees with a disability. In addition, an Employee Assistance Program has been made available to employees who may require counseling or assistance with a mental or physical disability.
4. **Language Interpreters Policy:** The Hospital has introduced an Over the Phone Interpreter Services process (Policy CPR-2) for people who do not speak English or require an interpreter. A sign language interpreter for the hearing impaired can be arranged, as needed, through Canadian Hearing Services. 
5. **Door Knobs:** Door knobs have been replaced with lever handles.
6. **Virtual Care:** The health care industry is evolving at a rapid pace as professionals and facilities look for ways to increase their patient's access to care. The hospital has introduced digital technologies to communicate with patients, breaking down barriers that can impede a patient's access to medical care. With the help of live video, audio and instant messaging, patients can now interface with clinicians from the comfort of their own home. This is

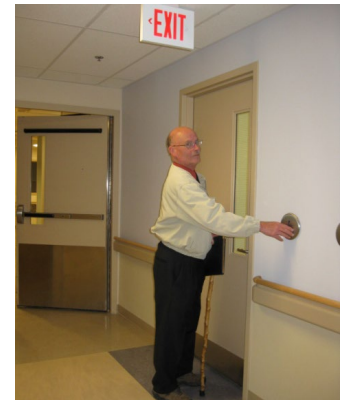
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especially beneficial for those who live in rural communities, who frequently would otherwise need to drive long distances to their doctor's office or to see a specialist.

7. **Redevelopment:** The Hospital has undergone substantial redevelopment to the facility in recent years. Consideration was given to accessibility barriers when designing the hospital for redevelopment.

- a) All public and most staff washrooms have been restructured during the Hospital redevelopment to meet accessibility standards.
- b) All central entrances and interior public traffic doorways have been replaced with wider automatic door systems, either motion censored or push button.



8. **Waiting Area:** New seats have been installed in waiting areas which include sections with armrests for easier access.

9. **Policies and Procedures:** Hospital Management will strive to continually give consideration to employees, patients and visitors with disabilities when developing and revising Hospital policies.

- a) The Hospital "Respect and Dignity" policy has been revised to include sensitivity to people with disabilities.
- b) New policies have been developed and several policies have been updated to reflect requirements of the AODA and the Customer Service Standard. Continued efforts will be made if or when new standards are implemented.
- c) Education related to new policies are provided through the Hospital's newsletter, Policy Management Program, website and staff general orientation. All staff have access to online policies.



10. **Patient Information:** A patient information handbook has been developed to inform patients on what to expect during their stay and what to do if they experience difficulty with care, accessibility etc.

11. **Staff Awareness:** The initial nursing assessment and patient Kardex in all patient areas has been redesigned to identify disabilities of patients such as hearing/vision impairment and tools have been modified to include disability identifiers.

12. **Staff Education:** All staff and volunteers are provided with Accessible Customer Service Training. They are required to complete an accessibility review and quiz to promote awareness of their responsibilities and processes for reporting barriers.

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13. **Disabled Parking Spaces:** The Napanee by-law enforcement officer police for unauthorized vehicles. An accessibility drop off loading zone is located at the front entrance, which was designed to meet everyone's needs. Additional disability parking spaces have been added close to the Emergency entrance, as well as the front and back parking lots. There are a total of 12 disability parking spaces.
14. **Patient Phones:** Large number phones are available for patient rooms upon request. Public phone cubical have been installed post construction that are wheelchair accessible and have TTY features and one portable TTY unit has been purchased by the hospital for use by patients and families as needed. Large print phone books are used in patient rooms
15. **Outpatient Clinics:** The Hospital continues to introduce new outpatient clinics such as Mammography, Bone Mineral Densitometry, and Cardiac-Respiratory Rehabilitation bringing services closer to home eliminating long distance travelling to tertiary care centers. Our Hospital continues to consider more outpatient clinics in future functional plans.
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16. **Lobby Floor Surface:** Non-slip surfaces and grates to catch moisture have been installed in the front lobby areas and throughout the Hospital, where applicable.
17. **Unit Nursing Stations:** Workstations have been installed in all patient areas with low windows for wheelchair access.
18. **Televisions:** TV's and equipment have been purchased by the Volunteer Services to support closed caption capabilities as well as teletext for the visually impaired. Volunteer Services will program according to individual patients needs at the time of installation.
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19. **Wheelchairs:** Additional wheelchairs have been purchased with leg rests that cannot be removed. Some wheelchairs are located at the entrance way for easy access.
20. **Hand Sanitizer Dispensers:** All hand sanitizer stations are hands free and at wheelchair height.
21. **Volunteer Services:** Volunteer Services has an information desk located in the front main lobby to direct people as they enter the Hospital and provide assistance, if required. Patient volunteers have been assigned the role of reading information to patients, when or if required.
22. **Hospital Emergency Evacuation Plan:** The Hospital's Emergency Preparedness Team has updated the evacuation plan to ensure assistance to disabled patients, staff or visitors.
23. **Signage:** Standardized, clear signage were located throughout the Hospital, as part of the reconstruction project.

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24. **Light Switches:** Light switches in second floor washrooms have been converted to motion sensor for the convenience of staff and visitors.

25. **Visual Assistance:** Magnifying glasses are available for patient use.

26. **Website:** A new Hospital website was developed to meet accessibility standards.

ACCESSIBILITY WORKING GROUP

The Hospital formally constituted the Accessibility Working Group (AWG) in June 2003. Tracy Ringrose and Justin Turner now share the Accessibility Coordinator role for the Hospital's AWG.

Members	Department / Role	Contact
Tracy Ringrose	Human Resources Joint Accessibility Coordinator	613-354-3301, ext. 229 tringrose@lacgh.napanee.on.ca
Justin Turner	Director, Risk Management and Contracts	613-354-3301, ext. 279 justin.turner@lacgh.napanee.on.ca
Mr. W. Coveyduck	President & CEO	613-354-3301, ext. 202
AK Sharma	Director of Capital Planning and Facilities Management	613-354-3301, ext. 204
Penny Robertson	Community Member	

Goal

The Hospital is committed to improving the quality of life for all persons with disabilities by promoting equal opportunities, as demonstrated by a continual improvement of access to our facilities, policies, programs and services.

The AWG is dedicated to strengthening the process of identifying, removing and preventing barriers to all individuals who work in, visit or utilize services provided by the Hospital. The focus is on patients and family members, hospital staff, health care professionals, volunteers, members of the community and visitors to the area with disabilities.

Objectives

- To assist with enabling compliance with the AODA and the standards prescribed by its regulations;
- To review, develop and implement new policies, programs, practices and services using a lens of accessibility;
- To act as a resource in addressing accessibility concerns;
- To promote awareness of accessibility challenges;
- To monitor the status of this Plan and ensure follow up is carried out;
- To describe resources we will use to make this Plan available to the public;
- To act as a liaison with the community for accessibility awareness and improvement;

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- To communicate and document initiatives, progress and reports, as required.

HOSPITAL ACCESSIBILITY RELATED POLICIES

- Accessibility Policy - Hospital Policy AO-48
- Hazard Recognition and Reporting Policy and Procedure - Health and Safety Policy 4-70
- Respect and Dignity Policy – Health and Safety Policy 5-470
- Identification and Reporting Accessibility Barriers - Hospital Policy CPR-9
- Interpreter Service - Hospital Policy CPR-2
- Accessibility Customer Services Standard Training Program - Hospital Policy CPR-96
- Notice of Temporary Service Disruption - Hospital Policy CPR-95
- Providing Services to People with Disabilities - Board Policy B-9
- Pet Visitation and Service Animals - Hospital Policy CPR-18
- Assistive Devices for People with Disabilities - Hospital Policy CPR-97

BARRIER IDENTIFICATION METHODOLOGIES

The Accessibility Working Group (AWG) uses the following methodologies to identify barriers:

Community Involvement: Two community members with disabilities are active members of the Hospital’s AWG. The group meets, with the community members, as required to review the status of the Plan and develop strategies for barrier removal. This may include a hospital tour and inspection.



Review Background Information: By using the background material provided in the AODA and the Accessibility Standards by the OHA, the AWG has incorporated relevant recommendations into the Hospital Accessibility Plan.

Review of Complaints, Feedback and Incident Reports: The Quality Committee will review complaints, incident reports and feedback related to accessibility issues and use the information to identify accessibility barriers to be addressed in the Plan or as required.

Canvassing Hospital Committees: One AWG member sits on the Clinical Teams and encourage accessibility consideration as opportunities arise.

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Staff Participation/Education: Communiqués are relayed through the Hospital’s “Little Extra” newsletter, general orientation program and memos encouraging staff to consider barriers routinely in all aspects of work life and report any barriers and recommendations to the AWG.

Barrier Reporting: A process has been established for reporting and addressing accessibility issues (see Hospital policy CPR-9). The process is included in the Patient Information Handbook provided in patient rooms and outpatient areas, and posted on the Hospital’s website. Ongoing communication continues, both to the public and to staff, as the opportunity arises or as necessary.

Patient Surveys: The Hospital conducts periodic client satisfaction surveys, which include a question designed to give patients the opportunity to indicate if they experienced any accessibility barriers.

Hospital Website and Local Newspaper. Communicate current accessibility issues to the public, using both the hospital website and local newspaper.

REVIEW AND MONITORING PROCESS

The Hospital is committed to following through with this Accessibility Plan. The requirements outlined in the Integrated Accessibility Standards have been built into the Annual Plan to ensure all standards are met according to schedule. The tool will be reviewed frequently over the next few years to ensure appropriate actions are taken to meet all standards applicable to the Hospital.

The Accessibility Coordinators will monitor the progress of the Plan and, if necessary, remind the responsible parties of their roles in implementing the Plan. The AWG will meet as required to review implementation of barriers.

Any new barriers identified are incorporated into the Plan, with a strategy for removal and the status of existing barriers updated.

The AWG will work in close proximity with the Hospital Senior Leadership Team, Supervisors, Hospital Operations/Maintenance and the Joint Occupational Health and Safety Committee to ensure that hospital accessibility is considered in all aspects of hospital management. The Senior Leadership Team will incorporate the Accessibility Plan into the Hospital’s Operating Plan whenever possible. When developing and reviewing hospital policies, consideration will be given to ensure accommodation to employees, patients, and visitors with disabilities.

Any revisions to the plan are reviewed and approved by Accessibility Working Group and posted on the Hospital Website.

COMMUNICATION PLAN

The Hospital's Accessibility Plan will be refreshed every five years, or as necessary. A current copy is posted on the Hospital communications bulletin board, and on the Hospital's website.

On request, the Plan can be made available to those with disabilities in an alternate format (i.e. large print, electronic text, or on a USB drive).

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REMOVAL OF IDENTIFIED BARRIERS (TRACKING)

Accessibility barriers are divided into six types:

PH – Physical

AR – Architectural

I – Information or Communication-based

AT – Attitudinal

T – Technological

PP – Policies and Practices

ONGOING INITIATIVES

BARRIER	OBJECTIVE	TYPE	STRATEGY FOR REMOVAL	RESOURCE	MRP	TARGET
1. Patient Information Patient handouts are in small print and difficult to read and not accessible to persons who are blind.	To the extent possible, provide patient information in alternative formats or provide patient with necessary resources to interpret information.	I	Develop patient handouts to incorporate large print format. Personal assistance is provided, as needed. Audio format are available, upon request.	In-house typesetter. Volunteer Services Healthcare professionals	Admin Assistant	Ongoing.
2. Facility wayfinding/ directional signage	Ensure all wayfinding signs in alternative formats (ie braille) or provide patient with necessary resources to interpret information	I	Personal assistance provided, as needed. Include in signage workplan, when undertaken.	Administration Facilities	Project Manager – Risk and Contracts	Ongoing.

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NEW BARRIERS IDENTIFIED

BARRIER	OBJECTIVE	TYPE	STRATEGY FOR REMOVAL	RESOURCE	MRP	TARGET
1. Accessible new 128-bed LTC facility	To extent possible, ensure all barriers are considered when completing architectural drawings.	AR	Consideration given to accessibility barriers when designing new 128-bed LTC facility.	Architect Project Team	Project Manager - Construction	December 2022
2. Accessible formats of information and communication supports for patients / community	To the extent possible, provide accessibility compliant documents on Hospital website.	I	Provide training to all staff reasonable for posting information to the Hospital website.	Admin staff Human Resources	Communication Specialist	December 2021

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INTEGRATED ACCESSIBILITY STANDARDS / COMPLIANCE

	STANDARD	REQUIREMENT	STEPS	MRP	STATUS
2012	Information and Communication	Emergency Procedure Plan Communication	<ul style="list-style-type: none"> If making emergency procedures or public safety information available to the public, provide in accessible format – provide information in an accessible format or with appropriate communication supports upon request. 	Emergency Preparedness Group	<p>Completed</p> <p>Information posted in Patient Information handbook and on website in accessible format.</p>
	Employment	Emergency Procedure Plan for Employees with Disabilities	<ul style="list-style-type: none"> Provide/develop individualized workplace emergency response information to employees who have a disability, and if the employee requires assistance, with the employees consent. Designate individuals to provide assistance to the employee and provide information. Review individualized emergency response information when the employee: <ol style="list-style-type: none"> moves to a different location in the organization overall needs or plans are reviewed; and when reviewing general emergency response policies 		<p>Completed</p> <p>Will be addressed in an individual basis as need arises.</p> <p>No employees with disabilities at present.</p>
	STANDARD	REQUIREMENT	STEPS	MRP	STATUS
2013	General	Establish Accessibility Policies	<ul style="list-style-type: none"> Develop, implement and maintain policies governing how the organization achieves or will achieve accessibility through meeting its requirement. 	Admin Assistant Management	Completed Jan. 2010
	General	Accessibility Plan Maintenance	<ul style="list-style-type: none"> Establish, implement and maintain a multi-year accessibility plan, outlining the organization's strategy to prevent and remove barriers and meet its requirements. 	AWG	Completed Sept. 2003

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			<ul style="list-style-type: none"> Post the Accessibility Plan on the hospital website and provide the plan in accessible format upon request. 	Admin	
	General	Goods, Services or Facilities	<ul style="list-style-type: none"> Incorporate accessibility criteria and features when procuring of acquiring goods and services. 	Director, Quality 3SO	Completed
	STANDARD	REQUIREMENT	STEPS	MRP	STATUS
2014	General	Goods & Services Training	<ul style="list-style-type: none"> Ensure training is provided on the requirements of the accessibility standards to all staff and Volunteers. Provide training in respect to any changes to policies on an ongoing basis. Keep records of training. 	AWG HR Volunteer Services	Completed 2010 Process in place for new employees and volunteers.
	Information and Communication	Feedback	<ul style="list-style-type: none"> Ensure that feedback processes for receiving and responding to feedback are accessible to persons with disabilities by providing or arranging for the provision of accessible formats and communications supports, upon request. Consult the person making the request to determine suitability of format. Notify the public about the availability of accessible formats and communication supports. 	Director, Quality	Completed Included in policy # CPR-89 Providing Services to People with Disabilities. Alternate format upon request & Posted on Website
	Information and Communication	Website	<ul style="list-style-type: none"> Ensure new website conforms to WCAG <ol style="list-style-type: none"> Captions (Live) Audio Description (Pre-recorded) 	Administration IT	Completed - Ongoing No live or pre-recorded at present
	Employment	Recruitment	<ul style="list-style-type: none"> Notify employees and public about the availability of accommodation for applicants with disabilities in its recruitment processes. Include in applicable job postings 	Human Resources	Completed Statement job postings

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			<ul style="list-style-type: none"> If the selected applicant requests an accommodation, consult with the applicant arrange for the provision of a suitable accommodation in a manner that takes into account the applicant's accessibility needs. 	Occupational Health	
Employment	Notice to Successful Applicants		<ul style="list-style-type: none"> When making offers of employment, notify the successful applicant of policies for accommodating employees with disabilities. 	Human Resources	Completed Orientation Manual
Employment	Informing Employees of Supports		<ul style="list-style-type: none"> Inform employees of policies used to support employees with disabilities, including, but not limited to policies on the provision of job accommodations that take into account an employee's accessibility needs due to disability. Provide information under this section to new employees as soon as practicable after they begin their employment. Provide updated information to employees whenever there is a change to existing policies 	Human Resources	Complete Orientation Manual E-Blast – New Policies
Employment	Accessible Formats and Communication Supports for Employees		<ul style="list-style-type: none"> If requested, the employer shall consult with the employee to provide or arrange for provision of accessible formats and communication supports for: <ol style="list-style-type: none"> information that is needed in order to perform the employee's job; and information that is generally available to employees in the workplace. 	Hospital Wide	Completed Policy # CPR-89 Providing Services to People with Disabilities. Alternate format provided upon request
Employment	Individual Accommodation Plan		<ul style="list-style-type: none"> Develop a written process for the development of individual accommodation plans for employees with disabilities. The process shall include the following elements: 	Occupational Health Human Resources	Completed

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			<ul style="list-style-type: none"> a) manner in which employee requesting accommodation can participate in the development of the plan b) the means in which the employee is assessed on an individual basis c) the manner in which the employer can request an evaluation by an outside medical or other expert, at the employers expense, to assist the employer in determining if and how accommodation can be achieved d) the manner in which the employee can request participation of a representative from their bargaining agent e) steps taken to protect the privacy of the employee's personal information f) frequency in which individual accommodation plan will be reviewed and updated and manner in which it will be done g) if the individual accommodation plan is denied, the reasons for the denial will be provided to the employee h) the means of providing the individual accommodation plan in a format that takes into account the employee's accessibility needs. 	Physio	
			<ul style="list-style-type: none"> • Individual Accommodation Plans shall; <ul style="list-style-type: none"> a) if requested, include any information regarding accessible formats b) if required, include individualized workplace emergency response information c) identify any other accommodation that is to be provided 	Occupational Health Human Resources	Complete

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	Employment	Return to Work Process	<ul style="list-style-type: none"> Develop a return to work process for employees who have been absent from work due to a disability and require disability-related accommodations in order to return to work. The return to work process shall, <ol style="list-style-type: none"> outline steps the employer will take to facilitate the return to work of employees who were absent because of their disability use individual accommodation plans as part of the process 	Occupational Health	<p>Complete</p> <p>Return to Work Program is in place.</p>
	Employment	Performance Management	<ul style="list-style-type: none"> Take into account the accessibility needs of employees with disabilities when performing performance reviews. 	Management	<p>Complete</p> <p>Included in HR policy</p>
	Employment	Career Development	<ul style="list-style-type: none"> Take into account the accessibility needs of employees with disabilities when providing career development and advancement to its employees with disabilities. 	Management	<p>Complete</p> <p>Included in HR policy</p>
	Employment	Redeployment	<ul style="list-style-type: none"> Take into account the accessibility needs of employees with disabilities when redeploying employees 	Human Resources	<p>Complete</p>
	STANDARD	REQUIREMENT	STEPS	MRP	STATUS
2015	Information and Communication	Accessible Formats	<ul style="list-style-type: none"> Provided or arrange for the provision of accessible formats and communication supports for persons with disabilities 	Hospital Wide	<p>Complete</p> <p>Policy # CPR-89</p>

CONTACT INFORMATION

Concerns regarding accessibility at the Lennox and Addington County General Hospital can be directed to:

Lennox and Addington County General Hospital
8 Richmond Park Drive
Napane, Ontario, K7R 2Z4
Attention: Justin Turner, Accessibility Coordinator
Phone: 613-354-3301 Ext. 279
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OBTAINING COPIES: ACCESSIBILITY PLAN

This publication is available on the Lennox and Addington County General Hospital Website www.web.lacgh.napane.on.ca/.

Hardcopies can be obtained from the Administrative Assistant at 613-354-3301 ext. 416.

Copies are available in large print or alternate formats, upon request.
