



Advancing Exceptional Care

**MULTI-YEAR ACCESSIBILITY PLAN**  
**JANUARY 1, 2019 – DECEMBER 31, 2023**

Prepared by:  
GRAND RIVER HOSPITAL ACCESSIBILITY  
COMMITTEE

Prepared for:  
Ron Gagnon, President and CEO

This publication is available on the hospital's website  
at:

<http://www.grhosp.on.ca/>

and in alternative formats upon request.

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# 1.EXECUTIVE SUMMARY

Grand River Hospital (GRH) is committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility and meeting accessibility requirements under the *Accessibility for Ontarians with Disabilities Act (AODA)* and the *Integrated Accessibility Standards Regulation (O. Reg. 191/11)* not because it is law but because it is the right thing to do.

Grand River Hospital is also committed to the continuous improvement of access to hospital facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community with disabilities.

The positive impact that this commitment has had on those with disabilities is evident through the feedback we receive. We will continue to build on our recent successes to improve access.

Grand River Hospital will continue to produce an annual accessibility plan describing the measures

that will be taken to reduce barriers and outline the action plans for the upcoming year to identify, remove and prevent barriers for people with disabilities who live, work in or use the facilities and services of Grand River Hospital.

## **2.DESCRPTION OF HOSPITAL**

Grand River Hospital (GRH) is Waterloo Wellington's largest hospital. The work of the hospital is guided by its vision, mission and values statements.

### **Our Vision**

Exceptional care. Healthy community. One patient at a time.

### **Our Mission**

Grand River Hospital provides exceptional care through inspired people, innovative initiatives and strong partnerships in the communities we serve.

### **Our Values**

Compassion, collaboration, innovation, positive attitude, professionalism and respect.

We strive to provide exceptional services that comfort, assess, restore and educate patients through 15 clinical programs and services in a fiscally-responsible manner. GRH delivers these

services within the context of the broader health system acknowledging that the needs of patients extend beyond the services provided by GRH. Through effective partnerships and linkages with other health service providers in the Waterloo Wellington area and beyond, GRH will participate in the coordination and integration of services that best serve the population of Waterloo Wellington.



Grand River Hospital (GRH) provides 15 clinical programs and services including:

- Cancer Care
- Childbirth
- Children's
- Complex Continuing Care
- Critical Care
- Emergency
- Laboratory Medicine
- Medical Imaging
- Medicine
- Mental Health & Addictions
- Pharmacy
- Rehabilitation
- Renal
- Stroke
- Surgery

In 2018/19, GRH will operate a 577-bed large community hospital delivering a full range of acute care, rehabilitation and complex continuing care services on two main campuses, the Kitchener-Waterloo site (including 835 King Street, 850 King Street, 403 Park Street, and 52 Glasgow Street), the Freeport site and three renal satellite locations in Kitchener, Guelph, Palmerston.

### 3. DEFINITIONS

Within this document, the term:

“barrier” means:

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 information or communication barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

“disability” means:

- 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 coordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impairment, 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
- 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.

The above definitions have been adopted from the Accessibility for Ontarians with Disabilities Act, 2005

## **4.OBJECTIVES**

This plan will:

- 1)Describe the process by which the Grand River Hospital will identify, remove and prevent barriers to people with disabilities;
- 2)Review efforts at Grand River Hospital to remove and prevent barriers to people with disabilities over the past year;
- 3)Describe the measures that Grand River Hospital will take in the coming years to identify, remove and prevent barriers to people with disabilities; and
- 4)Describe how Grand River Hospital will make this accessibility plan available to the public.



## 5. GRAND RIVER HOSPITAL ACCESSIBILITY WORKING GROUP

Lisa Costa, Director - Risk Management & Patient Safety at Grand River Hospital, is the ODA Coordinator and can be reached at 519-749-4300 Ext. 5174.

Members of the Grand River Hospital Accessibility Committee include:

<b><i>Committee Member</i></b>	<b><i>Department</i></b>
Laura Bertolo	Occupational Health, Safety & Wellness
TBD	Information Services
Lisa Costa	ODA Coordinator
Mark Karjaluoto	Public Affairs
Judy Goetz	Stroke & Medicine Program
Ian Gilchrist	Volunteer Resources
Connie Creed (interim chair)	Planning, Design, & Development
Vacant (chair)	Director, Capital and Facility Planning
Doug Murray	Administration –Vice President
Marc Simard	Employee Health & Wellness
Jason Smith	Engineering Services

The role of the committee is to ensure that Grand River Hospital fosters an environment friendly to those with disabilities and complies with the Accessibility For Ontarians With Disabilities Act, 2005 and its associated standards and regulations. The committee's responsibilities are to:

- Develop a multi-year accessibility plan which describes the process by which Grand River Hospital will identify, remove and prevent barriers to people with disabilities and will meet legislative accessibility requirements within the required timelines.
- Consult with persons with disabilities as the plan is established, maintained and reviewed.
- Review and update the plan at least once every 5 years.
- Monitor progress and develop annual public status updates.
- Ensure that the accessibility plan is available to the public and provide it in an accessible format upon request.
- Conduct appropriate audits to identify barriers and verify if objectives are being met.

The Accessibility Committee meets monthly or at the call of the chair to review progress on actions plans, identify new barriers and complete the multi-year accessibility plan and annual status updates.

## **6.HOSPITAL COMMITMENT TO ACCESSIBILITY PLANNING AND PRIORITIES AND COMMITMENTS FOR 2019 - 2023**

The Board of Directors approved an allocation in the 2016/17 and 2017/18 fiscal years to remove accessibility barriers and is committed to doing so in future years.

The President and CEO authorized the Accessibility Committee to prepare a multi-year accessibility plan that will help us provide an environment increasingly centered on the needs of patients with accessibility needs.

The five-year accessibility plan includes both new and continuing priorities and commitments that will assist with Grand River's commitment towards identifying removing and preventing barriers to accessibility.

## **General Requirements**

- Continue to review and update policies/procedures and forms to reflect legislation changes.
- File Accessibility Compliance Report to the Ministry bi-annually.
- Prepare Annual Accessibility Status Reports.
- Establish a 2019-2023 Multi-Year Accessibility Plan.
- Continue to consult the Accessibility Advisory Committee, the public and people with disabilities for Accessibility Plans.

- Continue to implement accessibility design, criteria and features when procuring or acquiring goods, services or facilities. Document where it is not possible to do so. Develop accessible procurement training for staff.
- Ensure that all employees continue to complete mandatory accessibility training.
- Update Staff, Contractor and Volunteer training resources / develop e-learning's
- Review requirements under the General Requirements pending update in 2019/2020 (under review in 2018).

## **Customer Service Standard**

- Continue to fulfill the needs of residents and customers under the Accessible Customer Service Standard.
- Continue to receive and respond to feedback and ensure processes are accessible for persons with disabilities.
- Continue to post service disruptions on site and online.

## **Employment Standard**

- Continue to regularly review our human resources policies to prevent or remove systemic employment barriers, ensure they are compliant with legislation and reflect best practices.

- Continue to notify about the availability of accommodation for persons with disabilities.
- Continue consult with employees to provide or arrange for accessible formats and communications supports.
- Continue to comply with the legislated requirements for:
  - Recruitment
  - Workplace Emergency Response Information
  - Return to Work Process
  - Performance Management
  - Career Development and Advancement
  - Redeployment
- Review requirements under the Employment Standard pending update in 2018/2019 (under review in 2017).

## **Information and Communications Standard**

- Continue to educate staff on the need for accessible documents.
- Develop a strategy of how to ensure existing documents are accessible or available upon request.
- Staff to ensure that “accessible formats available upon request” logo or written text is on all printed documents.
- Review websites to determine next steps for website and web content.

- Continue to monitor accessible website and web content compliance.
- Ensure all websites and web content conforms with the Information and Communications Standard / WCAG 2.0 Level AA by 2021.
- Continue to receive and respond to feedback and ensure processes are accessible for persons with disabilities.
- Continue to consult with persons who make requests for accessible formats and communication supports to determine the suitability of the request.
- Review requirements under the Information and Communications Standard pending update in 2018/2019 (under review in 2018).
- Continue to prepare emergency procedures, plans and public safety information and make the information available to the public as well as provide accessible formats and communication supports.

## **Transportation Standard**

- Continue to follow the intent and spirit of the AODA legislation.
- Continue to monitor tariff fees and ensure that licensed owners and operators of taxicabs are prohibited from charging a higher fare or additional fees for persons with disabilities, from charging a

fee for storage of mobility aids or assistive devices, ensure that vehicle registration and identification information is on the rear bumper of taxicabs, owners and operators make available vehicle registration and identification information in accessible formats.

- Continue to encourage taxicab owners to add accessible taxicabs to the community.
- Continue to consult the Accessibility Advisory Committee, the public and people with disabilities in the following areas:
  - Bus stops and shelters
  - Accessibility Plans
- Annually hold at least one public meeting involving people with disabilities to ensure that they have the opportunity to participate in a review of the accessibility plan and that they are given the opportunity to provide feedback on the accessibility plan.
- Review requirements under the Transportation Standard pending update in 2018/2019 (under review in 2018).

## **Design of Public Spaces Standard / Built Environment**

- Continue to consult the Accessibility Advisory Committee, the public and people with disabilities in the following areas:

- Recreational Trails
- Outdoor Play Spaces
- Exterior Paths of Travel – Rest Areas
- On-Street Parking
- Continue to implement maintenance of accessible elements as outlined in our Multi-Year Accessibility Plan and in EBS-54-AOP-08 Accessible Maintenance Procedure Policy. Incorporate accessibility retrofits during renovation project and new constructions for Grand River facilities and public spaces
- Engage/consult during project planning, design and implementation stages.
- Continue to comply with the legislated requirements for:
  - Recreational Trails and Beach Access
  - Outdoor Public Eating Areas
  - Outdoor Play Spaces
  - Exterior Paths of Travel – Ramps, Stairs, Curb Ramps, Depressed Curbs, Accessible Pedestrian Control Signals, Rest Areas
  - Accessible Parking
  - Obtaining Services – Service Counters, Fixed Queuing Guides, Waiting Areas
- Continue to comply with the Barrier-Free Design of the Ontario Building Code for new construction and major renovations.




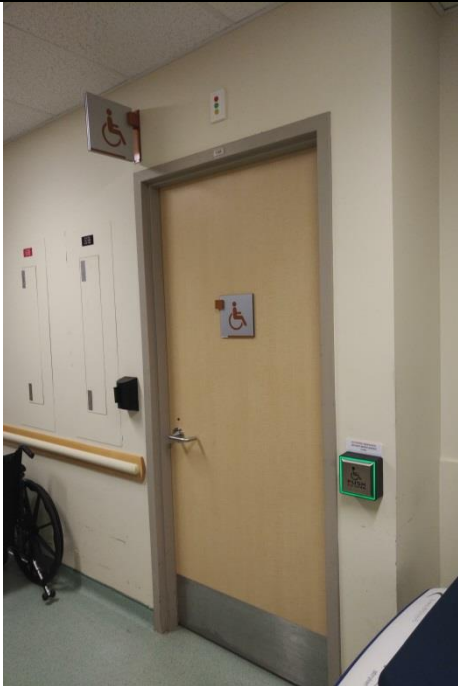
- Review requirements under the Design of Public Spaces Standard pending update in 2019/2020 (under review in 2018).
- Review requirements under the Ontario Building Code pending updates for 2019.

## **7.ACCESSIBILITY ACHIEVEMENTS - 2018**

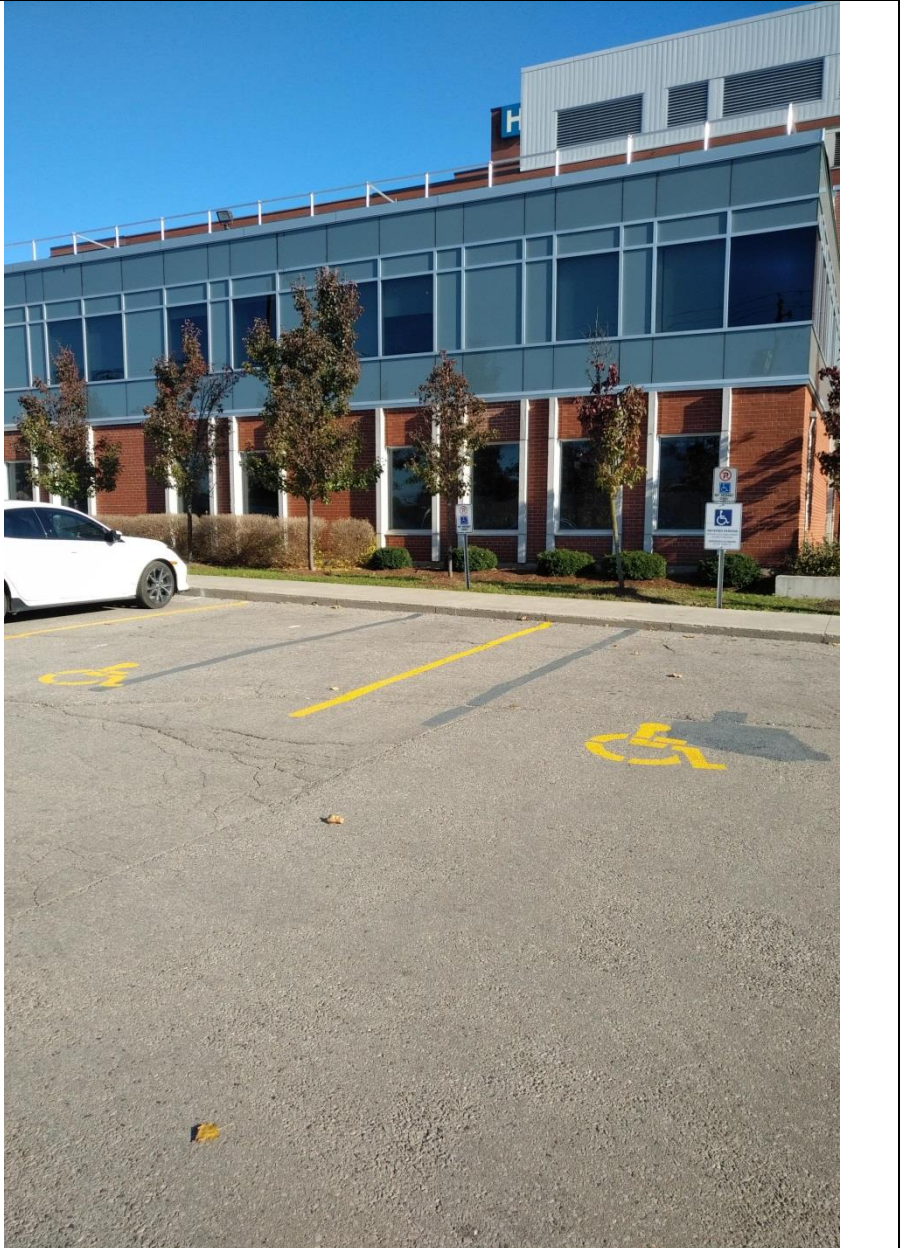
During the last several years, there have been a number of initiatives at Grand River Hospital to identify, remove and prevent barriers to people with disabilities.

The following barriers which were previously identified have been re-mediated in 2017. Any previously identified barrier which is currently in process of being resolved or will only begin to be resolved in 2018 has been incorporated into the multi-year plan.

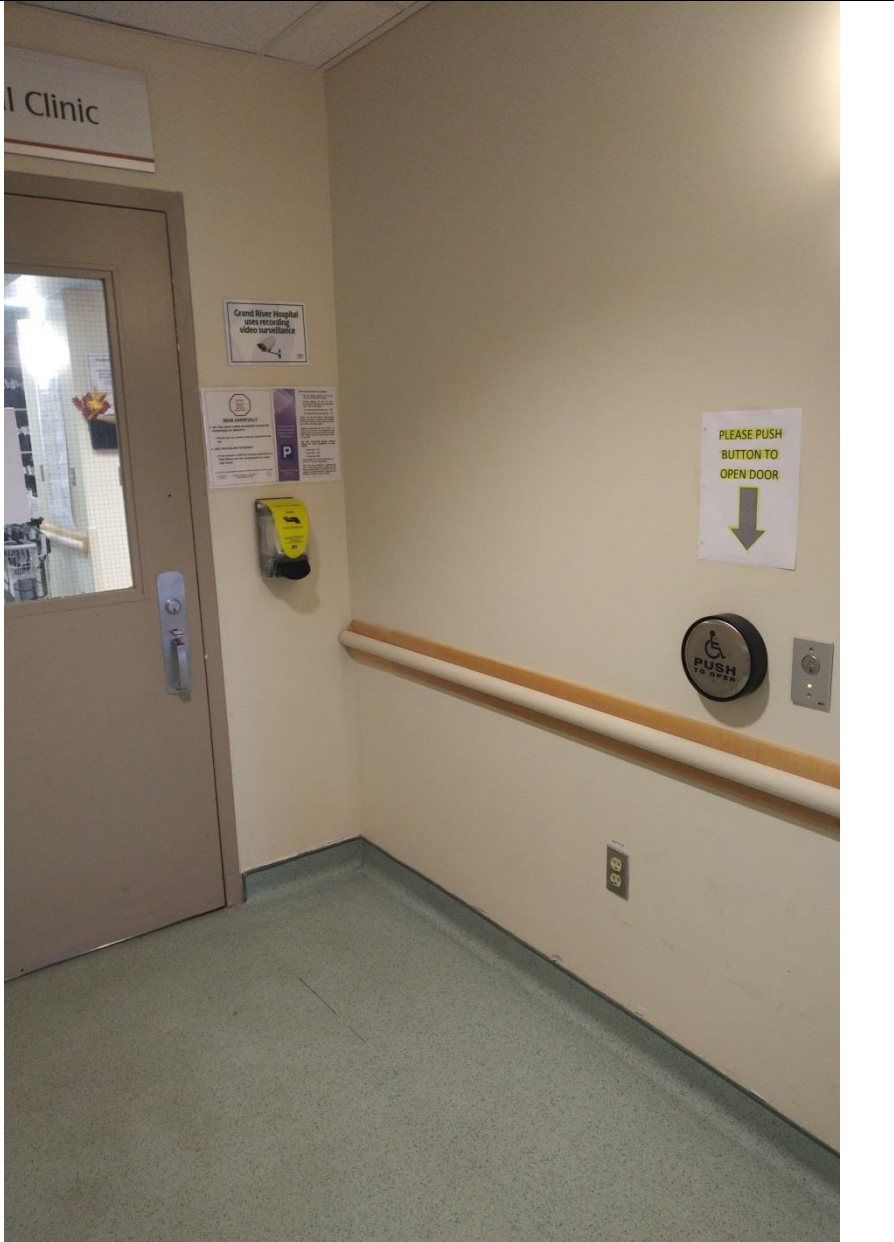
Description of Barrier	Mitigation Strategy	
<p>There was no accessible access to the Occupational Health &amp; Safety department</p>	<p>In September 2017 a door operator was installed on the main entrance to 9B.</p>	

Description of Barrier	Mitigation Strategy	
<p>There was insufficient accessible washrooms in the Renal Program.</p>	<p>A door operator was installed on E341, E305 and B705-1 in Summer 2017. The Renal program sees over 55,000 visits a year!</p>	 <p>The photograph shows a light-colored wooden door in a hospital hallway. Above the door is a sign with a wheelchair symbol. To the left of the door, a wheelchair is partially visible. To the right of the door, there is a green electronic door operator device mounted on the wall. The hallway has a light-colored wall and a green carpet.</p>

Description of Barrier	Mitigation Strategy
<p>There was no signalized pedestrian crossing at Main and ED Entrances due to LRT construction.</p>	<p>Signalized pedestrian crossing operational in Spring 2017.</p> 

Description of Barrier	Mitigation Strategy	
<p>There was insufficient accessible parking spaces in Lot B.</p>	<p>One accessible parking space was added in September 2017.</p> <p>Multi-Year Accessibility Plan 2019- 2023</p>	



Description of Barrier	Mitigation Strategy	
<p>Renal patients accessing 7A &amp; 7B couldn't open clinic doors.</p>	<p>Door operators were installed on corridor doors in September 2017. The renal The Renal program sees over 55,000 visits a year!</p> <p>Multi-Year Accessibility Plan 2019- 2023</p>	

In addition to the above accomplishments we have also successfully complied with the following sections of the Integrated Accessibility Standards Regulation.

## Part 1: General Standards

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 3</b>	<b>I: Accessibility Policies</b>
	<b>DELIVERABLES</b>
<b>3.1</b> Establish accessibility policies	Established and implemented a policy that governs how GRH will achieve accessibility through meeting the IASR requirements.
<b>3.2</b> Statement of organizational commitment	Included a statement of GRH's commitment to meet the accessibility needs of persons with disabilities in our policy.
<b>3.3</b> Make policy documents publicly available	GRH's policy is publicly available on our website and in accessible format upon request



AODA Standards / Regulation Reference O. Reg.191/11, s. 4	I: Multi-Year Accessibility Plans
	DELIVERABLES
4.1 Establish multi-year accessibility plan	A multi-year accessibility plan outlining GRH's strategy to identify, remove and prevent barriers and meet requirements of IASR was established and documented and will be implemented and maintained.
	GRH's multi-year accessibility plan is posted on our website and is available in an accessible format upon request.
	A process has been put in place to ensure that GRH's multi-year plan will be reviewed and updated at least once every 5 years.
4.2 Conduct consultation with persons with disabilities	GRH will continue to consult with persons with disabilities and the accessibility advisory committee in the development of the multi-year plan.
4.3 Prepare annual status report	GRH will report annually on the year's progress toward goals and targets identified in multi-year accessibility plan.
	The report will be posted on website and provided in an accessible format upon request.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 5</b>	<b>I: Procuring or Acquiring Goods, Services or Facilities</b>
	<b>DELIVERABLES</b>
<b>5.1</b> Incorporate accessibility criteria and features into procurement process	GRH will ensure the procurement process includes consideration of accessibility criteria and features.
<b>5.2</b> Provide explanation if impracticable, upon request	GRH will provide an explanation, upon request, if accessibility criteria and features cannot be incorporated into our procurement process.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 6</b>	<b>I: Self-Service Kiosks</b>
	<b>DELIVERABLES</b>
<b>6.1</b> Incorporate accessibility features when procuring or acquiring self-service kiosks	GRH will ensure the procurement process for acquiring self-service kiosks includes consideration of accessibility criteria and features.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 7</b>	<b>I: Training</b>
	<b>DELIVERABLES</b>
<b>7.1</b> Provide training on IASR accessibility standards and Human Rights Code	All employees, volunteers, persons participating in development of organizational policy and other persons who provide goods, services or facilities on behalf of the organization, received training.
<b>7.2</b> Training is appropriate to duties	Training was appropriate to the duties of the training participants
<b>7.3</b> As soon as practicable	Training for new employees and volunteers will be delivered as part of their orientation.
<b>7.4</b> Training regarding policy changes	Training on our revised accessibility policy was provided.
<b>7.5</b> Record of training	GRH keeps a record of training provided under this section, including dates of training and number of individuals.

## Part 2: Customer Service Standards

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 11</b>	<b>II: Feedback Process</b>
	<b>DELIVERABLES</b>
<b>11.1</b> Ensure feedback processes are accessible by accessible formats and/or communication supports upon request	GRH provides patients/families with multiple options/formats for providing feedback. GRH also provide communication supports (interpreters/translators) and/or alternate formats upon request.
<b>11.3</b> Notify the public about the availability of accessible formats and communication supports	GRH notifies the public about the availability of accessible formats and communication supports.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 13</b>	<b>II: Emergency Procedure Plans and Public Safety Information</b>
	<b>DELIVERABLES</b>
<b>13.1</b> Provide emergency procedure and public safety information in accessible formats or with communication supports as soon as practicable, upon request	GRH will provide publicly available emergency procedure and public safety information in accessible formats or with communication supports as soon as practicable, upon request.

AODA Standards / Regulation Reference O. Reg.191/11, s. 14	II: Accessible Web Sites and Web Content
	DELIVERABLES
<p><b>14.1</b> Ensure internet websites and web content conform to WCAG 2.0 guidelines (Web Content Accessibility Guidelines) at the following levels:</p> <ul style="list-style-type: none"> <li>• New websites and web content to Level A by January 1, 2014 (14.4)</li> </ul>	<p>GRH's internet meets the technical requirements of WCAG 2.0 level A.</p> <ul style="list-style-type: none"> <li>- This applies to websites and web content that an organization controls directly or through a contractual relationship that allows for modification of the product</li> <li>- This applies to web content published on our website after January 1, 2012</li> </ul>

## Part 3: Employment Standards

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 22</b>	<b>III: Recruitment, General</b>
	<b>DELIVERABLES</b>
<b>22.0</b> Notify about accommodation in recruitment process	GRH notifies all employees and the public about the availability of accommodation for applicants with disabilities in the recruitment process.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 23</b>	<b>III: Recruitment, Assessment or Selection Process</b>
	<b>DELIVERABLES</b>
<b>23.1</b> Notify selected job applicants of the availability of accommodations upon request in relation to the materials or processes used for selection	GRH notifies selected job applicants of the availability of accommodations upon request in relation to the materials or processes used for selection.
<b>23.2</b> Consult with selected applicant and provide/arrange for suitable accommodation in a manner that takes into account the applicant's accessibility needs	GRH will consult with selected applicant and provide/arrange for suitable accommodation in a manner that takes into account the applicant's accessibility needs.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 24</b>	<b>III: Notice to Successful Applicants</b>
	<b>DELIVERABLES</b>
<b>24.0</b> When making offers of employment, notify successful applicant of policies for accommodating employees with disabilities	When making offers of employment, GRH will notify the successful applicant of policies for accommodating employees with disabilities.

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 25</b>	<b>III: Informing Employees of Supports</b>
	<b>DELIVERABLES</b>
<b>25.1</b> Inform employees of policies supporting employees with disabilities	GRH provided mandatory training on the revised accessibility policy, which includes supporting employees with disabilities.
<b>25.2</b> Provide this information to new employees as soon as practicable after hiring	GRH will provide information as soon as practicable after hiring.

<b>25.3</b> Provide updated information on accommodations policies to employees when changes occur	GRH will continue to ensure that education and communication considerations are part of all policy revisions.
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<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 26</b>	<b>III: Accessible Formats and Communication Supports for Employees</b>
	<b>DELIVERABLES</b>
<b>26.1</b> Provide accessible formats and communication supports for job or workplace information, upon request	<p>GRH will ensure that all information that is:</p> <ul style="list-style-type: none"> <li>• needed in order to perform the employee's job</li> <li>• generally available to employees in the workplace</li> </ul> <p>is provided to employees in an alternate format or with communication supports, upon request.</p>
<b>26.2</b> Consult with employee to determine suitability of format or support	GRH will consult with employee to determine suitability of format or support.



<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 27</b>	<b>III: Workplace Emergency Response Information</b>
	<b>DELIVERABLES</b>
<b>27.1</b> Provide individualized workplace emergency response information to employees who have a disability	GRH provides individualized workplace emergency response information to employees who have a disability upon request.
<b>27.2</b> Provide information to person designated to provide assistance upon consent	GRH provides information to person designated to provide assistance, upon consent.
<b>27.3</b> Provide information as soon as practicable after becoming aware of the need	GRH provides information as soon as practicable after becoming aware of the need.
<b>27.4</b> Review individualized workplace emergency response information when: <ul style="list-style-type: none"> <li>• employee moves location</li> <li>• individual plans are reviewed</li> <li>• general emergency policies reviewed</li> </ul>	GRH reviews individualized workplace emergency response information when: <ul style="list-style-type: none"> <li>• employee moves location</li> <li>• individual plans are reviewed</li> <li>• general emergency policies are reviewed.</li> </ul>

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 28</b>	<b>III: Documented Individual Accommodation Plans DELIVERABLES</b>
<b>28.1</b> Develop written process for documented individual accommodation plans	GRH has developed a written process for documented individual accommodation plans.
<b>28.2</b> Include prescribed elements in process: <ul style="list-style-type: none"> <li>• How employee can participate</li> <li>• How employee will be assessed</li> <li>• How employer can request assessment to determine accommodation</li> <li>• How employee can request participation of union representative</li> <li>• How employee's personal information will remain private</li> <li>• How, and how often, plan will be reviewed and updated</li> <li>• How reasons for denied request will be communicated</li> <li>• How plan will be provided to employee</li> </ul>	GRH includes the prescribed elements.

AODA Standards / Regulation Reference O. Reg.191/11, s. 28	III: Documented Individual Accommodation Plans
	DELIVERABLES
<p><b>28.3</b> Individual accommodation plans shall:</p> <ul style="list-style-type: none"> <li>• Include any information regarding accessible formats and communications supports provided, if requested</li> <li>• Include individualized workplace emergency response information, if required</li> </ul> <p>Identify any other accommodation that is to be provided</p>	<p>GRH's individual accommodation plans include:</p> <ul style="list-style-type: none"> <li>• Any information regarding accessible formats and communications supports provided, if requested</li> <li>• Individualized workplace emergency response information, if required</li> <li>• Any other accommodation that is to be provided</li> </ul>

AODA Standards / Regulation Reference O. Reg.191/11, s. 29	III: Return-to-Work
	DELIVERABLES
<p><b>29.1</b> Develop a documented return-to-work process</p>	<p>GRH's return-to-work process has been developed and documented.</p>
<p><b>29.2</b> Include steps employer will take to facilitate return to work and use documented individual accommodation plans</p>	<p>GRH return-to-work process includes steps GRH will take to facilitate return to work and uses documented individual accommodation plans</p>

AODA Standards / Regulation Reference O. Reg.191/11, s. 30	III: Performance Management
	DELIVERABLES
<b>30.1</b> Include accessibility considerations in performance management processes	The use of the performance management process takes into account the accessibility needs of employees with disabilities, including existing accommodation plans

AODA Standards / Regulation Reference O. Reg.191/11, s. 31	III: Career Development
	DELIVERABLES
<b>31.1</b> Include accessibility considerations and individual accommodation plans in career development and advancement, including additional responsibilities within current position	Career development and advancement, including additional responsibilities within current position, includes accessibility considerations and individual accommodation plans.

AODA Standards / Regulation Reference O. Reg.191/11, s. 32	III: Redeployment
	DELIVERABLES
<b>32.1</b> Include accessibility considerations and individual accommodation plans in redeployment processes	GRH's redeployment processes includes accessibility considerations and individual accommodation plans.

## **8.BARRIER IDENTIFICATION METHODOLOGIES**

Feedback regarding the way Grand River Hospital provides services to people with disabilities can be made:

- Verbally;
- Through e-mail;
- Via a link on the Grand River Hospital website home page; or
- In writing.

The Patient Relations Coordinator reviews and follows up on all feedback. The Grand River Hospital Accessibility Committee also reviews, prioritizes, recommends action and incorporates feedback into the Multi-year Accessibility Plan.

The ODA Coordinator and the Accessibility Committee used the following barrier-identification methodologies to gain information.

<b>Methodology</b>	<b>Description</b>
Patient and visitor feedback	Feedback received by the Patient Relations Coordinator along with feedback received by other service providers (i.e. Customer Service Specialist).
Canvassing staff input	Our internal weekly newsletter was used several times this past year to encourage staff to communicate accessibility barriers to the Accessibility Committee.
Focus groups	The Accessibility Committee met on several occasions to brainstorm a list of current accessibility barriers. The committee included individuals with disabilities as well as family members of individuals with disabilities.
AODA Legislation	AODA requirements are also a primary driver of change for this multi-year accessibility plan.

## **9. BARRIERS IDENTIFIED**

In its review, the Accessibility Committee identified 15 accessibility barriers for remediation in 2019-2023. The barriers which Grand River Hospital will address in the next 5 years can be found in Appendix A. In addition to these initiatives we will also comply with the required sections of the Integrated Accessibility Standards Regulation.

## **10. REVIEW AND MONITORING PROCESS**

The ODA Coordinator in conjunction with the Grand River Hospital Accessibility Committee will meet monthly to review progress on the remediation of barriers.

## **11. COMMUNICATION OF THE PLAN**

The hospital's accessibility plan will be posted on Grand River Hospital's website and hard copies will be available from the Communications Department and Patient Relations Coordinator's Office. On request, the plan can be made available in alternative formats.



## APPENDIX A – BARRIERS TO BE ADDRESSED IN 2019-23

#	Description of Barrier	Strategy for Removal / Prevention / Comments	Accountability	Timeline
1	Patients with hearing deficits can hear televisions in patient waiting areas	<ul style="list-style-type: none"> <li>- Encourage units to keep the closed captioning on TV's located in waiting areas</li> </ul>	Accessibility Committee's Lead for Communications Department	2019/2020  Q1
2	Registration/triage station at Emergency Entrance	<ul style="list-style-type: none"> <li>- Ensure that patients use accessibility features of the registration/triage station at Emergency Entrance</li> </ul>	Accessibility Committee's Lead for Facilities Design	2019/2020  Q1
3	Customer Service counter at Freeport Pharmacy has an accessible station	<ul style="list-style-type: none"> <li>- Ensure that Retail Pharmacy at Freeport has an accessible counter built into the design</li> </ul>	Accessibility Committee's Lead for Facilities Design	2019/2020  Q2
4	Patients and visitors challenged by signage and wayfinding	<ul style="list-style-type: none"> <li>- Continue with GRH signage standards applying contrast white on blue wherever possible</li> <li>- Ensure all floors and fire stairwells are properly signed for emergency exiting and wayfinding</li> </ul>	Accessibility Committee's Lead for Communications Department	2019/2020  Q2

#	Description of Barrier	Strategy for Removal / Prevention / Comments	Accountability	Timeline
5	Patients and visitors are not using accessible parking spaces appropriately	<ul style="list-style-type: none"> <li>- Ask Maintenance to repaint the lines in garage</li> </ul>	Accessibility Committee's Lead for Facilities Management	2019/2020  Q2
6	Lack of available tools for patients with communication barriers (language, visual or auditory deficits, etc)	<ul style="list-style-type: none"> <li>- Develop an accessibility resource kit containing personal whiteboard pocket talker, hearing magnifiers, magnifying glass, communication picture cards, etc. available for staff to sign out and use with patients as needed</li> </ul>	Accessibility Committee's Lead for Clinical	2019/2020  Q2
7	Delirium is a common problem among hospitalized older adults causing mental confusion, poorer functional outcomes, and increased risk of nursing home placement	<ul style="list-style-type: none"> <li>- Implementation of the Confusion Assessment Method (CAM) and the Hospital Elder Life Program to better assess for and prevent delirium and the physical and cognitive decline that occurs in high risk older patients.</li> </ul>	Accessibility Committee's Lead for Clinical	2019/2020  Q4

#	Description of Barrier	Strategy for Removal / Prevention / Comments	Accountability	Timeline
8	Access to interpreter services	<ul style="list-style-type: none"> <li>- Update policy and provide education during next year's accessible week.</li> </ul>	Accessibility Committee's Chair	2019/2020  Q4
9	Parking Lot is not user friendly for patients and visitors requiring accessible parking	<ul style="list-style-type: none"> <li>- Ensure that new parking structure not only meets AODA codes for accessibility but also anticipates and exceeds parking needs for visitors, patients and staff using the structure</li> </ul>	Accessibility Committee's Lead for Facilities Design	2021/2022  Q4
10	Lack of audio in elevators for people with visual impairment	<ul style="list-style-type: none"> <li>- Conduct inventory of all elevators for accessibility features such as audio, braille, etc.</li> <li>- Add accessibility enhancement to elevators when upgrades are done to elevators and/or new cars are added to the fleet</li> </ul>	Accessibility Committee's Lead for Facilities Management	2022/2023  Q4
11	Existing door handles may have original round knobs not the wing type knob	<ul style="list-style-type: none"> <li>- Replace on an as-needed basis if feasible</li> </ul>	Accessibility Committee's Lead for Facilities Management	On-going

#	Description of Barrier	Strategy for Removal / Prevention / Comments	Accountability	Timeline
12	Existing faucets may have regular handles and not quarter turn wing handles	<ul style="list-style-type: none"> <li>- Replace on an as-needed basis if feasible</li> </ul>	Accessibility Committee's Lead for Facilities Management	On-going
13	Patient furniture and equipment is not height adjustable	<ul style="list-style-type: none"> <li>- Ensure that equipment and furniture for patients can be adjusted in height to meet special accommodations i.e. patient dining tables</li> </ul>	Accessibility Committee's Lead for Facilities Design	On-going
14	Existing washrooms are space and tight and do not meet current code	<ul style="list-style-type: none"> <li>- Renovate on an as-needed basis if feasibility</li> <li>- All new washrooms will be barrier free and have wheelchair accessible toilets and sinks</li> </ul>	Accessibility Committee's Lead for Facilities Design	On-going

In addition to the above initiatives we will also commit to ongoing compliance with the following sections of the Integrated Accessibility Standards Regulation.

#### Part 4: Information and Communication Standards

<b>AODA Standards / Regulation</b> <b>Reference O. Reg.191/11, s. 12</b>	<b>II: Accessible Formats and Communication Supports</b> <b>Compliance Deadline: January 1st, 2015</b>
	<b>DELIVERABLES</b>
<b>12.1</b> Provide accessible formats and communication supports for information	Provide accessible formats and communication supports <ul style="list-style-type: none"> <li>- in a timely manner that takes into account the person's accessibility needs due to disability and</li> <li>- at a cost that is no more than the regular cost charged to other persons</li> </ul>
<b>12.2</b> Consult with person requesting alternate format	Consult with person requesting alternate format
<b>12.3</b> Notify public of availability of these alternatives	Notify public of availability of these alternatives

<b>AODA Standards / Regulation Reference O. Reg.191/11, s. 14</b>	<b>II: Accessible Web Sites and Web Content Compliance Deadline: January 1<sup>st</sup> 2021 DELIVERABLES</b>
<p><b>14.1</b> Ensure internet websites and web content conform to WCAG 2.0 guidelines (Web Content Accessibility Guidelines) at the following levels:</p> <ul style="list-style-type: none"> <li>• All websites and web content to Level AA by January 1, 2021 (other than live captions and audio descriptions) (14.4)</li> </ul>	<p>Ensure internet meets technical requirements of WCAG 2.0 on required schedule</p> <ul style="list-style-type: none"> <li>- This applies to websites and web content that an organization controls directly or through a contractual relationship that allows for modification of the product</li> </ul>

## Part 6: Design of Public Spaces / As Built Environment

<b>AODA Standards / Regulation Reference O. Reg.191/11, S. 80.16, 80.22, 80.33-80.37, 80.39-80.42</b>	<b>IV: Design of Public Spaces (DRAFT) Compliance Deadline: Estimated as January 1<sup>st</sup>, 2016</b>
All sections of the Built Environment Standards (Design of Public Spaces) with relevance to GRH	Ensure technical requirements outlined in the AODA Built Environment Standards (Design of Public Spaces) are met in all new construction and/or renovation, in all relevant areas including:
<b>Ss. 80.33 to 80.37</b> Accessible Parking	Accessible Parking

<b>Ss. 80.16, 80.22, 80.28</b> Exterior Spaces	Exterior paths of travel Outdoor public use eating areas
<b>Ss. 80.39 to 80.41</b> Interior Spaces	Service Counters Fixed queuing guides Waiting areas
<b>Ss. 80.42</b> Maintenance	Maintenance