

Hôpital Notre-Dame Hospital (Hearst)

Hearst, Ontario, Canada



Hôpital Notre-Dame Hospital Accessibility Plan

2024-2029



Prepared by:

the Hôpital Notre Dame Hospital (Hearst) Accessibility committee

This documentation is available on the hospital's website (www.ndh.on.ca)

and in alternative formats and/or with communication support upon request

Hôpital Notre-Dame Hospital Accessibility Plan

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1. Executive Summary

The multi-year plan for years (2024-2029) is prepared by the Accessibility Working Group of Hôpital Notre-Dame Hospital (HNDH). The plan describes: (1) the measures that Hôpital Notre-Dame Hospital has taken in the past, and (2) the measures that Hôpital Notre-Dame Hospital will take during the years (2024-2029) to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of our Hospital, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

Hôpital Notre-Dame Hospital renews its commitment to the continual 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 participation of persons with disabilities in the development and review of its annual accessibility plan; and the provision of quality services to all patients and their family members and members of the community with disabilities.

The Accessibility Working Group identifies barriers to persons with disabilities. The most significant findings were that 28 out of 29 patient washrooms were not accessible, the door to the Physiotherapy department is not equipped with an automatic door operator & do not have accessible parking spots near the new addition (built in 2023). Over the next years, the Accessibility Working Group recommends focusing on 3 different barrier types.

2. Aim

This plan will describe the measures that HNDH has taken in the past, and the measures that HNDH will take during the next years to identify, remove and prevent barriers to people with disabilities who live, work in or use the hospital.

3. Objectives

This plan:

1. Describes the process by which Hôpital Notre-Dame Hospital will identify, remove and prevent barriers to people with disabilities.
2. Reviews efforts at Hôpital Notre-Dame Hospital to remove and prevent barriers to people with disabilities over the past year.
3. Lists the by-law, policies, programs, practices and services that Hôpital Notre-Dame Hospital will review in the coming year to identify barriers to people with disabilities.
4. Describes the measures Hôpital Notre-Dame Hospital will take in the coming year to identify, remove and prevent barriers to people with disabilities.
5. Describes how Hôpital Notre-Dame Hospital will make this accessibility plan available to the public.

4. Definitions

For the purpose of this Plan, the following definitions apply (ref. ODA, 2001)

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A **'barrier'** is:

- 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, and architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

A **'disability'** is:

- Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect of 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 device,
- A condition of mental impairment or a developmental disability,
- A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- A mental disorder, or
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997

5. Description of Hôpital Notre-Dame Hospital's Corporation

Hôpital Notre-Dame Hospital is a complex health care facility with a broad range of public services. Hôpital Notre-Dame Hospital has committed itself to the continual improvement of access to its facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community with disabilities. This plan was established with the participation of persons with disabilities and staff members that consider the accessibility of their environment a very important part of their work.

Our hospital serves approximately 10,000 patients and has 165 employees.

6. The Accessibility Working Group

The Chief Executive Officer, in consultation with the Board of Directors, formally constituted the Accessibility Working Group in June 2003. The Board of Directors recommended that the Working Group:

- Review Accessibility Standards as set out by the Accessibility Directorate of Ontario which are applicable to HNDH
- Review and list by-law, policies, programs, practices and services that cause or may cause barriers to people with disabilities;
- Identify barriers that will be removed or prevented in the coming years;
- Describe how these barriers will be removed or prevented in the coming year; and
- Prepare a plan on these activities, and after its approval by the Senior Team, make the plan available to the public.

Terms of reference and membership list can be found in Appendix A

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7. Hospital commitment to accessibility planning

On September 10, 2009 the Board of Directors approved by resolution the following Accessibility Planning Policy:

The Hôpital Notre-Dame Hospital Corporation is committed to:

- The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health care practitioners, volunteers and members of the community;
- The participation of people with disabilities in the development and review of its multi-annual accessibility plans;
- Ensuring hospital by-law and policies are consistent with the principles of accessibility; and
- The establishment of an Accessibility Working Group at the hospital.

The Accessibility Working Group was authorized to prepare an accessibility plan that will enable Hôpital Notre-Dame Hospital to meet these commitments.

8. Recent barrier removal initiatives

During the last several years, there have been a number of informal initiatives at Hôpital-Notre Dame Hospital to identify, remove and prevent barriers to people with disabilities. In the past Hôpital Notre-Dame Hospital has always considered the accessibility issues when constructing or renovating an area of its establishments. Some examples of these are during recent renovations, a new accessible washroom was added to the complex care department. A new acute care nursing desk was built with an accessible access. An accessible public washroom was built in the new addition. Updating and adding handrails in the hallways of the 2nd and 3rd floor. A second accessible shower was added on the Acute care floor (3rd).

(a) Review of complaints received by Patient Representative

The hospital Ombudsman conducts reviews of patient complaints including references to accessibility.

(b) Site audit

Members of the working group conducted a site audit on March 5, 2024 and subsequently 15 accessibility barriers were identified.

(c) Access to information and communication:

Our clients are provided with internet access and a policy for assistant pets and support person was created.

9. Barrier identification methodologies

The Accessibility Working Group used the following barrier-identification methodologies:

| Methodology | Description | Status |
|-------------|-------------|---------------------|
| Audit | Site visit | Barriers identified |

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10. Barriers identified

In its review, the Accessibility Working Group identified over 15 barriers. Over the next years, the Accessibility Working Group has decided to focus on 8 barriers. This list is divided as follows: Architectural (14), Systemic (0), and Technologic (1).

| Type of Barrier | Description of Barrier | Strategy for its removal/prevention |
|-----------------|---|--|
| Architectural | Nurses station too high on 2 nd floor | Modify to accommodate all clients and users. |
| Architectural | No automatic door operator on the Physiotherapy department door | Install a new operator |
| Architectural | No automatic door operator on the Day Surgery department door | Install a new operator |
| Architectural | No automatic door operator on the accessible washroom door in the Emergency department | Install a new operator |
| Architectural | The interior door operator for the waiting room door in the addition is not in the right location | Move the door operator |
| Architectural | No accessible parking spots near new addition | Have 2 parking spots added in the grass island across from the addition ramp |
| Architectural | No accessible washroom directly in main floor hallway | Will be remedied during the main floor renovation. |
| Architectural | No accessible washrooms in patient rooms | Build a new patient wing |
| Architectural | Patient ceiling lifts | Build a new patient wing |
| Architectural | No roof over exterior ramps at the front of the Hospital | Build roof structure above ramps |
| Architectural | Door threshold at Central Reception office can be a tripping hazard | Add a visual marking on threshold until it can be replaced |
| Architectural | Main entrance ramp is not to actual Code | Build a new ramp |
| Architectural | Most toilet seats are not 18" high throughout the hospital | Make sur to install ADA height toilet every time a toilet is changed |
| Architectural | Missing a grab bar in the 2 nd floor shower room | Add a grab bar |
| Technologic | No speech to text device in the Emergency Department | Buy a tablet and install appropriate software |

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11. Barriers that will be addressed 2024-2029

The Accessibility Working Group will address 8 barriers during the coming years.

| Barrier | Objective | Means to removal / prevention | Performance criteria | Resources | Timing | Responsibility |
|---|--|--|---|---|-----------|---|
| Accessible public washroom on main floor | Add a second washroom at the Lab waiting room | Build new accessible washroom in space made available from the Pharmacy move | Construction done and operational | Ground floor renovation project | 2024 | Chief Ancillary Officer |
| Automatic door operator | Have an automatic door operator on the Physio department door | Install a new automatic door operator | Installation done and operational | Maintenance budget | 2024 | Chief Ancillary Officer |
| No accessible parking spots near addition | Have at least 2 accessible parking spots near the addition | Build 2 parking spots across from the ramp of the addition | Construction done | HIRF | 2025 | Chief Ancillary Officer |
| Automatic door operator | Have an automatic door operator on the ED washroom door | Install a new automatic door operator | Installation done and operational | Emergency Department Renovation Project | 2025 | Chief Ancillary Officer |
| Automatic door operator | Have an automatic door operator on the Day Surgery department door | Install a new automatic door operator | Installation done and operational | Maintenance budget | 2026 | Chief Ancillary Officer |
| Patient room washrooms are not accessible | Have accessible washrooms in every patient room | Apply to the Ministry for a new patient wing | Ministry approval and consultants hired | Capital Branch and Foundation | 2024-2029 | Chief Ancillary Officer & Chief Financial Officer |
| Patient room without ceiling lifts | Have a ceiling lift in every patient room | Apply to the Ministry for a new patient wing | Ministry approval and consultants hired | Capital Branch and Foundation | 2024-2029 | Chief Ancillary Officer & Chief Financial Officer |
| Patient toilets at ADA height | Have all patient room toilets at ADA height | Apply to the Ministry for a new patient wing | Ministry approval and consultants hired | Capital Branch and Foundation | 2024-2029 | Chief Ancillary Officer & Chief Financial Officer |

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12. Review and monitoring process

The Accessibility Working Group will meet biannually to review progress. At each meeting, the Working Group will remind staff, either through personal contacts or by e-mail, about their roles in implementing the plan. The Chairperson of the Working Group is also committed to report to the Quality Working Group.

13. Communication of the Plan

The hospital's accessibility plan will be posted on Hôpital Notre-Dame Hospital's website and hard copies will be available from the Human Resources department. On request, the plan can be made available in alternative formats, such as computer disk in electronic text and in large print if required. The plan will also be included within the hospital orientation package to new staff.

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Appendix A Terms of Reference

The Hôpital Notre-Dame Hospital Accessibility Working Group

Purpose

The Accessibility Working Group representing Hôpital Notre-Dame Hospital (Hearst) (HNDH) will oversee the progress in development, review, implementation and evaluation in the field of accessibility. It will also ensure the accessibility needs of employees, patients, visitors are considered and incorporated in our services.

Objectives

- The Working Group will understand the organization's facilities, by-laws, legislation, policies, programs, practices and services;
- The Working Group will understand the barriers to access issues for people with disabilities;
- People living with disabilities will be represented in all Accessibility initiatives;
- The Working Group will:
 - Review recent initiatives and successes in identifying, removing and preventing barriers;
 - Identify (list/categorize) barriers that may be addressed in the coming year;
 - Advise the organization regarding the setting of priorities and the development of strategies to address barrier removal and prevention;
 - Enable the enactment of pertinent accessibility legislation and standards;
 - Specify how and when progress is to be monitored;
 - Write, approve (seek Board approval), endorse, submit, publish and communicate the plan;
 - Review and monitor the plan;
 - Review the following policies:
 - ADM-GEN-GEN-34 Guidelines for Service Animal, Therapy Animal and Patient-owned Pet Visitation;
 - ADM-GEN-GEN-37 Customer Service.

Membership

The Working group will be comprised of the following stakeholder representatives;

- Chief Ancillary Officer
- Technological Service Delivery (IT)
- Physiotherapy Services
- Community members/employees with disabilities
- Community partners
- Staff and Volunteer work groups as required

Working Group Structure

As a complement to the work of this team, the membership may choose to form sub working groups in order to facilitate collaboration around objectives in the following areas: Training and Awareness, Employment, Customer Service, and others as needed.

Meeting Frequency

The working group will meet biannually with sub groups meeting on a schedule determined by the members.

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Reporting Relationship

To the Quality Working Group of HNDH

Members of the Accessibility Working Group

The following persons were appointed to the Working Group:

| <i>Working Group member</i> | <i>Department</i> | <i>Contact Information</i> |
|-----------------------------|-------------------------|----------------------------|
| Michèle Côté | Member of the public | 705-362-5113 |
| Sylvie Bélanger | Chief Ancillary Officer | 705-372-2940 |
| Fred Potvin | Chief Paramedic | 705-372-0015 |
| Nancy Gauthier | Physiotherapist | 705-372-2914 |
| Jeanette Vaillancourt | Systems Support | 705-372-2905 |
| Nadia Boissonneault-Alary | Occupational Therapist | 705-362-7840 |