



HURON PERTH
HEALTHCARE
ALLIANCE

Clinton Public Hospital
St. Marys Memorial Hospital
Seaforth Community Hospital
Stratford General Hospital

Annual Accessibility Plan

Submitted to: Huron Perth Healthcare Alliance Chief Executive Officer

Submitted by:

Huron Perth Healthcare Alliance Accessibility Committee

Kathy Powers Co-chair

Doug Biesinger Co-chair

16

TABLE OF CONTENTS

1. EXECUTIVE SUMMARY _____	3
2. AIM _____	3
3. DEFINITIONS _____	3
4. OBJECTIVES _____	4
5. DESCRIPTION OF HURON PERTH HEALTHCARE ALLIANCE _____	4
6. HPHA ACCESSIBILITY COMMITTEE _____	5
7. REVIEW OF COMPLAINTS RECEIVED _____	6
8. BARRIERS _____	7
APPENDIX 'A' _____	8
STRATFORD GENERAL HOSPITAL _____	8
SEAFORTH COMMUNITY HOSPITAL _____	9
ST. MARYS MEMORIAL HOSPITAL _____	10
CLINTON PUBLIC HOSPITAL _____	11

1. EXECUTIVE SUMMARY

The purpose of the Ontarians with Disabilities Act, 2001 (ODA) was to improve opportunities for persons with disabilities and to provide for their involvement in the identification, removal and prevention of barriers in the Province of Ontario. To this end, the ODA mandates that each hospital prepare an Accessibility Plan.

The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) builds on and enhances the ODA by further defining standards and detailing measures of enforcement in order to build a fully accessible Ontario by 2025.

The Huron Perth Healthcare Alliance is committed to;

- the continual improvement of access to all hospital premises, facilities, and services,
- participation of people with disabilities in the development and review of its Accessibility Plan,
- the provision of quality services to patients, visitors, staff and all members of the community with disabilities.

To fulfill the purpose of both the ODA 2001 and the AODA 2005, the HPHA has created an Accessibility Plan and an Accessibility Committee to ensure the intent of the legislation is being met, or exceeded. HPHA has dedicated funding in place to ensure accessibility issues that have been identified can be addressed in an efficient manner.

2. AIM

This report describes the measures that the Huron Perth Healthcare Alliance has taken in the past and the measures that will be taken in future to identify, remove, and prevent barriers to people with disabilities who use the facilities and services of the Huron Perth Healthcare Alliance, including patients, visitors, staff and all members of our community.

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, a technological barrier, a policy or a practice.

“Disability” means;

- 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 impediment, or physical reliance on a guide dog or animal or on a wheelchair or other remedial appliance or device.
- A condition of mental impairment or a developmental disability
- A learning disability, or a dysfunction on one or more of the processes involved in understanding or using symbols or spoken language
- A mental disorder
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997, (handicap)

4. OBJECTIVES

Approximately 1 in every 7 Ontarians, or 1.85 million people, have a disability. With respect to identifying, removing and preventing barriers to people with disabilities, this report;

- Describes the process
- Reviews efforts to date
- Lists the facilities, programs, practices, and services to be reviewed
- Describes the measures to be taken
- Describes how this plan will be made available to the public

A list of barriers to consider include physical, hearing, speech, vision, deaf/blind, smell, taste, touch, intellectual, mental health, learning, others.

5. DESCRIPTION OF HURON PERTH HEALTHCARE ALLIANCE

Formed in July, 2003, the Huron Perth Healthcare Alliance is a voluntary collective of hospitals, composed of the Clinton Public Hospital, St Marys Memorial Hospital, Seaforth Community Hospital and the Stratford General Hospital. These hospitals have agreed to operate cooperatively, but maintain their independent corporate status.

Cooperative operations currently include:

- One Board
- One Management & Staff
- One budget (with separate reporting to MOHLTC)
- One Information Technology system
- Integrated Support Services Management structure
- One Human Resources Department
- Three unions
- Standardization of clinical & administrative data collection
- Common standards for support service provision
- Creation of Alliance Corporate support services such as finance, payroll, I.T.
- Creation of an Alliance wide integrated Clinical Program Management structure

The four corporations are being operated as if merged. The Alliance's total budget is approximately \$125 million with 1150 staff or 820 Full Time Equivalents (FTEs) and 193 beds.

OUR VISION

We will improve the health and well-being of the people we serve by leading the development of a sustainable, fully integrated rural health system

OUR MISSION

What We Do

We are a health system providing safe, high quality patient care. Our services include: acute medical and surgical; complex continuing care; emergency services; maternal child; mental health; and, rehabilitation. All services are guided by best practice and are delivered in a dynamic and innovative environment

How We Do It

We are a system of exceptional people providing exceptional care. Our unique partnership between the hospitals in Clinton, St. Marys, Seaforth and Stratford is strengthened as a voluntary Alliance under a single governance and staff structure.

For Whom

Middlesex Counties so that they can achieve and maintain optimum health and well being

OUR VALUES

In all we do, we demonstrate Trust, Respect, Fairness and Compassion

6. HPHA ACCESSIBILITY COMMITTEE

The C.E.O. of the HPHA authorized the Accessibility Committee to;

- Review and list the by-laws, policies, programs, practices and services that
- cause or may cause barriers to people with disabilities
- Identify barriers that will be removed or prevented in future
- Describe how these barriers will be removed or prevented in future
- Prepare a plan on these activities, and after its approval by the Chief Executive Officer, make the plan available to the public.

Committee Membership:

Doug Biesinger, Co-chair, Director, Facilities Management
doug.biesinger@hpha.ca

Kathy Powers, Co-chair, Specialist, Training and Development
kathy.powers@hpha.ca

Mary Cardinal, Member VP, Clinical Programs
mary.cardinal@hpha.ca

John Brennan, Director, Information Technology
johnbrennan@hpha.ca

Ken Haworth, Corporate Sponsor, CFO, V.P. Operations
ken.haworth@hpha.ca

7. REVIEW OF COMPLAINTS RECEIVED

Complaints regarding accessibility issues can be received by any number of ways. Each patient receives a “Patient Satisfaction Survey” upon discharge. The same form is available from the HPHA website. The website also includes contact information for most of the Management Team and includes email address, telephone or fax information. The Patient Satisfaction Surveys are addressed to the Chief Executive Officer who then reviews them and forwards them to the appropriate department head for action.

8. BARRIERS

Corporate Initiatives:

[Accessibility – Use of Service Animals By Persons with Disabilities](#)

[Use of Assistive Devices By Persons With Disabilities](#)

[Use of Support Persons By Persons With Disabilities](#)

[Service Disruption Notifications](#)

- Standardization of all toilets to “Handicap Height”
- Standardization of all door entry hardware to lever style
- Standardization of all lavatory taps to lever style
- All main entrances are wheelchair accessible
- Interpreter List available
- Implemented Corporate Training needs
- On-going training for Co-chairs
- Consider accessibility and the requirements of the physically challenged for all Redevelopment projects
- Standardization of hospital ‘Colour Boards’ to ensure a colour contrast between wall and floors
- Orientation of new staff
- Patient televisions with pillow speakers

APPENDIX 'A'

Stratford General Hospital

RECENT INITIATIVES	IDENTIFIED FUTURE INITIATIVES
<ul style="list-style-type: none"> • Increased number of signed parking for Dialysis Patients near a main entrance • Worked collaboratively with City of Stratford to construct new sidewalk for ease of access to City transit • Installed colour-coded directional signage with Braille and tactile letters • Power activated doors installed at Residence/College • Volunteers available to assist those in need • Fire Alarm system with strobe lights for sight impaired • Printed floor plan / signage posted at elevators • 3 newly renovated elevators with Braille, tactile call buttons and voice enunciation – January 2013 • Replacement of round door knobs with new accessible lever sets at Conestoga College Residence, Bed and Breakfast and Centennial Apartments • New Main entrances with automatic sliding doors, complete with snow melt sidewalks at front entrance for patient / visitor drop-off. 	<ul style="list-style-type: none"> • Creation of AODA compliant restroom in the West Building • Bariatric beds & wheelchairs as required – Annually • East Building Visitor Elevator upgrades to include Braille, tactile call buttons and voice enunciation. • Replace round door knobs with new accessible lever sets – Annually • Additional power operated doors when projects permit / present themselves • Additional AODA compliant initiatives when projects permit / present themselves • Addition of WCAG2.0 compliant E-learning software to Hospital Intranet - 2016 • Upgrade to hospital Internet and Intranet to be WCAG2.0 compliant

Seaforth Community Hospital

RECENT INITIATIVES	IDENTIFIED FUTURE INITIATIVES
<ul style="list-style-type: none"> • Additional signed parking for Rehab Patients near front door • Renovated patient registration / triage area to allow for wheelchairs • CCTV monitor placed at Emerg. Communication Station to monitor emergency patients in waiting room • Fire alarm system, addition of record voice code calls • Power activated doors installed at Interior corridor for ER • Renovate and provide new, accessible Communication Stations • Ramp for Cafeteria Patio 	<ul style="list-style-type: none"> • Fire Alarm system with strobe lights for sight impaired – 2016-17 • Bariatric beds & wheelchairs as required – Annually • Replace round door knobs with new accessible lever sets – Annually • Installed colour-coded directional signage with Braille and tactile letters - 2016 • Additional power operated doors when projects permit / present themselves • Additional AODA compliant initiatives when projects permit / present themselves • Addition of WCAG2.0 compliant E-learning software to Hospital Intranet - 2016 • Upgrade to hospital Internet and Intranet to be WCAG2.0 compliant

St. Marys Memorial Hospital

RECENT INITIATIVES	IDENTIFIED FUTURE INITIATIVES
<ul style="list-style-type: none"> • Fire Alarm system with strobe lights for sight impaired • Printed floor plan / signage posted at elevators • Power activated door installed at gazebo entrance at top of wheelchair ramp • Replace round door knobs with new accessible lever sets ,all patient rooms and majority of first floor • Renovate and provide new, accessible Communication Stations • Washrooms renovated at ER and Main Front lobby to be ODA compliant • New accessible washroom for VON / Adult day care service • Main entrance stairs resurfaced an includes color contrasting for visually impaired • Fire alarm system, addition of record voice code calls • Replace bathroom knob type faucet handles with lever handles 	<ul style="list-style-type: none"> • Bariatric beds & wheelchairs as required – Annually • Replace round door knobs with new accessible lever sets – Annually • Installed colour-coded directional signage with Braille and tactile letters – 2016 • Additional power operated doors when projects permit / present themselves • Additional AODA compliant initiatives when projects permit / present themselves • Addition of WCAG2.0 compliant E-learning software to Hospital Intranet - 2016 • Upgrade to hospital Internet and Intranet to be WCAG2.0 compliant

Clinton Public Hospital

RECENT INITIATIVES	IDENTIFIED FUTURE INITIATIVES
<ul style="list-style-type: none"> • Fire alarm system with strobe lights for sight impaired. • Printed floor plan / signage posted at elevators • 2, fully accessible washrooms in lower level, near patient registration • Power activated doors installed at entrance to Emergency Dept. • Power activated doors installed at main entrance to hospital. • Power activated doors installed at Patient Registration. • Renovate and provide new, accessible Communication Stations • Fire alarm system, addition of record voice code calls • Installation of new automatic doors in ER entrance. • Creation of two AODA compliant restrooms near admitting / ER • Creation of an AODA compliant restrooms on first floor Patient wing • Widening of patient room bathroom doors 	<ul style="list-style-type: none"> • Elevator upgrade with Braille, tactile call buttons and voice enunciation – 2016 /17 • Bariatric beds & wheelchairs required – Annually • Replace round door knobs with new accessible lever sets – Annually • Installed colour-coded directional signage with Braille and tactile letters - 2016 • Additional power operated doors when projects permit / present themselves • Additional AODA compliant initiatives when projects permit / present themselves • Addition of WCAG2.0 compliant E-learning software to Hospital Intranet - 2016 • Upgrade to hospital Internet and Intranet to be WCAG2.0 compliant