

**Annual Accessibility Plan
For
Peterborough Regional Health Centre**

September 2008 – September 2009

Submitted to
PRHC Board of Directors

Prepared by
PRHC Accessibility Working Group



*This publication is available on the PRHC website
(www.prhc.on.ca)
And in alternative formats upon request*

Table of Contents

	Page
Plan Summary	3
1. Aim	4
2. Objectives	4
3. Description of Peterborough Regional Health Centre	4
4. The Accessibility Working Group	6
5. PRHC commitment to accessibility planning	7
6. Recent barrier-removal initiatives	7
7. Barrier-identification methodologies	8
8. Barriers identified	9
9. Barriers that will be addressed in 2008/2009	12
10. Review and monitoring process	14
11. Communication of the plan	14
Appendix A: Accessibility Working Group Terms of Reference	15

Plan Summary

- The Ontario Government passed the *Accessibility for Ontarians with Disabilities Act, 2005* (replacing the *Ontarians with Disabilities Act, 2001*), The Act states hospitals must make a plan every year to tell the public how easy or difficult it is for people with disabilities to use their hospital. The plan must also state what the hospital will do to make it easier for people with disabilities. The term “disability” includes physical, mental, emotional and learning disabilities. The plan is called an “Accessibility Plan”.

A small group of staff formed the Accessibility Working Group at Peterborough Regional Health Centre in 2003 to assess the accessibility of our present buildings and to develop a plan on how to improve existing conditions as well as access for the new hospital. They publish an annual Accessibility Plan for the hospital. The group invites and welcomes input from people with disabilities and those generous enough to provide feedback to the Health Centre regarding issues they have identified during their visits.

Initially the group worked on two issues known to make access to hospital services difficult for people with disabilities. Those challenges were communication and attitudes. The current plan focuses on advocating for prioritized improvements in areas identified since the opening of the new P.R.H.C.

The whole plan can be found at www.prhc.on.ca (Peterborough Regional Health Centre website). You may also get a copy by contacting the Administration Office at the hospital. If you ask, you can receive the plan on computer disk, in large print or in Braille.

In addition you can call (705) 743-2121 Ext. 3674 to speak to a Patient Relations consultant.

1. Aim:

This plan was developed in response to requirements outlined in the *Ontarians with Disabilities Act, 2001* (ODA). The plan was developed using the template prepared by the Ontario Hospital Association in consultation with the Accessibility Directorate of Ontario at the Ministry of Citizenship and a Working Group comprised of representatives from hospitals and staff from the Ministry of Health and Long-Term Care.

This Plan describes measures that Peterborough Regional Health Centre (PRHC) has taken since its inception and will take during 2008/09 to identify, remove and prevent barriers to all people with disabilities who access PRHC's facilities and services, including staff, patients, visitors, and community members.

2. Objectives

This plan:

1. Describes the process by which PRHC will identify, remove, and prevent barriers to people with disabilities
2. Reviews efforts PRHC has made to remove and prevent barriers to people with disabilities over the past year
3. Describes the measures PRHC will take in the coming year to identify, remove and prevent barriers to people with disabilities
4. Describes the ways the PRHC will make this accessibility plan available to the public
5. Describes the measures PRHC undertook to ensure the New Hospital construction project met or exceeded existing federal, provincial and municipal guidelines, code requirements, regulations, standards and ministry policies.

3. Description of the Peterborough Regional Health Centre

Peterborough Regional Health Centre (PRHC) currently operates a newly opened state-of-the-art facility. While PRHC currently operates 394 beds its ultimate capacity will be 494 beds. PRHC serves a population of more than 300,000 in four counties. As one of the region's largest employers PRHC provides care through the expert hands of over 300 physicians, greater than 2000 employees and 625 dedicated volunteers.

Services Provided

- Ambulatory Care Services
- Cardiac Catheterization
- Complex Continuing Care
- Critical Care Services
- Emergency Services
- General Medical Services
- Interim Long Term Care
- Magnetic Resonance Imaging
- Mental Health Services

- Palliative Care Unit
- Rehabilitation Services
- Regional Dialysis Program
- Surgical Services
- Women and Children's Services

Downtown

The Women's Health Care Centre is located in the city's downtown at 157 Charlotte Street and provides information, support, counselling and treatment for women.

PRHC Mission

Caring for our patients with expert hands and creative minds.

PRHC Vision

PRHC – The place to be for care and career.

Values

Accountability, Innovation, Respect, (A.I.R.)

4. The Accessibility Working Group

Sponsor Tom Holden, Vice President of New Hospital Planning and Hospitality Services, established the PRHC Accessibility Working Group in November 2002. The group has developed Accessibility Plans annually, along with actions to identify and remove barriers

The following lists current members of the Working Group:

Working Group Member	Department	Contact Information (705) 743-2121
Terry Wilson	Canadian Hearing Society	twilson51@cogeco.ca
Lisa Corkery	New Hospital Clinical Move Coordinator	PRHC ext 4354 lcorkery@prhc.on.ca
Tamalea Stone	Rehab Therapies	PRHC @ 3929 tstone@prhc.on.ca
Jagger Smith	Patient Relations, Risk Management	PRHC ext. 4356 jsmith@prhc.on.ca
Bob Hlywka	Coordinator: Building Services	PRHC ext 3822 dhlywka@prhc.on.ca
Sue Hayden	Human Resources	PRHC ext 3692 shaydon@prhc.on.ca
Linda Hewitt	Nursing	PRHC 2364 lhewitt@prhc.on.ca

The Accessibility Working Group conducts its functions under the following assumptions:

- Improving accessibility is a shared responsibility
- People with disabilities will be consulted in the development of the PRHC accessibility plan
- Team members will work as a cohesive team and will inform their immediate supervisors regarding their commitment and the work effort to participate on the team.
- Team members will provide active communication and liaison between the Accessibility Team and their hospital unit or community constituency
- Development of the PRHC Accessibility Plan is mandated by the Ontarians with Disabilities Act, 2001 and is strongly supported by senior levels of administration at Peterborough Regional Health Centre.
- The new hospital building was designed to meet or exceed all accessibility codes and

requirements as established for the Province of Ontario.

5. PRHC commitment to accessibility planning

Commitment to accessibility planning at PRHC is demonstrated by the support of the senior leaders.

New hospital planning was based on the following key design principles:

To create a family/patient-centred healing environment –

- Maximize views and access to daylight
- Outdoor space as a natural extension of interior space
- Indoor space for reflection and interaction
- Stress-reducing environment
- Respect privacy and dignity
- Accessibility

6. Recent barrier-removal initiatives

2003

PRHC undertook the following initiatives to identify remove and prevent barriers to people with disabilities:

- a) Parking Improvement
- b) Barrier-free Planning for New Hospital Design
- c) PRHC Master Way finding Plan
- d) Patient Centered Care Education
- e) Barrier free new hospital plans that meet or exceed the Provincial Guidelines

Details of these initiatives can be found in the Accessibility Plan 2003 (Year One).

2004

During 2004 PRHC continued their work under the Accessibility Plan for 2003, including:

- a) Partnership with Canadian Hearing Society, Peterborough Durham Region
- b) Development of the staff-focused educational booklet entitled “Accessibility – Quick Tips to Improve Access”
- c) Consultation with CNIB Orientation and Mobility Specialist
- d) Staff communication through articles in InSites (PRHC monthly staff newsletter)
- e) Posters: Access Awareness Week (May 29 – June 4, 2004)
- f) Initiatives to enhance effective identification and care of those with mental health illnesses and to reduce stigma and heighten awareness of mental health issues.

Details of these initiatives can be found in the Accessibility Plan for 2004/2005.

2005

In 2005, the Accessibility Working Group and others at PRHC continued the work accomplished in previous years including:

- a) Maintained and enhanced the Partnership with the Canadian Hearing Society, Peterborough Durham Region.
- b) Continued distribution of the “Quick Tips” educational booklet.
- c) Enhanced partnerships with Peterborough’s Council for Persons with Disabilities.
- d) Increased awareness of physical accessibility within Building Services, Security & Parking
- e) Provided phones in most patient rooms with volume controls and large numbers.
- f) Ramped entrance and push button entrance make the Nicholls Building entrance more accessible while awaiting the construction of the new hospital.
- g) Worked with RSS Security to modify entrance closure times to allow CCC and palliative patients to access an outdoor deck.
- h) Automatic door opener installed on hall doors outside Admitting/Lab area.
- i) Permanent closure of Nicholls smoking room provides healthier access to the building.

2006

- a) Planning with architects & sign consultants re Way finding & Signage for the new building highlighted need to meet accessibility standards (e.g. colour contrast, font sizes, sign placement, standardized language, Braille, etc). These standards are incorporated in the sign design plan.
- b) Improved signage in Nicholls Building and select areas of RSS & HDS.

2007

- a) Build collaborative working relationship to address parking access issues
- b) Reduced barriers that may result from the increased size and travel distance in the new building.

2008

- a) Regular monitoring of the new facility to identify potential issues.
- b) Regular communication with the appropriate Senior Team or department director regarding identified issues and recommendations for prioritized change.
- c) Terms of Reference revised to facilitate change of community representative every two years thus ensuring focused attention to specific areas of need.
- d) Facilitated availability of “Pocket Talker” availability facility wide.
- e) Facilitated “paddle” access installation at front entrance

2009

- a) Review accessibility needs for each entrance and make recommendations for improvement.
- b) Active involvement in planning for final parking lot plans following old facility demolition.
- c) Monitor accessibility issues regarding staff entrance.
- d) Identify next community partner representative.
- e) Review opportunity for broad community input session.

7. Barrier-identification methodologies

The Accessibility Working Group uses the following barrier-identification methodologies to identify issues and to create annual priorities for the Accessibility Plan.

- Retrospective complaints audit
- Staff feedback
- Website feedback
- Community Stakeholder consultations
- Consultation with the Building Committee of the Council for Persons with Disabilities

8. Barriers Identified

The Accessibility Working Group identified 14 barriers through the comprehensive Year 1 review. The Accessibility Working Group continues to address these barriers each year. Barriers that are not yet addressed will be reviewed annually in preparation for future plans.

Barrier types identified include:

- | | | |
|------------------------|---------------|-------------|
| Physical | Informational | Attitudinal |
| Architectural | Communication | Technologic |
| Policies and practices | | |

Informational

Description of Barrier	Possible strategies for removal or prevention	Completed in 2007-2008
1. Signage: Need for informational signage which is professional in appearance and user friendly (legible, clear, simple)	Ad Hoc Public Image Committee coordinated by Communications in collaboration with Building Services.	Information gathering
Patient Information: Staff don't have enough information about the patient's barriers and what helps them	Enhanced use of Web-site	Provide patient and visitor information section on hospital website; investigate inclusion of follow-up information for caregivers
3. Knowledge: Need for increased knowledge of how best to communicate with people with disabilities	Communication education for all staff. Include in orientation for new staff. Work with community partners for staff training	Quick Tips booklet highlighted. Accessibility is included in General Orientation for new staff

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Communication

Description of Barrier	Possible strategies for removal or prevention	Completed in 2007-2008
Deaf, deafened and hard of hearing persons need for communication assistive devices.	Investigate availability, fund and implement pocket talkers and TTY devices	6 Pocket talkers donated by the Canadian Hearing Society 2 TTYs available

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Attitudinal

Description of Barrier	Possible strategies for removal or prevention	Completed in 2007-2008
Level of discomfort by staff and visitors regarding patients with Mental Health diagnoses and Developmental Handicaps	Monitor patient and staff feedback regarding issues. Investigate options from other like facilities	Investigation of representation from CMHA and PDACL on Accessibility Working Group.

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Policies and Practice

Description of Barrier	Possible strategies for removal or prevention	Completed in 2007-2008
Accessibility for people whose first language is other than English	Provide staff with information to access interpreters for languages other than English	Policy 1.B.50 incorporates methods to contact interpreters for all languages including ASL (See Appendix B)

Physical

Description of Barrier	Possible strategies for removal or prevention	Completed in 2007-2008
The new PRHC building may present some physical barriers due to age & structure	New PRHC building was built to meet or exceed all current codes & standards for accessibility	Regular walk-about by Accessibility Working Group to identify issues and make recommendations. Recommended automatic access doors at all entrances.

9. Barriers that will be addressed in 2008/09

Based on the previously identified barriers the Accessibility Working Group will address the following priority areas during the coming year. Detailed action plans will identify sequencing and magnitude of intervention to address annual objectives.

Physical

Barrier	How to remove/prevent	Timing	Who is Responsible for completion?
Parking	Ongoing parking issues d/t demolition of old HDS facility	Post demolition	Parking with input from appropriate stakeholders

Informational

Barrier	How to remove/prevent	Timing	Who is Responsible for completion?
Helpful and quickly available Information at front lines	Audit information needs of staff	Dec 2009	Accessibility Committee

Attitudinal

Barrier	How to remove/prevent	Timing	Who is Responsible for completion?
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Barrier	How to remove/prevent	Timing	Who is Responsible for completion?
Complaints received re attitude of staff towards some patients with Health issues	Invite feedback from agencies representing that clientele-i.e. CMHA, PDACL. Consider net community rep from this community.	Dec 2009	Accessibility Committee

10. Review and monitoring process

The Accessibility Working Group will meet a minimum of 8 times annually. According to the Terms of Reference, the Accessibility Working Group functions to

- raise awareness of accessibility and facilitate identification of barriers to access to PRHC by persons with disabilities
- provide information and act as a resource to staff on issues related to accessibility for persons with disabilities
- advocate for and recommend actions to prevent, reduce, and eliminate access barriers
- prepare the annual Accessibility Plan as required by the new Accessibility for Ontarians With Disabilities Act, 2005
- monitor access for disabled persons within the hospital in partnership with Risk Management
- provide information to the architects and engineers on issues that may result in improved accessibility for the new hospital.
- Audit accessibility measures to ensure sustained access

The Accessibility Working Group is responsible for monitoring and following up on recommendations identified in the annual Accessibility Plan. The Accessibility Working Group will also receive and review responses to complaints related to accessibility on a quarterly basis, and make recommendations for future action.

Minutes will be made available to anyone who requests.

11. Communication of the Plan

The annual plan will be made public by October 31, 2009.

The PRHC Accessibility Plan will be posted on the hospital website and intranet, and hard copies will be available from Patient Relations. On request, the plan can be made available in alternative formats, such as computer disk in electronic text, in large print or in Braille.

APPENDIX A

PETERBOROUGH REGIONAL HEALTH CENTRE Accessibility Working Group Terms of Reference – revised October 6, 2008

Purpose and Scope:

The Accessibility Working Group is a standing subcommittee of the Strategic Partnership Council (SPC). The purpose of this working group is

- To champion the Peterborough Regional Health Centre (PRHC) Accessibility Plan in compliance with the *Accessibility for Ontarians with Disabilities Act, 2005 (replacing the Ontarians with Disabilities Act, 2001)*,
- To coordinate identification of barriers to accessibility for persons with disabilities,
- To ensure that strategies for addressing barriers are given high priority and
- To effect change in attitudes and actions within the organization.

Functions:

The Accessibility Working Group functions to

- Raise awareness of accessibility and facilitate identification of barriers to access to PRHC by persons with disabilities
- Provide information and act as a resource to staff on issues related to accessibility for persons with disabilities
- Advocate for and recommend actions to prevent, reduce, and eliminate access barriers
- Prepare the annual Accessibility Plan as required by the *Accessibility for Ontarians with Disabilities Act, 2005*, and
- Monitor access for disabled persons within the hospital in partnership with Risk Management
- Audit accessibility measures to ensure sustained access.

Accountability:

“Accessibility Belongs to the Whole Organization”. An Accessibility Plan will be submitted to the Board of Governors and made public annually.

Authority:

The Accessibility Working Group is established to ensure that PRHC meets the requirements of the *Accessibility for Ontarians with Disabilities Act, 2005, (replacing the Ontarians with Disabilities Act, 2001)*.

Membership:

Representation from the following services is required:

- Human Resources and Organizational Effectiveness
- Patient Relations
- Direct Patient Care Services (minimum of 2 representatives)
- New Hospital Planning
- Building Services
- Alternating Community representatives (2 year overlapping terms—2 representatives)

Other hospital resources will be involved on a consultation or ad hoc basis.

Linkages will be formalized and maintained with the Peterborough Council for Persons with Disabilities, the Canadian Hearing Society and other local organizations as necessary.

Other members may be added as necessary and appropriate.

Responsibilities:

Members are responsible to keep their service colleagues informed about access barriers and recommended actions.

The Accessibility Working Group is responsible for monitoring and following up on recommendations identified in the annual Accessibility Plan.

Members are responsible to keep the architects and engineers informed about access barriers and recommended actions.

The Accessibility Working Group is responsible for an annual audit of services.

The Working Group will provide tours of the new hospital for the Council for Persons with Disabilities and recommend improvements.

Terms of Appointment:

The Accessibility Working Group will review membership annually.

Quorum:

Decisions will be made by consensus with at least 50% of the members in attendance.

Frequency of Meetings: A minimum of 8 meetings annually.

Reporting and Deadlines:

The Annual Plan will be submitted to the Board of Governors by September 30 each year as required by the *Accessibility for Ontarians with Disabilities Act, 2005*. The Accessibility Plan will be submitted to the Operational Partnership Council and Strategic Partnership Council annually for inclusion in the development of the annual operating plan.

The annual Accessibility Plan will include a report on actions taken in the past year, identification of items to be carried forward and plans for the coming year.

Ability to Create Sub-committees

Task groups may be convened as necessary to facilitate achievement of the Accessibility Working Group functions and responsibilities.

Minutes

Minutes will be taken by Accessibility Working Group members on a rotating basis, and made available to any hospital employee on request.

Original Approval: February 17, 2003
Date

Reviewed and Revised: October 6, 2008
Date