

North Bay Regional  
Health Centre



Centre régional  
de santé de North Bay

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# Annual Accessibility Plan

April 1, 2012 – March 31, 2013

***Prepared by***

North Bay Regional Health Centre  
Accessibility Working Group

*This publication is available on the hospital's website  
([www.nbrhc.on.ca](http://www.nbrhc.on.ca))  
and in alternative formats upon request*

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## 1.0 Executive Summary

The purpose of the *Ontarians with Disabilities Act, 2001* (ODA) is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province. To this end, the ODA requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) builds on the ODA by defining standards and measures of enforcement in order to achieve a fully accessible Ontario by 2025. Under the AODA, Provincial Standard Development Committees were established to develop accessibility standards in the following five areas:

- Customer Service
- Transportation
- Information and Communication
- Built Environment
- Employment

The Accessibility Standards for Customer Service Regulation is the first standard to become law. It came into effect on January 1, 2008. Public sector organizations, such as hospitals, had to meet the requirements under this standard by January 1, 2010. On September 2, 2010, the Ontario Ministry of Community and Social Services proposed an Integrated Accessibility Regulation under the AODA. The proposed Regulation would combine three accessibility standards into one – information and communication, employment and transportation. The Integrated Accessibility Regulation was enacted in April 2011.

The North Bay Regional Health Centre (NBRHC) is committed 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 plans; and the provision of quality services to all patients and their family members and members of the community with disabilities.

## 2.0 Implementation Approach

The purpose of the AODA is to “improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province” (ODA 2001). The purpose of the Accessibility for Ontarians with Disabilities Act (AODA) is accessibility for all Ontarians by 2025 through the development of standards and enforcement mechanisms.

The Accessibility Committee of The North Bay Regional Health Centre is committed to the philosophy of the AODA and ODA and to fulfilling the obligations under these Acts.

## 3.0 Aim

This plan describes: (1) the measures that the Hospital has taken in the past year and (2) the measures that the Hospital will take during the coming year to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of the Hospital, including patients and their family members, staff, health care practitioners, volunteers and members of the community. It also reports on the organizations’ compliance with AODA Customer Service Standard. The ultimate goal for our organization is to integrate accessibility planning into budget and other strategic and operational planning cycles.

## 4.0 Definitions

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

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, an 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 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 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 on a wheelchair or other remedial appliance 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

## **5.0 Objectives**

This plan:

1. Describes the process by which the Hospital will identify, remove and prevent barriers to people with disabilities.
2. Reviews efforts at the Hospital to remove and prevent barriers to people with disabilities over the past year.
3. Identifies the by-laws, policies, programs, practices and services that The Hospital will review in the coming year to identify barriers to people with disabilities.
4. Describes the measures the Hospital will take in the coming year to identify, remove and prevent barriers to people with disabilities.
5. Describes how the Hospital will make this accessibility plan available to the public.
6. Complies with the Accessibility Standards as set out by the Accessibility Directorate of Ontario.

## **6.0 Description of The North Bay Regional Health Centre**

The North Bay Regional Health Centre (NBRHC) is a unique healthcare organization with three primary roles. It provides acute care services to North Bay and its surrounding communities, it is the district referral centre providing specialist services for smaller communities in the area, and it is the specialized mental health service provider serving all of northeast Ontario

NBRHC has 420 beds and numerous outpatient and outreach services in North Bay and throughout the northeast region.

NBRHC is one of four major acute care hospitals serving northeast Ontario; the others being Sault Area Hospital, Timmins and District Hospital and Health Sciences North (Sudbury). The area is also served by small community hospitals like Mattawa and West Nipissing General hospitals.

NBRHC's Regional Mental Health Service provides inpatient beds in North Bay and Sudbury and outpatient and outreach services that throughout the region—from Hudson Bay to Muskoka from Sault Ste. Marie to the Quebec border.

A major teaching centre for students in medicine, psychiatry, nursing and allied health professions, NBRHC is proud to be affiliated with the Northern Ontario School of Medicine, Nipissing University, Canadore College and several other Ontario colleges and universities.

North Bay Regional Health Centre is chairing the development of a regional *Academic Health Science Research Network* to better address the unique needs of the north and

overcome barriers that impact academic health care. It will try to ensure the translation of knowledge into innovative healthcare solutions.

NBRHC is truly a caring place. Our staff and physicians maintain high standards and are flexible and innovative and ready to try new approaches that will improve patient care. Patients and their families repeatedly tell us that they appreciate the warm and skilful care they receive at NBRHC.

For further information visit our website at [www.nbrhc.on.ca](http://www.nbrhc.on.ca)

## **Mission Statement**

The North Bay Regional Health Centre provides safe, integrated, high quality, client focused care in its dual role as a district referral hospital and a specialized regional mental health centre for northeast Ontario.

## **Our Vision**

The North Bay Regional Health Centre is dedicated to the optimal physical and mental health well being of those we serve.

## **Our Values**

*With Pride, We Care*

- *Compassion*
- *Accountability*
- *Respect*
- *Excellence*

## **7.0 The Accessibility Working Group**

The NBRHC President and CEO in consultation with the Board of Directors authorized the Working Group to:

- Review Accessibility Standards as set out by the Accessibility Directorate of Ontario which are applicable to NBRHC
- Review and list 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 the coming year;
- 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 Administrative Team, make the plan available to the public.

## **7.1 Terms of Reference**

### **Purpose**

To oversee the development, review, implementation and evaluation of the NBRHC Accessibility Plan.

### **Functions**

1. The Committee will have an understanding of the organizations' facilities, by-laws, legislation, policies, programs, practices and services.
2. The Committee will have an understanding of the barriers to access issues for people with disabilities.
3. The Committee will:
  - a) Review recent initiatives and successes in identifying, removing and preventing barriers.
  - b) Identify (list or categorize) barriers that may be addressed in the coming year.
  - c) Advise the organization regarding the setting of priorities and the development of strategies to address barrier removal and prevention
  - d) Enable the enactment of pertinent accessibility legislation and standards.
  - e) Specify how and when progress is to be monitored.
  - f) Write, approve (seek Board approval), endorse, submit, publish and communicate the plan.
  - g) Review and monitor the plan.

### **Membership**

Representation from:

- Senior Management
- Facilities Management
- Technological Service Delivery (IT/IS)

- Staff with personal or professional knowledge of disability issues (rehabilitation, geriatrics, disabilities awareness)
- HR Policy staff
- Planning and Development
- Staff and Volunteer work groups as required
- Community members with disabilities

**Meeting Frequency: Quarterly**

**Reporting Relationship:** To the Senior Leadership Team of NBRHC

**Members of the Accessibility Working Group: check all titles to ensure they are up to date**

Dave Smits, VP Facilities and Clinical Support Services  
 Mariann Hibbard, Division Head/Director, CCC & Seniors Program Mgmt  
 Pat Stephens, Director, Public Relations and Communications  
 Judy Deacon, Occupational Therapist  
 Leslie Manary, Professional Practice, Quality Performance  
 Francesca Morabito, Canadian Hearing Society  
 Tina Heppenstall, Attendance Support Consultant  
 Aidan West, Division Head/Director AIPU MH IP Program Mgmt  
 Lise St. Marseille, Division Head/Director Kirkwood Program Mgmt  
 Sandy Cantin, Nurse Clinician, Education  
 Darren Pace, Coordinator, Clinical Practice  
 Elena Paris, Patient Registration, ER  
 Oriana Webster, Volunteer Engagement, Volunteer Services  
 Paul Espinosa, Manager, Building Management and Clinical Engineering Services  
 Melanie Malette, Webmaster, Information Systems

**8.0 Hospital commitment to accessibility planning**

The North Bay Regional Health Centre is committed to:

- The continual improvement of access to facilities, policies, programs, practices and services for patients and their families, staff, health care practitioners, volunteers and members of the community;
- The participation of people with disabilities in the development and review of its annual accessibility plans;

- Ensuring hospital by-laws and policies are consistent with the principles of accessibility; and
- The ongoing support of an Accessibility Working Group at the hospital.

The fundamental foundation for ensuring the development of an accessible environment is the development of a culture that supports barrier-free access to care and services and the establishment of corporate policies, and multi-year strategies that set and maintain clear expectations and resources for barrier identification and removal.

The enactment of the provincial accessibility standards such as the Customer Service Standards and the Integrated Accessibility Standards will serve as guideposts to the Accessibility Committee in prioritizing the activities that must be undertaken to fulfill its requirements over the next several years. The Accessibility Committee is also to act in a timely manner, on barriers identified by people with disabilities and their families through feedback mechanisms.

## 9.0 Barrier Identification

### BARRIERS THAT WERE ADDRESSED IN 2011-2012

- Automatic Door Openers were installed in the following locations throughout the Hospital:
  - Diagnostic Imaging; Registration area and OBSP
  - Diagnostic Imaging to the Emergency Department
  - Diagnostic Imaging to the Ortho Clinic
  - Entrance to Women and Children's Care Centre from Main Street
- Door Hold Opens were added in the following areas:
  - Outpatient Rehab main Door
  - Ortho Clinic Main Door
  - Pain Management Clinic
  - Day Surgery Corridor to Patient Locker Room
  - Diagnostic Imaging Porterage Access to Ultrasound
  - Spiritual Centre Main Entrance
  - Inpatient Gym Entrance
- Wheelchair access from Evergreen Lodge Living Room Exit to Patio
- Registration window in the Outpatient Lab Reception is now wheelchair accessible
- Additions of grab bars in public washrooms

## **BARRIERS TO BE ADDRESSED IN 2012-2013:**

- Doors throughout the Hospital are under review to assess the need for automatic functions. These will be prioritized and completed throughout the year;
- Assistive devices will continue to be under review, in regards to the needs of the Hospital. We will establish the best use for the devices and the most accessible place to store the items;
- Reviews will continue related to grab bar locations and installation requirements for grab bar devices throughout the facility. A list of desired locations as been assimilated and bars will be installed as deemed appropriate;
- Ongoing review of existing signage and the needs for additional signage with consideration to visibility and contrast;
- Will continue to welcome and review feedback pertaining to accessibility issues and prioritize the demand;
- The Built Environment review to be completed to establish future initiatives for all locations. The Committee is committed to having the identified needs incorporated into next year's plan.

## **Review and monitoring process**

The Accessibility Working Group will meet quarterly 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. Members of the Working Group will also commit to making presentations to the Occupational Health & Safety Committee and to updating the Senior Administrative Team on a regular basis.

## **Communication of the plan**

Communication of the hospital's Annual Accessibility Plan:

- Information included in the Orientation binder for all new staff
- Plan posted on The Hospital's external website in both official languages.
- Plan posted on the NBRHC intranet for access by all staff
- Printable versions available online or hard copies made available by request from the Public Relations Department
- Managers to communicate to staff at unit/department meetings and committees when applicable
- There is a possibility of having the plan made available in alternative formats, such as computer disk in electronic text, in large print or in Braille however, the demand is very low so this has not been done.