

Multi-Year Accessibility Plan

April 2024 – April 2029

Prepared by North Bay Regional Health Centre Accessibility Working Group

This publication is available on the hospital's website (www.nbrhc.on.ca) and in alternative formats and/or with communication support upon request

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1.0 Executive Summary

The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is to develop, implement, and enforce accessibility standards or rules so that all Ontarians will benefit from accessible services, programs, spaces, and employment. The standards help organizations to prevent or remove barriers that limit the things people with disabilities can do, the places they can go, and the attitudes of service providers toward them.

North Bay Regional Health Centre (NBRHC) supports the right of all persons with disabilities to equal opportunity to access to our facility and obtain information, to access health services and equal opportunity for employment. Our overall goal is to remove barriers, as it is a fundamental human right and constitutional right of equality for all persons with disabilities to have opportunity to access services and support.

The North Bay Regional Health Centre (NBRHC) is committed to the continual improvement of policies, programs, practices that ensure access to our regional health care facilities, and services for patients and their family members, staff, health care practitioners, volunteers and members of the community with disabilities. NBRHC plan strives to allow for full participation of persons with disabilities in the development and review of its annual accessibility plans that provide for quality services to all persons with disabilities.



2.0 About North Bay Regional Health Centre (NBRHC)

The North Bay Regional Health Centre 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 397 beds and numerous outpatient and outreach services in North Bay and throughout the northeast region.

As one of the largest employers in the greater North Bay Area, NBRHC plays a vital role in training the next generation of health professionals in collaboration with our academic partners, including Northern Ontario School of Medicine, Nipissing University, Canadore College and several other Ontario colleges and universities.

NBRHC senior leadership and its management leaders are committed to removing barriers through a collaborative approach that includes input from internal and external collaborative partners, including patients, families, community agencies that support those with disabilities and staff.

Mission

Partnering to improve health outcomes for mind and body.

Vision

Exceptional care, delivered with compassion.

Values

Innovation, Collaboration, Person-Centered, Accountability, Inclusivity

For further information visit our website at www.nbrhc.on.ca



3.0 Purpose of the Plan

The Multi Year Accessibility plan aspires to achieve continuous improvement in moving towards the vision of accessibility and inclusion for all persons with disabilities including patients and their family members, staff, health care practitioners, volunteers and members of the community. The 2024-2029 Accessibility Plan will guide NBRHC through its planned actions and commitments to continue to prevent and eliminate barriers for persons with disabilities.

This plan:

- 1. Describes the process by which the Hospital will identify, remove, and prevent barriers to people with disabilities
- 2. Outlines the goals that NBRHC has set out to eliminate and prevent barriers over a five year period
- 3. Provides the framework as to how NBRHC will review policies, programs, practices, and services to identify if there are any barriers that impact on access to persons with disabilities
- 4. Defines how NBRHC will make this accessibility plan available internally and to the public in formats to ensure full access by all persons
- 5. Describes how the Accessibility Plan will be communicated to the public



4.0 NBRHC's commitment to Accessibility

The North Bay Regional Health Centre is committed to:

- Building an accessible and inclusive organization that takes into account the principles of dignity, independence and equality;
- The continual improvement of access to facilities, policies, programs, practices and services for patients and their families, staff, volunteers and members of the community;
- Focusing on implementing a structure that will ensure that the phased in requirements of the Integrated Accessibility Standards Regulation are met and that all compliance deadlines are achieved;
- Continue the ongoing process of barrier identification, removal, and prevention

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.



5.0 The Accessibility Working Group

The NBRHC Accessibility Working Group is made up of representatives from the plan member's organization including persons with disabilities and representatives from the community*. The Accessibility Working Group provides leadership to NBRHC to help it fulfil its obligations under the Accessibility for Ontarians with Disabilities Act (AODA, 2005), and the Integrated Accessibility Standards Regulation (ISAR, 191/11). The group provides guidance to the organization regarding barrier free access to all NBRHC locations and programs, and oversees the implementation of this multi-year plan.

GROUP MEMBERS	TITLE	DEPARTMENT
Kristen Best (Chair)	Human Resource Business Partner	Human Resources
Bruce Beakley	Vice President	Human Resources
Trevor Levesque	Director	Corporate Services
Mark Daniw	Director	Clinical
Elena Paris	Coordinator	Emergency Department
Kim McElroy	Director	Communications and Strategic Partnerships

*Despite repeated attempts to engage members of the public including we have been unsuccessful at attracting community member participation



6.0 Barrier Identification

The Accessibility Working Group uses a variety of methods for barrier identification to create a list of barriers to be addressed. This includes, but is not limited to:

- Feedback mechanisms posted on the organization website;
- Management input. Stemming from staff meetings, patient requests and/or family/support persons inquiries;
- Employee input;
- Volunteer engagement feedback;
- Mandatory requirements/legislative targets;
- Occupational Health Services

These barriers can be categorized as follows:

- Physical
- Informational/Communication
- Attitudinal
- Technological
- Policies and practice



7.0 Current Identified Barriers and Multi-Year Annual Plan

This identifies the list of current barriers by type and proposed resolution to remove each barrier

Type of Barrier	Description	Resolution	Timeline
(a) Physical	Client Washroom Accessibility	Install automatic door openers to all washrooms (King Street Location)	2023/2024
(b) Physical	Accessible entry ways	Through the redesign of the CT Nuclear Medicine Department, NBRHC will be installing automatic door openers to main entrance of department and entrances to each imaging room.	2024/2025
(c) Physical	Exterior Concrete Refurbishment	In partnership with contracted maintenance at 50 College, identify each spring lips in concrete that would create a barrier for anyone with mobility challenges	2024/2025
(d) Physical	Exterior Accessible Space for Families	In partnership with the Foundation, create a shade structure with accessible elements for visitors to enjoy outside of the Cafeteria	2024/2025
(e) Physical	Accessible Ceremonial Grounds	In partnership with the Foundation and Aboriginal Services, creating an accessible walking path to the Ceremonial Grounds	2024/2025
(f) Physical	Automatic Door Openers	ADOs added to main entrance of Cartier Site	2024/2025
(g) Physical	Patient Room Door Widening	Patient doors to be widened for accessibility purposes at Cartier Site	2024/2025
(h) Physical	Rehab entrance	Modifying entrance to be more friendly for mobility issues	2024/2025
(i) Physical	Wordplay accessibility	Kirkwood RMC – developing accessible washrooms and installing automatic door openers	2024/2025
(j) Technological	Website review	Review existing website design for compatibility related to ADOA standards	2024/2025
(k) Informational	Graphic Design Course	Participate in education to gain future knowledge on accessibility and graphic design	2024
(I) Informational	Continuing Education	Accessibility committee members taking course (Gentle persuasion)	2024/2025



8.0 Highlights of Achievements Completed 2018-2024

This describes the barriers previously identified and completed by NBRHC

Type of Barrier	Description	Resolution
(a) Physical	Inpatient physio gymnasium ramp	Constructed an accessible ramp and landing for the exterior door for the inpatient physio gymnasium
(b) Physical	Day Surgery Doors	Installed a hold open device to one of the main doors in the Day Surgery Department
(c) Physical	Diabetes Resource Centre Door	Door opening at Diabetes Resource Centre was widened for accessibility purposes and an automatic door opener was installed
(d) Physical	Human Resources Door	Automatic door opener installed to the main entrance of Human Resources
(e) Physical	Clinical Records Door	Door opening in Clinical Records was widened for accessibility purposes
(f) Physical	Maple Lodge Entrance	Door opening to Maple Lodge Entrance was widened for accessibility purposes and a automatic door opener was installed
(g) Physical	Birch Lodge Entrance	An automatic door opener was installed to Birch Lodge Entrance
(h) Physical	Northern Lights	Installed a hold open device to the storage room on Northern Lights
(i) Physical	Parking	Updated accessibility parking lot sizing to standards throughout the property
(j) Physical	D3 Utility Room	Removed hopper in D3 Soiled Utility Room for additional space
(k) Informational	Wayfinding maps	Updating all maps to be more patient friendly



9.0 Review and Monitoring Process

The Accessibility Working Group will meet quarterly to review progress toward goals and targets outlined in this multi-year accessibility plan.

As per the Terms of Reference of the Accessibility Working Group – Appendix A, subworking groups will be formed as needed to facilitate implementation and to foster a collaborative process that will ensure compliance and attention to other priority issues.

As indicated in the IASR legislation, annual progress reports on the multi-year plan will be produced and reported publicly on external and internal websites.

All accessibility planning documentation and reporting will be available in alternate formats and/or with communication support, upon request.

10.0 Communication of the plan

- The 2024 2029 Multi-Year Accessibility Plan will be posted on the NBRHC internal and external websites;
- Printable versions will be made available upon request from the Public Relations department;
- Chair will communicate the Multi-Year Accessibility Plan with managers, via email;
- Managers will communicate the publication of the Multi-Year Accessibility Plan to staff at unit/department meetings and committees, when applicable;
- The Multi-Year Accessibility Plan will be made available in alternate formats and/or with communication support, upon request.



APPENDIX A

The North Bay Regional Health Centre

Accessibility Working Group

Terms of Reference

Purpose

The Accessibility Working group representing the North Bay Regional Health Centre 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 into our services.

Objectives

- The Working Group will have an understanding of the organizations' facilities, by-laws, legislation, policies, programs, practices and services;
- The Working Group will have an understanding of the barriers to access issues for people with disabilities;
- People living with disabilities will be represented in all Accessibility Committee initiatives;
- The Working Group 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, endorse, submit, publish and communicate the plan.
- g) Review and monitor the plan

Membership

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

- Extended Leadership
- Facilities Management
- Technological Service Delivery (IT/IS)



- Rehab and Allied Services
- HR Labour
- Planning and Development
- Nursing and/or Professional Practice
- Staff representation from the three portfolios
- Community members with disabilities
- Community Partners
- Communications/Public Relations
- 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 a sub working group 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 up to a maximum of 4 times per year, as agreed upon by the working members. Further meetings will be schedule based on need.

Reporting Relationship

To the Senior Leadership Team of NBRHC.

An annual formal review of the plan will take place in September in preparation for the annual status report on the progress of measures taken to implement the strategy. The multi-year plan will be updated minimally once every five years.