



St. Joseph's

HEALTH CENTRE GUELPH

Serving with Compassion, Care and Courage

**ACCESSIBILITY PLAN
FOR
ST. JOSEPH'S HEALTH CENTRE GUELPH
OCTOBER 2018 – DECEMBER 31, 2021**

Submitted to

St. Joseph's Health Centre Guelph Senior Leadership Team
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Executive Summary

The Ontario government passed the Accessibility for Ontarians with Disabilities Act (AODA) in 2005. It is the goal of the government of Ontario to make Ontario accessible by 2025.

This accessibility plan (August 2018 – Dec 31, 2018) describes the measures that St. Joseph's Health Centre Guelph (SJHCG) has taken in previous years, and the measures that will be taken moving forward, to remove barriers to people with disabilities. These barriers impact those who live, work in, or use the facilities and services within SJHCG, including residents and their families, staff, healthcare professionals, volunteers, and members of the community.

In fulfilling our mission, and in alignment with our values of compassion, accountability, respect, and excellence, SJHCG strives to provide accessible care in a manner that respects the dignity and independence of people with disabilities. We are also committed to ensuring that all patients have an equal opportunity to obtain, use, and benefit from our programs.

SJHCG prepared this accessibility plan in compliance with the Ontarians with Disabilities Act (ODA) and the Accessibility for Ontarians with Disabilities Act (AODA), Integrated Accessibilities Standards Regulation (IASR).

Aim

This multi-year plan outlines SJHCG's strategy to identify, prevent, and remove barriers to address the current and future requirements of the Accessibility for Ontarians with Disabilities Act (AODA), Integrated Accessibilities Standards Regulation (IASR).

In accordance with the requirements set out in the AODA and IASR, SJHCG will:

- Post this plan on our website,
- Provide this plan in an accessible format, upon request, and
- Review and update this plan at least once every three years

Description of St. Joseph's Health Centre Guelph

St. Joseph's Health Centre Guelph (SJHCG) is a facility with 326 beds, comprised of 240 Long Term Care (LTC) beds, 59 Complex Medical beds, and 27 Rehabilitation beds.

A large portion of our resident and inpatient population have mobility issues and/or dementia and; therefore, our facility design was geared to meet physical and cognitive needs. The facility also has a variety of day programs and an overnight stay program 7 days per week within our Adult Day Centre. Outpatient Physiotherapy, Occupational Therapy, Speech Language Pathology, and Bone Densitometry services are available within our site. Additionally, physician clinics include Ophthalmology, Rheumatology, and Geriatric Medicine to support our community clients.

Our Mission

In the spirit of the tradition of service of the Sisters of St. Joseph and the healing mission of Jesus Christ, we serve Guelph and Wellington County as leaders in Long Term Care, Complex Medical, Rehabilitation, and Outreach Services. We contribute to improved knowledge and innovative service delivery through education and research.

Values

In our belief that Life at all stages is Sacred, we commit to serve our community with:

Compassion:

We attend to the needs of every person with sensitivity, empathy, and kindness.

Accountability:

We take responsibility for our actions and deliver on our commitments.

Respect:

We treat one another with dignity, honesty and understanding.

Excellence:

We provide exemplary care through innovation, teamwork, and best practice.

The Accessibility Working Group

The Accessibility Working Group at SJHCG utilizes a committee approach to address and involves people with disabilities in our processes for barrier identification, removal, prevention and planning to meet requirements for compliance set out in the Accessibility for Ontarians with Disability Act (AODA) and Integrated Accessibilities Standards Regulation (ISAR).

Accessibility Working Group

The Working Group has several departmental representatives across various programs/ services within our facility:

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- Environmental Services**
 - Rehabilitation Services**
 - Recreation Therapy**
 - Outreach Services**
 - Volunteer Services**
 - Housekeeping**
 - Community Representative**

Recent Barrier Removal Initiatives 2017-2018

There were several changes made to the facility in order to improve accessibility and safety for all members of the SJHCG community. The following are key changes made to our facility:

Completed Barrier Removal Activities 2017-18	Barrier Type
Incorporating bigger font into Recreation calendars	Communication
Implementation of microphone use for residents at resident council meetings	Communication
Volunteer way finding support -front lobby main building	Communication
Using alternate room availability for volunteers visiting residents to mitigate heat sensitivities experienced by the volunteer	Physical Adaptation
Two auto door mechanisms implemented in Fergus outreach site	Physical Adaptation
Door frames and ramps implemented at Fergus site	Physical Adaptation
LTC Equipment purchases for improving accessibility - and falls prevention	Physical Adaptation
Driveways repaving in July 2018	Physical Environment
Carpet replacement in Main building by Mar 31, 2018	Physical Environment
Grinding of all sidewalks along the front and north courtyard	Physical Environment
Driving assessment appointment separated into two sessions on different days with integration of vehicle adaptive modifications to support client anxiety towards driving evaluation	Systems

Barrier identification methodologies at SJHCG:

Methodology	Description	Status
Feedback collected from various internal Health Centre committees	Feedback from various facility committees are collected to identify barriers and facility staff are encouraged to identify and report on potential barriers (e.g. feedback from Emergency Response Committee , Occupational Health and Safety inspections, Adverse Event and Near Miss reports, Staff Incident & Hazard reports, monthly departmental meetings /concerns)	On-going
Discussions with Staff	Managers connect with staff in their areas to identify potential barriers. Patient safety is a standing agenda item on monthly management and department meetings where safety and accessibility concerns can be raised.	On-going
Consultation with Resident and Family Council	Concerns and suggestions received from Resident and Family Council. Neighbourhood meetings offer the opportunity to identify accessibility concerns as they arise.	On-going
Senior Team And Continuous Quality Improvement (CQI) Safety Walkabouts	Members of Senior Management Team meet approximately once a month with a specific department or neighbourhood to review potential safety or accessibility risks. Recommendations from the Walkabouts forwarded to the Accessibility Committee.	On-going
Joint Occupational Health and Safety Walkabouts	Monthly department walkabouts to identify safety issues / concerns. Accessibility concerns identified sent to the Accessibility Committee.	On-going
Patients, Families, and Visitor feedback	Accessibility feedback from patients, families, and visitors brought forward to the attention of program Managers and Accessibility Committee.	On-going

Methodology	Description	Status
Feedback from Community representative and Volunteers with accessibility needs	Walk through of areas within facility	Annual
Feedback from Patient and Family Advisory Committee	Accessibility feedback brought forward to the Accessibility Committee.	On-going
Membership within Ontario Health Care Network of Accessibility Professionals (OHCNAP)	Online access to current accessibility inquiries and resolution approaches made by other organizations across the province.	Ongoing

ACCESSIBILITY WORK PLAN 2018 -2021

BARRIER REMOVAL ACTIVITIES

Previous accessibility barriers and new identified barriers captured and aligned into 3-year work plan.

Location	New Barriers Identified 2018-21	Barrier Type	Year 1, 2 , 3
Lobby /OP SLP/PT/OT	Wayfinding signage to OP Therapy services is not easily identifiable. Location signage for "Information" not immediately visible at front entrance.	Communication	Yr 2 Complete by Mar 31, 2020
Facility	Need for signage for identification of levels / neighbourhoods / auditoriums for the facility in Main lobby.	Communication	Yr 2 Complete by Mar 31, 2020
Facility	Sound and strobe light augmentation to code alert system, target 2022 to 2024 . Background work has been initiated for upgrade through Siemens	Communication	Yr 3 Complete by Mar 31, 2021
Level 2 Main building	Raised toilet seat for client washroom missing - recommended floor to seat height 21 inches.	Physical Adaptaton	Yr 1 Complete by Mar 31, 2019
Double doors on patient/resident	Physical challenges accessing care unit double doors via key code entry on wall mounted key pad. Patients and Residents need staff support to open doors entering the care unit if closed.	Physical Adaptaton	Yr 3 Complete by Mar 31, 2021
Facility	Pull cords in visitor washrooms need to extend to base board level to enable access for someone that has fallen to the floor. Carryover to other units.	Physical Adaptaton	Yr 2 Complete by Mar 31, 2020
Level 4 AB	White boards in dining rooms are very high and different marker colours are difficult for low vision clients	Physical Adaptaton	Yr 1 Complete by Mar 31, 2019
Level 2Main lobby	Lack of main lobby accessible washroom. Need for gender inclusive and w/c accessilbe washroom in main lobby.	Physical Environment	Yr 3 Complete by Mar 31, 2021
Level 2 Main building	Storage of mobility devices in resident washrooms reduces access. Some rooms require large space for bariatric w/c or oversized mobility devices	Systems	Yr 1 Complete by Mar 31, 2019

Availability of Accessibility Plan

A copy of the finalized plan will be made available to the public through the SJHCG web site (www.sjhcg.ca). A copy of the plan will also be available in SJHCG Library.

Upon request, printed copies can be provided in large print format.