

Quinte Health 2014-2016 Accessibility Plan

*Prepared and Approved by the
QHC Accessibility Planning Committee
December 2013*



This publication is available on the hospital's website
(www.qhc.on.ca)
as well as in other accessible formats upon request to the QHC Communications Department

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1. Executive Summary

Quinte Health Care is committed (QHC) is committed to excellence in serving all customers and to being responsive to the diverse needs of all its residents by striving to provide safe and equal access to its programs, services and facilities, in accordance with the Ontarians with Disabilities Act, 2001 and the Accessibility for Ontarians with Disabilities Act (AODA), 2005. All persons with disabilities who visit, work for, or use the hospital facilities, services, and properties will have access to safe and barrier-free environments, programs and services. In order to ensure accessible facilities, services and properties we must eliminate barriers that limit fair and accessible care for our patients, their families, staff and visitors.

This is the seventh Accessibility Plan prepared by Quinte Health Care. The following plan is our vision for continuously building an accessible organization over the next three years (2014-2017). The plan was prepared by the QHC Accessibility Committee and describes:

- The actions that QHC has taken in the past year to meet accessibility requirements, and
- The actions QHC plans to take over the next three years to identify, remove, and prevent barriers to persons with disabilities, who live, work in or use the facilities and services of QHC. This includes but is not limited to patients and their families, staff members, volunteers, and members of the community at large.

QHC has committed itself to

- The continual improvement of access to its facilities, services, programs and practices for persons with disabilities who may attend at the hospital as visitors, patients, staff, or volunteers, and
- The participation of persons with disabilities in the development and review of its accessibility plans and improvements

We are pleased to introduce the Quinte Health Care Accessibility Plan (2014-2017) which supports our strategic directions to provide an exceptional patient experience and to be an exceptional workplace and encompasses the Integrated Standards of the Accessibility for Ontarians with Disabilities Act.

2. Statement of Commitment

QHC is committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility and meeting accessibility requirements under the Accessibility for Ontarians with Disabilities Act

3. Description of Quinte Health Care

Quinte Health Care provides a wide range of high quality health care services to 160,000 people living in the diverse region of Prince Edward and Hastings Counties and the southeast portion of Northumberland County. Care is provided through four hospitals – QHC Belleville General Hospital, QHC North Hastings Hospital, QHC Prince Edward County Memorial Hospital and QHC Trenton Memorial Hospital – and includes four emergency departments, operating rooms at three sites, a rehabilitation day hospital, children's treatment centre, ambulatory care clinics, community mental health programs and a range of diagnostic services. There are 255 inpatient beds for acute medical patients, intensive care, obstetrics, paediatrics, mental health, complex continuing care, rehabilitation and surgery.

4. QHC Accessibility Planning Committee

QHC has a robust Accessibility Planning Committee which is endorsed by the corporate Operations Committee. This committee was revitalized in August 2013 and its purpose is to:

- Review by-laws, policies, programs, practices and services that may cause barriers to people with disabilities and make recommendations for improvement
- Review feedback received internally and externally regarding barriers to people with disabilities and respond accordingly
- Monitor the implementation and compliance with the five standards in the Accessibility for Ontarians with Disabilities Act, 2005
- Conduct annual barrier analysis at all four hospitals and use information gathered to inform and prioritize the physical barriers to be addressed in the following year
- Prepare the annual Accessibility Plan update and the multi-year Accessibility Plan
- Report bi-annually to the Corporate Operations Committee on activities and accomplishments

Members of the QHC Accessibility Planning Committee include broad representation from both clinical and non-clinical areas of the hospital as well as individuals from our local communities living with disabilities.

5. Barrier Identification and Prioritization

Definition of a Barrier (AODA 2005)

QHC employs the definition of a barrier as outlined in the AODA, 2005:

- “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, information or communication barrier, a technological barrier, a policy or a practice

QHC has adopted a standard approach to identifying barriers to accessibility at all four hospitals and a subsequent prioritization process. The goal of this process is to identify, measure, remove and prevent barriers to persons with disabilities. The standard barrier analysis tool ensures the following barrier types are identified:

- Physical & Architectural
- Information and Communication
- Technology
- Attitudinal
- Organizational

In addition to the annual physical barrier analysis conducted by the QHC Accessibility Planning Committee members, other streams of information regarding barriers to accessible are sought through the corporate electronic incident reporting system, the corporate patient relation process and the corporate Security reporting system.

The prioritization of when each identified barrier is to be addressed is based on the following criteria:

- Legislative requirements
- Frequency with which the barrier has been identified
- Risk associated with the barrier for staff, patients and visitors
- Availability of a solution
- Availability of resources to remedy the barrier (i.e. timing, cost, human resources)

6. Report on Accessibility Actives during 2013

The following table highlights the achievements of QHC in enhancing and ensuring accessible services, facilities and care.

Integrated Service Standard	Achievements
Customer Service	All policies related to the Customer Services standards have been reviewed and prioritized for revisions.
	A new physical ramp was created at the base of a parking lot at our Belleville General Hospital. This was to address the many concerns expressed by staff, patients and visitors in regards to the inaccessibility of the parking lot to the main hospital.

General Requirements	A new multi-year Accessibility Plan has been developed and implemented.
	An annual status report on Accessibility activities for 2013 has been completed.
	A standard learning module on the Ontario Human Rights Code related to disabilities has been developed and implemented through our online eLearning system. This module is included in our mandatory training for all staff, volunteers and persons who participate in providing services to patients and visitors and is expected to be completed by all in 2014.
Information & Communication	Emergency Response information has been made available on the internal and external hospital websites. This information provides details on the various Emergency Codes adopted by QHC and how to report any type of emergency situation once identified.
Employment Standards	Several key policies regarding our recruitment and selection processes, disability management and being an equal opportunity employer have all been updated and implemented.
Transportation Standards	No required action in 2013

7. QHC Accessibility Plan 2014-2017

The following table provides our Accessibility Plan for 2014-2017

Identified Barriers and Standards	Actions		
	2014-2015	2015-2016	2016-2017
Customer Service	Ensure a compliance rate of 100% with the new Human Rights training	TBD	TBD
	Complete revisions of existing accessibility policies		Review and refresh Accessibility policies in accordance with corporate policy framework requiring all policies be reviewed and updated every 3 years.
	Conduct a customer satisfaction survey for individuals with hearing and vision impairments.		

General Requirements	Implement process for employees to use when designing, procuring or acquiring self-service kiosks	Inspect existing self-service kiosks to determine necessary upgrades to improve accessibility	TBD
	Provide education specific to the Maintenance and Facilities Department on standard principles to guide the installation of any new product or equipment to ensure they are accessible (i.e. paper towel dispensers in public washrooms)	Include standard principles to ensure the accessible installation of products and equipment within the online maintenance request system	TBD
	Secure capital funding to support ongoing physical upgrades to meet or maintain accessible physical spaces at all four hospitals. This is based on the annual barrier analysis.	Review progress of 2014-2015 barrier analysis and reprioritize those still requiring action for 2015-2016	Review progress of 2015-2016 barrier analysis and reprioritize those still requiring action for 2016-2017
	Research each component of the barrier analysis components to better understand and apply during the 2014 barrier analysis review.		
Information & Communication	Ensure all content on external website posted going forward is in compliance with the WCA Guidelines 2.0	Take the necessary steps to ensure existing feedback processes are accessible to people with disabilities upon request	Take the necessary steps to make all publicly available information is made accessible upon request.
	Complete an annual expose on Accessibility in Vital Signs	Complete an annual expose on Accessibility in Vital Signs	Complete an annual expose on Accessibility in Vital Signs

<p>Employment Standards</p>	<p>Communicate across organization the various practices and policies QHC supports to ensure we are an equal opportunity employer.</p>	<p>TBD</p>	<p>TBD</p>
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For More Information on the QHC 2014-2017 Accessibility Plan please contact the QHC Communications Department at:

Phone: 613-969-7400

Email: info@qhc.on.ca