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This policy applies to all employees, members of the professional staff, volunteers, learners, contractors and all persons who have a relationship with SJHH																																																																																									
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## 1.0 Purpose and Goals

The intention of this Policy is to ensure that all persons within St. Joseph’s Healthcare Hamilton (SJHH) Community are aware of their rights and responsibilities to foster an accessible and inclusive environment with and for persons who have disabilities.

This Customer Service Standard of the *Accessibility for Ontarians with Disabilities Act, 2005 (AODA)* requires organizations to identify, remove and prevent barriers for people with disabilities and details specific requirements for all service providers in the provision of goods and services for persons with disabilities.

## 2.0 Definitions

**Disability** (As defined by the AODA):

- a) 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, muteness or speech impediment, hearing impairment or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device;
- b) A condition of mental impairment or a developmental disability;
- c) A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- d) A mental disorder, or
- e) An injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act, 1997*.

**Support Person:** A Support Person is an individual hired or chosen to accompany a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs or with access to goods or services. The Support Person could be a paid Personal Support Worker, a volunteer, a friend or a family member. The Support Person does not necessarily need to have special training or qualifications.

**Personal Care Needs:** May include, but are not limited to, assistance with eating, using the washroom, grooming, transferring person from one location to another.

**Medical Needs:** May include, but are not limited to, monitoring someone's health condition, providing injections, support with seizures.

**Assistive Device:** Assistive devices are technical aids, communication devices, or medical aids modified or customized, that are used to increase, maintain, or improve the functional abilities of persons with disabilities in seeing, hearing, speaking, mobility, walking, breathing, performing manual tasks, learning, working or self-care. Examples of assistive devices include wheelchairs, scooters, and walkers, amplification devices that boost sound for listeners, hearing aids, oxygen tanks, electronic notebooks, laptop computers, and speech generative devices.

**Barrier:** A barrier is defined as anything that prevents a person with a disability from fully participating in all aspects of society because of their disability. It includes a physical barrier, an architectural barrier, information or communication barrier, an attitudinal barrier or a policy, procedure or a practice barrier.

**Discrimination:** Discrimination is an action or a decision that treats a person or a group negatively on grounds protected under the *Canadian Human Rights Act* which includes disability.

**Service Animal:** A Service Animal has been specifically trained to work for or perform tasks for the benefit of a person with a disability. A Service Animal is not a pet. The majority of Service Animals are dogs however other animals may also be used. Examples of Service Animals include hearing or signal animals, seizure alert animals, mobility dogs, mental health support and guide dogs.

A Service Animal is afforded access to all places the public is invited when accompanying their human partner.

Service Animals include animals used by people with autism, mental health disabilities, those with physical or dexterity disabilities as well as others.

### **3.0 Equipment/Supplies**

A list of assistive devices available on SJHH's premises include, but are not limited to; wheelchairs at all entrances; elevators; automatic door openers at main entrances, walkers where possible; paper and pens for hand written notes; large print, digital audio format, Braille; American Sign Language (ASL); Med Bridge for print out discharge information; Talk to You (TTY) telecommunications device for the deaf and telephone amplifiers. These will be made readily available at each facility at the Front Desk Information or other designated locations.

### **4.0 Policy**

St. Joseph Healthcare Hamilton is committed to providing a respectful, welcoming, accessible, and inclusive environment in the provision of goods and services for employees, patients and visitors. SJHH is committed and will strive to ensure, that the *Accessibility for Ontarians with Disabilities Act (AODA)*, the AODA Standards and all other relevant legislation concerning accessibility are rigorously observed.

SJHH will provide all goods and services in a way that respects the dignity and independence of people with disabilities. Services will be provided in a manner that takes into account the person's disability(ies). This Policy applies to all people working at or for St. Joseph's Healthcare Hamilton.

This Policy also applies to SJHH activities occurring on premises or off-site activities.

#### **4.1 Providing Goods and Services to People with Disabilities**

People with disabilities will be given the same opportunity to access our goods and services and allow them to benefit from the same services, in the same place and in a similar way as other customers.

#### **4.2 Communication**

SJHH service providers will communicate with people with disabilities in ways that respect the dignity and independence of people with disabilities. This includes, but is not limited to, large print, Braille, American Sign Language (ASL), la langue des signes Quebecoise (LSQ), captioning and videos that may be helpful to some people who have certain learning disabilities.

**Format of Documents** - SJHH will provide information or documentation, as required, in a format that takes into account the person's disability and accommodates their need for accessible format. SJHH and the person with a disability will agree upon the format to be used for the document or information.

#### **4.3 Inclusive Meetings**

SJHH will strive to ensure that meetings are inclusive, planned and are organized in a manner that integrates products and services that maximize the participation of persons with disabilities.

#### **4.4 Assistive Devices**

People with disabilities have the right to use their own assistive devices to obtain, use or benefit from SJHH's goods and services. SJHH will ensure that all employees, physicians, volunteers and others dealing with the public are trained and familiar with various assistive devices that may be used by persons who have disabilities while accessing our services.

#### **4.5 Telephone Services**

SJHH will provide accessible telephone service, including but not limited to, Talk to You (TTY) and telephone amplifiers to relay services and will train all applicable employees, volunteers and others dealing with the public about how to communicate over the telephone in clear and plain language.

#### **4.6 Disruption in Services**

SJHH will provide customers with notice in the event of a planned or unexpected disruption in the facilities or services usually used by people with disabilities. This notice will include information about the reason for the disruption, its anticipated duration, and a description of alternative facilities or services, if available.

#### **4.7 Training**

SJHH will provide training to all employees, physicians, volunteers and others who deal with the public or other third parties on SJHH's behalf, and all those who are involved in the development and approvals of customer service policies, practices and procedures.

#### **4.8 Service Animals**

We are committed to welcoming people with disabilities who are accompanied by a Service Animal on the parts of our premises that are open to the public and other third parties. We will also ensure that all staff, volunteers and others dealing with the public are properly trained in

how to interact with people with disabilities who are accompanied by a Service Animal.

#### 4.9 Support Persons

We are committed to welcoming people with disabilities who are accompanied by a Support Person. Any person with a disability who is accompanied by a Support Person will be allowed to enter SJHH's premises with his or her Support Person. At no time will a person with a disability who is accompanied by a Support Person be prevented from having access to his or her Support Person while on our premises. No admission fee or fare will be charged to a Support Person.

### 5.0 Procedure

#### 5.1 Use of Service Animals ([Appendix A](#))

##### 5.1.1 Identification

To be considered a Service Animal under the Customer Service Standard of the AODA, it must either be **readily apparent** that the animal is being used because of a person's disability or the person with the disability must provide a letter from a regulated health professional confirming that it is required because of their disability. If in doubt, consult with a Patient Relations/Risk Management Specialist.

It may be "**readily apparent**" that an animal is a Service Animal by its appearance or by what it is doing. For example:

- The animal is wearing a sign that identifies it as a Service Animal, a harness or saddle bags;
- The animal has a certificate or identification card from Service Animal training school;
- The animal has an identification card from the Attorney General of Ontario;
- The person is using the animal to assist him or her in doing things such as opening doors or retrieving items.

##### 5.1.2 Infection Prevention and Control

For the protection of both the service animal and people at the healthcare facility, the animal should be prevented from entering the premises starting from the onset of and until at least 1 week beyond the resolution of:

- Episodes of vomiting or diarrhea;
- Urinary or fecal incontinence;

- Episodes of sneezing or coughing of unknown or suspected infectious origin;
- Treatment with non-topical antimicrobials or with any immunosuppressive doses of medications;
- Open wounds;
- Ear infections;
- Skin infections or “hot spots” (i.e. acute moist dermatitis);
- Orthopedic or other conditions that, in the opinion of the animals veterinarian, could result in pain or distress to the animal during handling and/or maneuvering with the facility; and
- Temporarily exclude any animal with fleas, ticks or mange and treat as directed by the animal’s veterinarian until the infestation has cleared, as determined by a veterinarian.

### **5.1.3 Responsibilities**

#### **The Owner of the Service Animal Must:**

- Maintain control and stewardship of the Service Animal at all times (i.e. the Service Animal’s behavior, care, supervision and wellbeing);
- Be responsible for any damages caused by the Service Animal;
- In a workshop or event, if someone is severely allergic to the Service Animal, it is best to separate the individuals, or speak to the individuals involved to find a solution that accommodates both individuals;
- Inform hospital staff as early in the pre-admission process as possible of the need for the animal to stay with them in hospital;
- Pre-plan for a support person, if necessary, if they are unable to care for the Service Animal, and the support person must stay and assume responsibility for care of the animal;
- Insure that the Service Animal is clean, and parasite free;
- Insure that the Service Animal is healthy and current with immunizations and be able to provide up to date immunization records if requested;
- Clean up any animal excreta (urine, vomitus, feces) promptly and wear gloves to do so (all organic waste, paper towels or hospital disinfectant wipes must be placed in a sealed plastic bag and placed in a trash container); and
- Must practice good hand hygiene in order to protect both the Service Animal and all other persons in the Hospital.

#### **Eviction or Exclusion**

Eviction or exclusion of a Service Animal must be for reasons that are demonstrable, not speculative. Assumptions or speculation

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about how the animal is likely to behave based on past experience with other animals are not valid. If another person complains about the presence of a Service Animal (because of allergies, fear, or other reasons not related to the animal's demeanor or health), the person with objections to the animal should be separated and/or remove themselves from the area the animal is situated. Each situation is to be considered individually and in consultation with the owner. Discussion with a Patient Relations/Risk Management Specialist is recommended in difficult situations.

A Service Animal may only be evicted, excluded or separated from its owner if the animal's actual behavior poses a direct threat to the health or safety of others; or if the attending physician has sound medical reasons. These circumstances and rationale must be documented in the patient's health record.

**Area Charge Person Must:**

- Inform staff about the role of the Service Animal and how to interact appropriately with the patient and the animal;
- Discuss with owner their responsibilities for feeding, handling and cleaning issues; and
- Notify other patients of the Service Animal and address any concerns (i.e. allergies).

**Staff and Physicians are not to:**

- Separate or attempt to separate a patient from their Service Animal without owner consent;
- Touch a Service Animal or the person it assists, without permission;
- Pet or make noise at a Service Animal as this may distract the animal from the task at hand;
- Deliberately startle a Service Animal; and
- Provide care for the Service Animal.

**5.1.4 Provision of Services**

**Access**

When a Service Animal accompanies a patient, visitor, employee or medical staff member, the animal is granted access into all areas of the hospital permitted to others except those areas that require special precautions/attire (i.e. masks, gowns) and alternatives are not available (i.e. Operating Room).



- All reasonable efforts are to be made to accommodate the patient with a Service Animal.
- Service Animals may accompany their owner to areas where food is normally served, sold or offered for sale.
- Restricted Areas: In accordance with the Health Promotion and Protection Act, Service Animals are not permitted to enter areas where sterile procedures occur. This includes but is not limited to:
  - Operating rooms;
  - Neonatal nurseries;
  - Minor procedure rooms or room where sterile interventional procedures occur;
  - Clean/sterile supplies storage areas;
  - Medication preparation and storage areas or carts;
  - Food preparation areas; and
  - Any rooms where radiation exposure may occur.

### **Health Care Provision**

If a Health Care Provider does not agree to provide care to a patient with a Service Animal, the Health Care Provider is responsible to find an alternate professional who will provide that care and document this in the patient's health record.

### **Waiver of Rights**

If the patient with a Service Animal after being informed of risks related to having the Service Animal present, wishes to assume the risk(s) and waive any health and safety requirements in relation thereto to ensure their Service Animal is not separated from him/her, the health care provider is to document this waiver in the patient's health record. A patient may only waive such health and/or safety risks that will not affect others adversely/put others at risk.

### **Outpatient Procedures or Clinic Appointments**

All reasonable efforts are to be made to accommodate a patient with a Service Animal if no advanced notification occurs.

If a patient coming to the facility for treatment knows that they will be separated from their Service Animal during the treatment they should prearrange for a support person to assume responsibility of the animal.

## **Inpatient Units**

- Each admission of a patient with a Service Animal will be assessed individually.
- Ideally the patient will be placed in a private room.
- The Service Animal is to remain with the patient at all times.
- Nursing staff must notify receiving support departments in advance (i.e. patients transport, diagnostic imaging) when a patient will be accompanied by a Service Animal.

## **Emergency Patient Admissions**

Conscious patients able to manage the animal are not to be separated unless the owner gives consent. For arriving unconscious patients with a Service Animal, a staff member will temporarily assume care while a next of kin or support person is notified to come to the hospital and assume responsibility for the animal during the transition period. The Service Animal may be brought to the hospital to visit and to resume its duty as soon as possible

## **5.2 Support Persons ([Appendix B](#))**

### **5.2.1 Use of a Support Person**

In certain cases people with disabilities may be required to be accompanied by a Support Person for health and safety reasons. SJHH must:

- Ensure that both persons are permitted to enter the premises together and that the person with a disability is not prevented from having access to the Support Person while on the premises;
- Grant access to the Support Person to any area of the hospital that the person with the disability requires access to;
- Not grant access to the Support Person, any patient or employee to an area that will cause risk to themselves;
- Ensure that all reasonable efforts are made to accommodate the person with a disability and their Support Person; and
- Not charge the Support Person any admission fee or fare, if one exists.

### **Eviction or Exclusion**

Eviction or exclusion of a Support Person must be for sound medical reasons. A Support Person may only be evicted, excluded or separated from the patient if:

- The Support Person's actual behavior poses a direct threat to the health or safety of others; and/or
- If the attending physician has sound medical reasons. These circumstances and rationale must be documented in the patient's health record.

### **Outpatient Procedures or Clinic Appointments**

All reasonable efforts are to be made to accommodate a patient with a Support Person if no advance notification of their attendance occurs.

### **Emergency Patient Admissions**

When entering the Emergency Department, conscious patients are not to be separated from their Support Person unless the patient gives consent. If patient arrives with a Support Person and is unconscious, the Support Person needs to temporarily separate from the patient.

## **5.2.2 Responsibilities**

### **Area Charge Person**

Inform staff about the role of the Support Person and how to interact appropriately with the patient and the Support Person.

### **Staff and Physicians**

Are not to separate or attempt to separate a patient from their Support Person without patient consent unless there are actual sound medical reasons.

## **5.2.3 Provision of Services**

### **Health Care Provision**

If a Health Care Provider does not agree to provide care to a patient with a Support Person, the Health Care Provider is responsible to find an alternate professional who will provide that care and document this in the patient's health record.

### **Waiver of Rights**

If the patient provides consent for the Support Person to be present as it relates to personal health information being shared, the Health Care Provider is to document this consent in the patient's health record.

If the Support Person is informed of the risks related to being present during a procedure that may pose some risk(s) (i.e. an x-ray) this consent must be included in the patient's health record, a copy must also be provided to the Support Person. A patient or Support Person may not waive any health and/or safety risks that will have an adverse effect on themselves or others.

### **5.3 Disruption in Service**

In the event of a planned or unexpected disruption in services used by people with disabilities, it is the responsibility of Building Services to:

- Post notice for the public regarding the disruption including the reason for the disruption, its anticipated duration, and a description of alternative facilities or services, if available; and
- Place the notice in obvious locations on the premises, such as building entrances, information desks, public entrances, reception desks, welcome centres, and on our website.

### **5.4 Feedback Process**

SJHH supports individuals with disabilities through giving the opportunity to provide feedback on our services. The process for providing feedback is via e-mail, verbally, suggestion box or through the database for comment. Patients and visitors may also be directed to Patient Relations. <http://www.stjoes.ca/patients-visitors/accessibility>

### **5.5 Assistive Devices**

In the event that the assistive device appears unsafe SJHH will speak with the person using the assistive device to determine whether they have access to another assistive device of their choice or, with the person's consent, attempt to identify and temporarily provide a substitute assistive device.

## **6.0 Documentation**

None.

## **7.0 References**

### **7.1 External References**

The legal requirements of the accessibility standards for customer service are set out in *Ontario Regulation 429/07*, <https://www.ontario.ca/laws/regulation/070429>  
*Ontario Human Rights Code* <http://www.ohrc.on.ca/en/ontario-human-rights-code>

*Ontarians with Disabilities Act, 2001*

<https://www.ontario.ca/laws/statute/01o32>

*Ontario Blind Person's Rights Act*

<https://www.ontario.ca/laws/statute/90b07>

*Accessibility for Ontarians with Disabilities Act, 2005*

<https://www.ontario.ca/laws/statute/05a11>

Centre for Disease Control & Healthcare Infection Control Practices  
Advisory Committee Recommendations 2003

Duncan SL. APIC State of the Art Report: the Implications of Service  
Animals in Health Care Settings. *Am. J. Infect. Control* 2000; 28:170-180.

Sandra L. Lefebvre, et al. *AJIC*, Guidelines for Animal-Assisted  
Interventions in Health Care Facilities, 2008; 36:78-85

Health Promotion and Protection Act; R.R.O. 1990, Regulation 562, Food  
Premises

## **7.2 Internal References**

149-ADM - Code of Conduct/Standards of Behaviour Policy

All current SJHH internal Policies and Procedures, education materials and  
practices.

## **8.0 Acknowledgements**

Mt. Sinai Hospital, General Manual - Policy/Procedure: Use of Service Animals,  
May 2009

Sunnybrook Health Sciences Centre, Accessibility: A Culture of Inclusion, Service  
Animals

## **9.0 Author(s)**

Director, Human Resources

## **10.0 Sponsor**

VP, P&OE

## **11.0 In Consultation With**

Occupational Health & Safety  
Infection Prevention & Control  
Risk Management  
Public Relations  
Patient Relations  
Building Services  
Redevelopment  
AODA Committee

## 12.0 Posting Dates

Initial Posting Date: 30/01/2010

Posting Date History: 07/18/2016, 07/21/2017

## 13.0 Scheduled Review Date

01/08/2020

## 14.0 Attachments/Appendix

Appendix A - Types of Service Animals

Appendix B - Functions of a Support Person

## Appendix A- Service Animals

### 037-HR

A service animal has been specifically trained to work for or perform tasks for the benefit of a person with a disability. A service animal is not a pet. The majority of service animals are dogs however other animals may also be used. ***A service animal is afforded access to all places the public is invited when accompanying their human partner.***

The following Chart lists some types of key tasks that a Service Animal may perform as well as those who may use Service Animals.

Type of Service Animal	Key Tasks Performed	Owner of Service Animal
Service Dog for children with Autism	Keeps a child from running into danger and provides assistance when sensory stimulus is heightened. Service Dog is attached to the child's waist by a belt and is held with a leash by an accompanying adult.	Person or child with Autism or other developmental or intellectual disability
Guide Dog, Dog Guide or Seeing Eye Dog	Follows direction of owner, alerts owner to changes in elevation (i.e. curbs, stairs) and any obstacles in the owner's path.	Person with vision loss or vision impairment
Hearing Alert Dog, Cat or other animal	Alerts owner to sounds often by way of a nudge or pawing and leads owner to the source of the sound. May use a special signal to alert owner of fire alarm.	Person who is deaf, oral deaf, deafened or has a hearing impairment
Psychiatric Service Dog	Retrieves and prompts the owner to take medication, retrieves or activates Medical Alert Alarm, leads owner out of crowds, etc.	Person with mental health disabilities
Service or Mobility Dog or animal or Special Skills Dog or animal	Pull wheelchairs, carry objects, pull items, turn handles or push buttons such as door openers and provide balance and/or support, etc.	Person with physical disabilities
Seizure Alert Dog, Seizure Response Dog or Seizure Assist Dog or animal	Steers owner from danger during a seizure, activates Medical Alert Alarm and can also alert the owner to an oncoming seizure.	Person with Epilepsy or other seizure disorder

Listed below are *some* of the guidelines for interacting with persons accompanied by a Service Animal. For complete Policy details please refer to **037-HR Accessibility for People with Disabilities (AODA) – Customer Service Standard.**

- All reasonable efforts are to be made to accommodate the patient with a Service Animal.
- The owner of the Service Animal must provide a letter from a regulated health professional confirming that a Service Animal is required because of their disability.
- It may be “**readily apparent**” that an animal is a Service Animal by its appearance or by what it is doing. For example:
  - ✓ The animal is wearing a sign that identifies it as a Service Animal, a harness or saddle bags;
  - ✓ The animal has a certificate or identification card from Service Animal training school;
  - ✓ The person is using the animal to assist him or her in doing things such as opening doors or retrieving items; etc.
- The owner of the Service Animal must:
  - ✓ Maintain control and stewardship of the Service Animal at all times (i.e. the Service Animal’s behavior, care, supervision and wellbeing);
  - ✓ Be responsible for any damages caused by the Service Animal; and
  - ✓ In a workshop or event, if someone is severely allergic to the Service Animal, it is best to separate the individuals, or speak to the individuals involved to find a solution that accommodates both individuals.
- Eviction or exclusion of a Service Animal must be for reasons that are demonstrable, not speculative (i.e. animal’s actual behavior poses a direct threat to the health or safety of others; or if the attending physician has sound medical reasons).
- Staff and Physicians are not to:
  - ✓ Separate or attempt to separate a patient from their Service Animal without owner consent;
  - ✓ Touch a Service Animal or the person it assists, without permission;
  - ✓ Make noise at a Service Animal
  - ✓ Deliberately startle a Service Animal; and
  - ✓ Provide care for the Service Animal.



## Appendix B-Functions of a Support Person 037-HR

Person who is deaf blind	To guide, to provide transportation and adaptive communication such as tactile or adapted American Sign language (ASL), large print notes, print on palm or two-handed manual signing.
Person who is Deaf, deafened, oral deaf	To provide sign language or oral interpretation services - to translate conversation, but not to participate in it.
Person with a learning disability	To help with complex communication or note-taking.
Person with an intellectual/ developmental disability	To help with travel, daily activities, prompting medication, complex tasks, or to keep the person from dangerous situations.
Person with a mental health disability	To help with communication tasks such as completing complex forms. To help in environments such as crowded, noisy settings or high-stress situations such as interviews.
Person with a physical disability	To provide services related to travelling, personal care (i.e. toileting, eating, monitoring medical conditions).
Person with a seizure disorder	To assist in the event of a seizure (i.e. to protect the individual from falls or biting their tongue).
Person with a speech impairment who uses an augmentative or alternative communication system (symbol board, electronic communication system)	To relay or interpret a person's communications
Person with vision loss	To read or to guide