SJHH 2024 – 2027 Accessibility Plan



Accessibility Steering Committee

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Published December 2023 Next Revision date: December 2024

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Accessibility Commitment

A message from SJHH President, Mike Heenan, about the corporate commitment to the 2024 – 2026 Accessibility Plan:

Guided by the vision and values provided to St. Joseph Healthcare Hamilton ("SJHH") by the Sisters of St. Joseph, along with the standards outlined in the province's Accessibility for Ontarians with Disabilities Act which guide our work towards accessibility, SJHH is committed to providing a respectful, accessible and inclusive environment for all patients, employees, volunteers, learners, and visitors.

As demonstrated by our commitment to equity, diversity and inclusion outlined in our Strategic Plan, we will progressively work toward the elimination of barriers to accessibility, and toward building a culture of inclusion at SJHH.

SJHH knows we cannot achieve our AODA promise without engaging our community. SJHH will continue to build reciprocal relationships, sharing and learning from each other for the benefit of all.

Background on St Joseph's Healthcare Hamilton

About St. Joseph's Healthcare Hamilton

As a premier academic and research healthcare organization, St. Joseph's Healthcare Hamilton (SJHH) is committed to making a difference in people's lives and creating a lasting future for our community through integrated health services and internationally recognized programs. Our mission is to provide dynamic research, revolutionary methods in health sciences education, and the highest standard of clinical care in a spirit of compassion, innovation and commitment.

Our Mission

Living the Legacy: Compassionate Care. Faith. Discovery. Every day the thousands of people who work, learn and volunteer at St. Joe's live this mission in pursuit of our vision.



Our Vision

On behalf of those we are privileged to serve, we will deliver an integrated, high quality care experience, pursue and share knowledge, and respect our rich diversity, always remaining faithful to our Roman Catholic values and traditions. We commit ourselves to demonstrate in all that we undertake - the values instilled in our organization by our Founders, the Sisters of St. Joseph of Hamilton.

Our Values

- Dignity
- Respect
- Service
- Justice
- Responsibility
- Enquiry

Overview of Accessibility Committee

The Accessibility Steering Committee (ASC) was established in January 2010 and includes hospital staff, Patient and Family Advisory Committee members, people with disabilities, and community partner representatives.

The ASC meets on a quarterly basis and monitors organization wide accessibility tasks and functions to ensure that SJHH is working to increase accessibility, equity and inclusion for people with disabilities as patients, staff, physicians, learners, volunteers and visitors at the hospital. This is accomplished through the development, monitoring, and reporting of our Multi-Year Accessibility plan.

See Appendix 1 – ASC Terms of Reference (currently under revision).

Accessibility Subcommittees

Members of the Accessibility Committee are assigned to three subcommittees to focus on specific tasks that connect to the Integrated Accessibility Standards described in the AODA. The three subcommittees are:



- Built Environment Accessibility Subcommittee, led by the Manager, Redevelopment
- Employment Accessibility Subcommittee, led by the Manager, Employee Relations & Labour Relations
- Information & Communication Accessibility Subcommittee, led by the Manager of Public Affairs

The subcommittee leads are responsible for coordinating and delegating tasks related to their Integrated Accessibility Standard and reporting quarterly progress reports to the ASC Committee. The leads also coordinate their subcommittee's annual report contributions, to be included in the annual update to the Accessibility Plan.

The ASC Chair works with the subcommittee leads to ensure that target dates are met and provides direction and/or project management support as needed.

Purpose of the Accessibility Plan

The purpose of the SJHH Multi-Year Accessibility Plan is to ensure the hospital has an organized plan with actions and timelines to improve accessibility for people with disabilities. Developing a culture of inclusion is very important to us. Therefore our new Multi-Year Accessibility Plan is directly linked to our Strategic Plan, and our Equity, Diversity, and Inclusion Framework. We are committed to centering the voices of people with disabilities in our work on accessibility and inclusion. People with disabilities will be equal partners in the co-designing and implementation of our Plan. The Plan will also meet the requirements outlined in the Integrated Accessibility Standard as described in Part 1 Section (4) ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT, 2005 Integrated Accessibility Standards.

This accessibility plan applies to all people accessing the organization's facilities and services, including patients, staff, clients, volunteers, learners, families, visitors and other partners.

The objectives of this plan will be to:



- Describe the process by which SJHH identifies, removes, and prevents barriers for people with disabilities;
- Review the progress SJHH made on removing and preventing barriers that were identified prior to 2024;
- Describe SJHH's strategy for identifying, removing, and preventing barriers in the coming years;
- Describe SJHH's strategy related to the training, awareness, communication and integration of accessibility into the culture of the organization;
- Describe how people with disabilities are involved throughout the planning and implementation processes; and
- Describe the ways that SJHH will make this accessibility plan available to the public.

Methods Used to Identify Barriers at SJHH

There are many ways that we identify and address barriers. Feedback on barriers identified by patients, employees, members of the public, advocacy groups, etc. can be sent to any of the following people by email, telephone, mail, fax, or in person:

- Patient Relations Department PatientRelations@stjoes.ca
- Senior Equity, Diversity and Inclusion Consultant EDI@stjoes.ca
- The Supervisor or Manager of the related department

Barriers are also identified through quality initiatives, employee engagement surveys, town halls, leadership forums, team meetings, etc. Accessibility challenges and successes are shared across the organization as part of continuous quality improvement. The hospital's Joint Board of Governor's also receives quarterly reports from the Patient Relations Department on accessibility challenges and successes. Members of the Accessibility Steering Committee



(ASC) will also act as Accessibility Ambassadors, bringing forward recommendations for improved accessibility within the hospital.

The Accessibility Steering Committee (ASC) will receive regular reports from the Patient Relations department and the Senior Equity, Diversity and Inclusion Consultant related to accessibility issues and will be request action be taken by the appropriate area within the organization. These reports will be included in the content of the Accessibility Plan.

This 2024 – 2027 Accessibility Plan also includes plans for accessibility audits to be conducted across all three campuses and satellite locations. Recommendations from these audits will be included in future Accessibility Plans.

Update on Progress from Previous Plan

A. Customer Service Standard Actions

This standard requires goods, services, and facilities to be accessible for people with disabilities.

1. Develop Accessibility Training for All Employees, Volunteers, Learners, and Physicians

Action

Mandatory "Accessibility at St. Joe's" E-Learning was launched in 2020 and is assigned to all new employees, learners, and volunteers upon hire. This training includes Human Rights and Integrated Accessibility Standards Regulation Training. Alternate training formats are available (upon request) to meet the needs of each individual learner.

Status Update: Complete



2. Incorporate Accessibility Criteria and Features into the Procurement Process.

Action

Add language to the Request for Proposal (RFP) process that includes the requirement for accessibility criteria and design features.

Status Update: Complete

B. Information and Communications Standard Actions

This standard requires that information on the intranet and all other communications are accessible to clients with disabilities.

1. The 2014-2021 Accessibility Plan will be Publicly Available.

Action

The 2014-2021 SJHH Multi-Year Accessibility Plan will be posted on the St Joe's intranet page (www.stjoes.ca).

Status Update: Complete

2. Communicate When Services Will Be or Have Been Interrupted or Closed Early Due to Inclement Weather or Mechanical Problems.

Action

Service closures and/or interruptions are communicated internally through email and posters, and externally through posters, www.stjoes.ca and through social media.

Status Update: Complete



3. All St Joe's Websites Should Meet Current Accessibility Standards.

Action

Ensure All St Joe's Websites conform to the World Wide Web Consortium Web Content Accessibility Guidelines 2.0 Level AA

Status Update: Complete

4. The Patient Feedback Process Should be Accessible.

Action

Patient feedback is coordinated by our Patient Relations Department. Patient Relations offers multiple avenues for submission of feedback including:

- By phone: (905) 522-1155 ext. 34952
- By email: PatientRelations@stjoes.ca
- Through the SJHH external website electronic form submission
- Visiting our patient relations specialist offices in person (offices at Charlton and West 5th campus)

The public is given information about how to give feedback in following ways:

- External website
- Patient Rights and Responsibilities document is posted at all campus entrances with patient relations contact information included
- Clinical teams/staff verbal communication to patients and families informing them of patient relations
- Welcome brochure provided to patients and families includes patient relations information/contact

Status Update: Complete

C. Employment Standard Actions

This standard requires an employer to create an equitable workplace environment for people with disabilities (both current and future employees).



1. Availability of Accommodations Must be Shared with All Job Applicants.

Action

The hospital's recruitment policy and practices have been updated to reflect the availability of accommodations during the recruitment process.

Status Update: Complete

2. Accommodations in Employment Processes.

Action

Update existing Occupational Health and Safety and Human Resources policies to include:

- A written process describing the development and documentation of individual accommodation plans, including:
 - o How employees are consulted on the plans
 - How the accommodations are assessed
 - How the employer requests external medical or expert advice
- How performance reviews, career development and redeployment plans take into account accessibility needs and individual accommodation plans.
- A written return to work strategy implemented which outlines the steps the employer takes to facilitate the return to work and includes an individual documented accommodation plan.

Status Update: Complete

D. Design of Public Spaces Standard Actions

This standard focuses on designing public spaces to ensure they are accessible.

1. Development of a Corporate Signage Committee

Strategy

The Redevelopment department is to lead the creation of a Corporate Signage Committee to include roles and responsibilities, signage standards and processes to ensure AODA compliance and standardization of all corporate signage.

Status Update: Complete



2. All New Buildings Will Be Built to AODA "Built Environment" Standards

Strategy

The New Surgical Tower will be designed to include "Braille" in elevator cabs, ramp to computer room, installation of push button door openers, appropriate height of patient devices (i.e. waiting room ticket dispenser, speakers, etc.) and service counters.

Status Update: Complete

3. Review All Designated Parking to Ensure AODA Compliance

Strategy

Review was conducted and additional designated parking spots were added to the Charlton Campus.

Status Update: Complete



Current Accessibility Plan and Actions

A. Overarching Accessibility Actions

1. SJHH Accessibility Steering Committee Refresh

Action

The refresh of the Accessibility Steering Committee will include:

- a) A review of membership to ensure representation from relevant internal departments, people with disabilities, patients, and key community partners.
- b) The revision of the Committee's Terms of Reference, including strengthening the connection of the work of the Committee to the hospital's Strategic Plan and Equity, Diversity and Inclusion Framework.

Target Date: May 2024

2. Develop and Implement a Communications Strategy

Action

Increase awareness of the Accessibility Plan through a communications strategy in order to increase the understanding and involvement of employees, physicians, volunteers, and learners in the work of creating a culture of inclusion at St Joe's.

Target Date: December 2024

3. Update of Accessibility-related Hospital Policies

Action

The Accessibility Steering Committee will review and update the following policies:

001-ADM: Signage and Wayfinding, Bulletin boards and Notices

085-ADM: Language Access Program: Provision of Language Interpreters

001-HR: Recruitment, Selection and Employment



037-HR: Accessibility for People with Disabilities (AODA) - Customer Service Standard

EP & AODA Integration: Emergency Preparedness and Accessibility for Ontario Disabilities Act (AODA) Integration Policy

The policies will be available publicly and in alternate formats.

Target Date: June 2025

4. Accessibility Audits of All Three Campuses and Satellite Locations

Action

SJHH will plan and implement a multi-year Accessibility Audit to identify accessibility successes and challenges which will inform the current and future Accessibility Plans. This project will include the following steps:

- a) Co-designing an Accessibility Audit Framework with people with disabilities, patient representatives and key community partners.
- b) Implementing the Audit in a phased approach across all three campuses and satellite locations.
- c) Developing a Report describing findings and recommendations.
- d) Integrating the recommendations into current and future Accessibility Plans.

Target Date: December 2027

B. Customer Service Standard Actions

This standard requires goods, services, and facilities to be accessible for people with disabilities.

1. Review of On-Boarding Accessibility and AODA Training for Employees, Volunteers, Learners, and Physicians

Action

Review "Accessibility at St Joes" training that employees, volunteers, learners and physicians receive when they start at St Joe's. Ensure the training supports employees, volunteers, learners and physicians to increase the accessibility of all St Joe's services for people with disabilities, and aligns with current AODA mandates. This process will include consultation with the Accessibility Steering



Committee, people with disabilities, patients, and community partners, and will include an evaluation component.

Target Date: December 2024

2. Establish Annual Training for AODA and Accessibility for Employees, Volunteers, Learners, and Physicians

Action

Develop and implement an annual Accessibility and AODA training requirement for all employees, volunteers, learners, and physicians. Ensure that the training supports employees, volunteers, learners and physicians to increase the accessibility of all St Joe's services for people with disabilities, and aligns with current AODA mandates. This process will include consultation with the Accessibility Steering Committee, people with disabilities, patients, and community partners, and will include an evaluation component. This training will be embedded in the current Annual Training process established at St. Joe's. Alternate training formats will be available (upon request) to meet the needs of each individual learner.

Target Date: April 2024

B. Information and Communications Standard Actions

This standard requires that information on the intranet and all other communications are accessible to clients with disabilities.

1. Review and Refresh Existing External Web Pages

Action

Enhance the accessibility of St Joe's external web pages to include leading accessibility design features.

Target Date: December 2024



2. Enhance the Existing Internal Accessibility Web Page

Action

Enhance the Accessibility Intranet Page to ensure key information regarding accessibility is made available to staff. This will include information about access and disability-related:

- a) Announcements and events
- b) Resources to increase accessibility (links to external websites, articles, etc.)
- c) Trainings
- d) Information on AODA
- e) Contacts for more support/information

Target Date: June 2025

C. Employment Standard Actions

This standard requires an employer to create an equitable workplace environment for people with disabilities (both current and future employees).

1. Enhance the Hospital's Recruitment Processes

Action

Consult with the Hamilton Disability Employment Network and other local community providers, disability advocacy groups, and people with disabilities to hear their recommendations on how to enhance our employee recruitment process in order to attract more applications from people with disabilities.

Target Date: December 2024

2. Develop a Strategy to Increase Hiring of People with Disabilities

Action

This strategy will be based on the recommendations we receive from the Hamilton Employment Disability Employment Network, other community providers, disability advocacy groups, and people with disabilities. The strategy will include measures of successful recruitment and retention of employees with disabilities.

Target Date: December 2025



E. Design of Public Spaces Standard Actions

This standard focuses on designing public spaces to ensure they are accessible.

Develop and Implement a Corporate Signage Standard

Action

The hospital's Signage and Wayfinding Committee will develop and implement accessible and inclusive standards for signs across the hospital. This process will include input from people with disabilities, advocacy groups, and key community partners.

Target Date: June 2025



Appendix 1 - Steering Committee Terms of Reference (Under Revision)

ACCESSIBILITY STEERING COMMITTEE TERMS OF REFERENCE

1.0 Purpose of the Committee

The legislation requires all public hospitals to develop an accessibility plan to lead to full accessibility by 2025. The Accessibility Committee is designated to ensure commitment to accessibility planning and to meet the Hospital's obligation under the Ontarians with Disabilities Act, 2001 (ODA) and the Accessibility for Ontarians with Disabilities Act, 2005 (AODA). The Integrated Accessibility Standards Requirements, 2011 (IASR) requires that organizations "establish, implement, maintain and document a multi-year accessibility plan, which outlines the Organization's strategy to prevent and remove barriers and meet its requirements under this regulation".

The purpose of the AODA Committee is to:

- Ensure that SJHH complies with the requirements of both Acts and the IASR through the development of a documented and published accessibility plan for SJHH;
- Provide recommendations relating to the provisions of the ODA and AODA;
- Identify the roles and responsibilities relating to each facility, the delivery of service to patients and as an employer;
- Steer the creation of the accessibility plan, as directed through the IASR to assist SJHH in promoting a barrier-free environment by 2025; and
- Act as a liaison with other committees/councils, external people and partners.



2.0 AODA Committee Activities

- Provide an open dialogue between members regarding on-going initiatives and concerns;
- Report on measures that will be taken to identify, remove & prevent barriers to people with disabilities;
- Develop and track how SJHH intends to identify, remove & prevent barriers related to the time-phased requirements in the IASR;
- Identify and review the measures in place ensuring that SJHH assesses its proposal for by-laws, policies, programs, practices and services;
- Develop a communication strategy;
- Develop an education & awareness strategy; and
- Maintain current standards and develop new standards as required.

3.0 Objectives/Responsibilities

The Accessibility Committee will actively promote the activities of the Committee and carry out assigned or accepted activities related to the Committee objectives. The Committee objectives will be:

- Review distributed documentation prior to the scheduled meetings. Approve circulated documents as required;
- Attend or send a delegate to all meetings;
- Prioritize suggestions for the prevention and elimination of barriers and submit report to the Chief Planning Officer (CPO);
- Ensure that accessibility plans are posted on the internet and intranet and made available, in multiple formats, to the community, in accordance with the obligations under the ODA and AODA; and
- Assist with preparation of reports and presentations as required.



4.0 Responsibilities of the Chair

- Stimulate and guide the activities of the Committee towards achieving the Committee's objectives;
- Ensure that agendas, minutes and supporting materials are distributed prior to each meeting; and
- Meet with the VP, P&OE on a quarterly basis to provide updates on key issues as required.

5.0 Membership

Membership shall reflect most areas of SJHH in order to appropriately address barrier identification and removal throughout SJHH. Areas of representation include but are not limited to:

- Audiology
- Building Services
- Human Resources
- Medical Affairs/Physician
- Mental Health and Addictions Program
- Risk Management & Patient Relations
- Occupational Therapy
- Occupational Health & Safety
- Public Affairs
- Redevelopment
- Security
- Volunteer Resources
- Employee Representative
- Patient and Family Representative(s)
- Community Partner(s)



6.0 Subject Matter Experts

Internal Resources Specialists will be utilized where required to support the work of the Committee and launch initiatives (i.e. representation from Redevelopment regarding the new West 5th facility).

7.0 Reporting

The Committee will report to the VP, P&OE regarding progress and any revisions to the accessibility plan. Reports and recommendations will be forwarded to the Executive Team via the VP, P&OE.

8.0 Meetings

- Quarterly meetings of the ASC
- Quarterly meetings of the subcommittees
- Ad hoc meetings may be called at discretion of the Chair

9.0 Minutes

Minutes will include a summary of the discussions held, actions and decisions taken and will be circulated to Committee members.



Appendix 2: Definitions

A list of detailed definitions of the AODA standards and other applicable definitions are included below.

Customer Service Standard

This standard requires service providers to make their goods, services, and facilities available/accessible for people with disabilities. It mandates that service providers find a means to break down all barriers that could prevent clients with disabilities from gaining access to services.

Simplified – This standard requires goods, services, and facilities to be accessible for people with disabilities.

Employment Standard

The employment standard mandates employers to make their employment practices conducive for current employees and potential ones with disabilities; they also create an enabling workspace environment.

Simplified - This standard requires an employer to create an equitable workplace environment for people with disabilities (both current and future employees).

Information and Communication Standard

This standard provides rules for organizations ensuring that they create information and communication that can be accessed easily by people with disabilities. This standard deals with the accessibility of information for internal/external purposes (on the intranet, hardcopy or electronic publications, meetings, etc).

Simplified – This standard requires that information on the intranet and all other communications are accessible to clients with disabilities.

Design of Public Spaces Standard

This standard focuses on the design of outdoor public spaces. It ensures the development of public areas is done to be accessible to people with disabilities.



Simplified - This standard focuses on designing public spaces to ensure they are accessible.

Accessibility

The degree of ease that something (e.g., device, service, physical environment and information) can be accessed, used and enjoyed by persons with disabilities. The term implies conscious planning, design or effort to make sure something is barrier-free to persons with disabilities. Accessibility also benefits the general population by making things more usable and practical for everyone, including older people and families with small children.

Barrier

The Accessible Canada Act defines a barrier as "anything—including anything physical, architectural, technological or attitudinal, anything that is based on information or communications or anything that is the result of a policy or a practice—that hinders the full and equal participation in society of persons with an impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment or a functional limitation."

Disability

The Accessible Canada Act defines a disability as "any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment—or a functional limitation—whether permanent, temporary or episodic in nature, or evident or not, that, interaction with a barrier, hinders a person's full and equal participation in society."