

	Policies & Procedure	Page 1 of 10 Internal ID: 4214
Title: Multi-Year Accessibility Plan & Accessibility Policy		
Folder: Human Resources		
Approved by: Document Management Committee		Approval date: December 11, 2023

January 1, 2024 to December 31, 2029

Updated December 2023

Introduction

Georgian Bay General Hospital (GBGH) is a medium sized acute care hospital embarking on a transformative process to grow in alignment with the needs of our community and reflecting our new strategic plan. GBGH is located in Midland and provides services for residents of North Simcoe, as well as regional programs supporting the broader Simcoe Muskoka Region. GBGH is an active partner in the North Simcoe Ontario Health Team and is the local hospital for the residents of Christian Island, Midland, and Penetanguishene, as well as the Townships of Tiny, Tay, Georgian Bay and Springwater.

GBGH strives to not only meet, but to exceed the requirements established by the *Accessibility for Ontarians with Disabilities Act, 2005* (AODA) in alignment with its strategic objective of *Continual Excellence & Trust and Belonging*. GBGH notes that a consultation occurred in 2021 on the development of healthcare standards under the AODA, the initial recommendations from this consultation are considered by GBGH in this multi-year accessibility plan. The initial report is available [here](#) and includes 22 recommendations, many of which are considered in this multi-year accessibility plan and will be continuously reviewed in annual updates for further additions. GBGH is proactively considering these recommendations to enhance the patient experience and to recognize recommendation 18, which would add accessibility to the Leadership and Governance standards assessed by Accreditation Canada. GBGH is committed to ensuring that patients and families feel comfortable and safe in coming to our hospital with their health needs.

GBGH recognizes that during the COVID-19 pandemic, which significantly impacted operations of the Hospital, there was a gap in maintaining updates on the Multi-Year Accessibility Plan. A post-dated annual report for 2022 will be established and ongoing annual reports will be made available on GBGH's website. The update of the Multi-Year Accessibility Plan at this time aligns with the Strategic Plan established in June 2023 and will continue through to the second last year of the current strategic plan.

Stakeholder Review

The Multi-Year Accessibility Plan completed stakeholder review at GBGH. This included review by:

- Director, Communications and Community Relations
- Director, Clinical Services
- Director, Risk Management and Patient Safety
- Clinical Manager, Acute Medicine
- Clinical Manager, Rehabilitation and Complex Continuing Care

- Indigenous Patient Navigator
- Learning & Development Specialist
- Manager, Laboratory, Diagnostic Imaging and Respiratory Therapy
- Manager, Occupational Health and Safety
- Manager, Talent Acquisition & Workforce Planning
- Patient and Family Advisory Council representative
- Regional Director, Solutions Architecture & Operations
- Social Worker
- Space Committee

Additionally, GBGH discussed accessibility at the Diversity, Equity, Inclusion and Belonging (DEIB) Forum on November 27, 2023. During this forum, feedback was sought on accessibility initiatives, opportunities and understanding by a broad group of GBGH employees. This feedback was incorporated in this plan. This plan was endorsed by the Senior Management Team of GBGH.

As noted below, the DEIB Forum will transition to a structured committee in 2024. This committee will continue to provide updates and consultation on the multi-year accessibility plan and updates in the annual report.

Barrier Identification

To support an environment of trust and belonging, GBGH will complete a barrier identification process no later than the end of 2025. This will be completed by the DEIB Committee. The intention of this process will be to support GBGH's commitment to ensuring all individuals are able to access services while maintaining their dignity and independence and supporting an inclusive work environment for our dedicated team.

Barriers will be identified on the following definitions:

Attitudinal: Attitudes or approaches that result in people with disabilities being treated differently than people without disabilities.

Informational/Communication: Barriers that occur when a person with a disability cannot easily receive and/or understand information that is available to others.

Physical/Architectural: Barriers in the environment that prevent access for people with disabilities.

Systemic: Barriers created by policies, practices, or procedures that result in people with disabilities being treated differently than others or sometimes being excluded.

Technological: Barriers occur when technology or the way it is used does not meet the needs of people with disabilities.

Report on Achievements/Opportunities

Initiative	IASR Requirement/Recommendation (Part 6 only)	Action	Accountability	Status
Part I under AODA: General Requirements				
Post Updated Plan on Internet and Intranet	s.3 Accessibility policies and s.4 accessibility plan	Post on Website and Intranet	Director of Communications and Community Relations	2024
Post Annual Plan Updates	s.4 Accessibility Plans	Post on Website and Intranet and provide update at GBGH Matters and GBGH Leaders Forum Post post-dated annual report for 2022	Vice President People & Culture to create and Director of Communications and Community Relations to post	2024 and ongoing
Annual Review of Accessibility Plan	s.4 Accessibility Plan	Complete annual review of accessibility plan	Vice President People & Culture	2024 and ongoing
Obtain Self Service Kiosks for Registration	s.6 Self-service kiosks	Obtain Self-service kiosks. Determine opportunities for engagement of patients and individuals with disabilities in use of system	Vice President Performance, Support Services and CFO	2024
Review Parking Machine Process	s.6 Self-service kiosks	Review current parking machines for engagement with persons with disabilities, provide recommendation to Senior Management Team	Manager of Security & Emergency Preparedness	2025

Establish list of barriers through DEIB Committee	s. 4 Accessibility plan	Consultation to obtain list of barriers identified and reported to	Vice President People & Culture	2024 and ongoing on annual basis
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		Senior Management Team		
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Part II under AODA: Information & Communication Standards

Update of website for AODA compliance	s.14 New internet websites and web content	Maintain website to AODA compliance standards achieved in 2023	Director of Communications and Community Relations	Complete and Ongoing
Update PDFs to meet accessibility requirements	s.14 New internet websites and web content	Ongoing review of PDFs and information posted to website for compliance	Director of Communications and Community Relations	Ongoing
Review of internal intranet and SharePoint for accessibility opportunities	S.14 New internet websites and web content	Review of current state against AODA standards for external websites	Regional Director Solutions Architecture & Operations	2025
Review of wayfinding signage for barriers	s.12 Accessible formats and communication supports	Review of current wayfinding signage for barriers Barriers to be identified and reported to Senior Management Team	Director of Communications and Community Relations	2024

Part III under AODA: Employment Standards

Provide Alternative Interview Formats – including virtual options	s. 22, 23, 24 Recruitment, assessment and selection	Ongoing review of opportunities to provide accessibility application, interview and onboarding experience and provide update on opportunities to senior management team every other year in November or as needed	Manager of Talent Acquisition & Workforce Planning	Standard complete but continued review starting in 2025 and ongoing
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Review of current return to work and accommodation process for opportunities	S.28 and s.29	Review of policies every other year to identify opportunities. Report to senior management team every other year in August or as needed.	Manager of Occupational Health & Safety	Standard complete but ongoing review starting in 2025 and ongoing
Redeployment	s.32	Redeployment process established to avoid reassign of individuals during orientation. Redeployment process to address accommodations and restrictions including use of fan out list	Manager of Human Resources, Staffing and Payroll	Standard complete, but ongoing review

Part IV under AODA: Design of Public Spaces				
Review new designs for accessibility	s.80 Design of Public Spaces	Ensure inclusive design for MRI Ensure inclusive design for Mental Health	Manager of Facilities and Capital Projects	Ongoing
Accessible Parking	s.80.32	In development of future parking facilities ensure compliance with standard	Manager of Facilities and Capital Projects	Estimated 2026
Part IV.2 under AODA: Customer Service Standard				
Policy on Support Animals	s.4 Use of service animals and support persons	Develop formal policy and procedure to support use of pet therapy in	Vice President People & Culture	2025

		Hospital, while continuing to welcome service animals for persons with disabilities		
Review Notice of Temporary Disruption	s.5 Notice of temporary disruptions	Review current process as part of Business Continuity Plan ensuring that business continuity plan includes effective communication to all stakeholders, including those with disabilities	Manager of Security and Emergency Preparedness	2025
Enforcement of Mandatory Training on AODA	s.6 Training for staff	Review and monitor compliance of training for AODA with appropriate	Learning and Development Specialist	Ongoing

		follow up		
Review of opportunities to streamline feedback process	S.80.50 Feedback process required	Review current approach for feedback and determine if there are opportunities to streamline within GBGH and within healthcare partners	Director of Communication s & Community Relations	2025 and ongoing

Part 6: Recommended Health Care Standard as of 2021

Seek Participation of Community Members who identify as a person with a disability on DEIB Committee	Establish formal mechanism to engage persons and organizations that represent people with a broad range of disabilities regarding health service planning, quality improvement and capital planning and will make this information available	In establishing terms of reference of DEIB Committee include this process Update PFAC application and	Learning & Development Specialist Volunteer & Student	2024 2024
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Seek voluntary disclosure from individuals if they have a disability on PFAC applications		seek voluntary disclosure from current membership	Coordinator	
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Improved Communication and Highlight of Accessibility Plan to Senior Leadership and Board	Approval of Multi-Year Accessibility Plan by Senior Executive Leadership	Approved by Senior Management Team in 2023 Addition of Accessibility Plan Update to next Board Workplan in 2025	Vice President People & Culture	Complete and Ongoing
Engagement of persons with disabilities on design of proposed mental health building	Establish mechanism to consult with individuals of disabilities on the procurement process for extensive renovations or redevelopment projects	Call for interest to participate in consultation in connection with Manager of Facilities and Capital Projects	Manager Facilities and Capital Projects	2026 and ongoing
Establish List of Specialized Equipment for Patients with Disabilities	Access to Equipment	Establish Inventory List with Annual Review including anticipated lifespan for capital planning	Manager of Occupational Health and Safety and Clinical Manager of Allied Health	2025 and ongoing
Discuss opportunities for coordinated care for persons with disabilities with the Ontario Health Team	Coordination of Accessibility Accommodations	Review current state and complete analysis to determine opportunities for improved communication for identification of individualized accommodation needs	Vice President Clinical Services and CNE	2026 and ongoing
Ability to format electronic health record to identify accommodation needs	Electronic Health Records	Review CARE4 current state and ability to implement	Regional Director Solutions Architecture & Operations	2025

Incorporate patient-centred care into daily practice at GBGH in alignment with value of Patients First	Support for Patient-Centred Care	Incorporate person-centred care into strategic plan	Vice President Clinical Services and CNE	2023 and ongoing
		Provide ongoing education on person-centred and trauma informed care	Learning & Development Specialist & Professional Practice	2023 and ongoing
		Explore with goal to establish trauma-informed Workplace Committee	Vice President People & Culture	2024 and ongoing
Establish Policy and Procedure for Third Party Supports for persons with disabilities	Access to Third Party Supports	Review current practices to determine gaps based on recommendation	Director Clinical Services	2025
Establish Learning connected to Health Care Standard	Implementation of education and training in hospitals	Establish working group to begin creation of optional e-learning module based on recommendation #13	Learning & Development Specialist and Professional Practice	2024
		Continue to monitor for direction from the Ontario Government on direction for training	Learning & Development Specialist	Ongoing

Update Hospital Declaration of Values	Update of Declaration of Patient Values	Include a commitment statement to accessibility and a reference to the rights of patients to raise concerns or make complaints without fear of reprisal	Vice President Clinical Services & CNE	2024
Review patient relations process for opportunities to further accessibility	Accessible Patient Relations Process	Review of current process against Recommendation 16 and 17 to determine opportunities and report back to Senior Management Team	Director Risk Management & Patient Safety	2024

Communication of Plan/Updates

The Multi-Year Accessibility Plan will be posted on the GBGH website under “About GBGH – Public Reporting – Accessibility”. This is also where the Annual Reports for Accessibility will be posted.

Internally, the Multi-Year Accessibility Plan will be hosted on GBGH’s policy platform. Education as required will be completed through GBGH’s eLearning platform (Surge Learning). As the Multi-Year Accessibility Plan will be updated for 2024 this will be shared at GBGH through a town hall forum (GBGH Matters), and annual updates will be provided at GBGH Matters as well as Leaders Forum.

The plan will be available in French upon request. Alternate formats of the plan are available on request. Requests or feedback should be directed to:

Georgian Bay General Hospital
1112 St. Andrew’s Drive
Midland ON L4R 4P4
Attn: Angela Wiggins, Vice President People & Culture
Phone: 705 526 1300

Next Steps

GBGH will continue to work toward creating an accessible organization for all by updating this document and seeking to actively incorporate discussions of accessibility into broader strategic goals. Through this process, GBGH will achieve its purpose statement of *We Make Excellent Care **Personal***.