

# Health Sciences North 2024-2025 Accessibility Plan

Prepared by HSN's Accessibility Steering Committee



# **Health Sciences North Accessibility Plan 2024-2025**

## **Table of Contents**

- 1. About Health Sciences North**
- 2. Purpose of the Accessibility Plan**
- 3. HSN's Commitment to Accessibility Planning**
- 4. HSN's Accessibility Steering Committee**
- 5. Recap of 2018-2023 Accessibility Initiatives and look at next steps**
- 6. Review and Monitoring Process**
- 7. Communication of the Plan**

## **Introduction**

### **1. About HSN**

Health Sciences North (HSN) is Northeastern Ontario's regional specialized referral centre and academic health sciences centre. We are a beacon of health for more than half a million people across Northeastern Ontario. Our impact extends far beyond the walls of our 14 sites in Greater Sudbury, reaching out to 17 locations across Northeastern Ontario.

As the regional referral centre, we are a patient-centered institution. Our focus is on the individuals we serve. Our role as a regional acute care hub is pivotal, serving as a dependable resource for 23 other hospitals across four health districts - Sudbury, North Bay and Parry Sound, Algoma, Porcupine and Temiskaming. These hospitals rely on us through leading regional programs in cardiac care, Indigenous health, geriatrics, mental health and addictions, nephrology, oncology, paediatrics, trauma and rehabilitation.

Many of our patients already face geographical barriers to access health care, making our responsibility toward inclusive practices paramount. Enhancing our accessibility addresses two of the strategic goals that HSN has identified for the coming years: being socially accountable, and being patient and family-focused.

### **2. Purpose of the Plan**

Building on the success of the 2018-2023 Accessibility Plan, the 2024-2025 Accessibility Plan focuses on ensuring HSN's continued compliance with the Accessibility for Ontarians with Disabilities Act. Additionally, members of HSN's Accessibility Committee will collaborate to create a new multi-year plan for the organization that enhances our approach to accessibility and aligns with industry best practices in the prevention and elimination of barriers for persons with disabilities on HSN properties. The timing for the launch of the new plan will align with launch of our new Strategic Plan in the spring of 2025.

This plan continues to invite ongoing feedback from patients and families, staff, volunteers, physicians and community members to identify barriers to their access to HSN's programs and services and or facilities, in a manner that respects individual dignity and independence. HSN will continue with annual updates on progress with this plan the organization's public website to inform internal and external audiences. The plan also reflects HSN's commitment to staff and volunteer training and to raising AODA awareness within the hospital and in the community. We believe it is everyone's shared responsibility to ensure barrier free access to people coming to HSN.

### 3. Commitment to Accessibility

HSN's 2019-2024 Strategic Plan highlights its commitment to promoting a physically, psychologically and culturally safe environment where you can recover, work, volunteer and learn.

HSN's AODA Steering Committee applied the following principles when updating the 2018-23 multi-year plan, as well as the 2024-2025 Accessibility Plan.

- Treating all people in a way that allows them to maintain their dignity and independence.
- Integration and equal opportunity.
- Meeting the needs of people with disabilities in a timely manner.
- Preventing and removing barriers to accessibility.
- Meeting accessibility requirements under the *Accessibility for Ontarians with Disabilities Act*.

### 4. HSN's Accessibility Steering Committee

The Accessibility Steering Committee provides leadership to HSN to help it fulfil its obligations under the Accessibility for Ontarians with Disabilities Act (2005), and the Integrated Accessibility Standards Regulation (191/11). The Steering Committee provides guidance to the organization regarding barrier free access to all HSN locations and programs, and oversees the implementation of this plan, and for monitoring and reporting on its annual progress.

**Executive Sponsor:** Jessica Diplock, Vice President, People and Culture  
**Chair:** Jason Turnbull, Manager, Communications and Community Engagement


**Committee Members:**

Vice President, People Relations and Corporate Affairs  
Director, Human Resources  
Quality & Patient Safety  
Disability Management Specialist  
Director, Building Services  
Manager, Communications & Community Engagement  
Administrative Director, Community Care & Rehabilitation Program  
Patient Advisor  
Front-line Clinician

**Ad Hoc Members (*as identified*)**  
Director, Materials Management  
Manager, Emergency Preparedness  
Manager, Building Services

## 5. 2018-2023 Accessibility Initiatives

Pursuant to:  
 Accessibility for Ontarians with Disabilities Act (2005)  
 Accessibility Standards for Customer Services (Ontario Regulation 429/07)  
 Integrated Accessibility Standards Regulation (191/11)

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	Status
<b>General</b>			
<p><b>1. Accessibility Plan</b></p> <ul style="list-style-type: none"> <li>a) Establish a multi-year accessibility plan</li> <li>b) Meet quarterly to monitor progress on planned initiatives</li> <li>c) Prepare annual status report on progress toward achieving goals in the 5-year plan, post on the website, and make available in accessible format</li> <li>d) Refresh the Steering Committee membership per the Terms of Reference</li> <li>e) Develop a new multi-year accessibility plan by mid-2023.</li> </ul>	<p><b>Steering Committee</b></p>	<p>See activities outlined under General</p>	<p><b>Completed</b></p> <p>Posted on:</p> <p>January 2019            January 2020            January 2021            January 2022            January 2023</p>
<p><b>2. Procuring or Acquiring Goods, Services, Facilities</b>            HSN will incorporate accessibility criteria and features into procurement process</p>	<p><b>MM</b></p>	<p>Continue to utilize the Accessible Procurement Declaration Form</p> <div style="text-align: center;">  </div> <p>5_HSN Accessible Procurement Declarat</p>	<p><b>Completed</b></p>

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	Status
<b>General</b>			
<p><b>3. Training</b> Ensure that training is provided on the requirements of IASR accessibility standards and Human Rights Code as it pertains to persons with disabilities to:</p> <ul style="list-style-type: none"> <li>• All staff, volunteers, learners</li> <li>• Patient advisors</li> <li>• Physician leaders</li> <li>• Providers of goods, services or facilities on behalf of HSN</li> </ul> <p><i>7.3-7.5 Training is appropriate to duty Training regarding policy changes Record of Training</i></p>	<p>HR/ L&amp;L/MM/ Facilities/ Medical &amp; Academic Affairs</p>	<ul style="list-style-type: none"> <li>• Review existing mandatory education for staff and update to meet current IASR and Human Rights Code requirements</li> <li>• Survey Volunteer Services, Medical Affairs and Quality &amp; Patient Safety re: their respective members current participation and compliance with their training requirements.</li> </ul>	<p>November 1, 2019</p> <p>June 30, 2019</p> <p>Completed</p>
<b>Information and Communication Standards</b>			
<p><b>4. Feedback processes are accessible or communication supports upon request</b></p>	<p>QPS/Communication</p>	<ul style="list-style-type: none"> <li>• Support managers in creating clear and consistent pathways for responding to accessibility requests</li> <li>• Confirm service agreement with translation and interpretation services to reduce language and communication barriers.</li> </ul>	<p>November 2019</p> <p>June 2020</p> <p>Completed</p>

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	By When
		<ul style="list-style-type: none"> <li>Review and adjust accessibility webpage to reflect the current Integrated Accessibility Standards Regulation in the areas of information and communication, employment, transportation, design of public spaces and customer service.</li> </ul>	
<b>General</b>			
<p><b>5. Accessible Web Sites and Web Content</b></p> <p>Ensure HSN internet/intranet sites and content conform to WCAG 2.0 guidelines as follows:</p> <p>All websites/web content for Level AA by Jan 2, 2021, with the exception of live captions and audio descriptions (pre-recorded)</p> <p>Except where meeting requirement is not practicable, this requirement also applies to:</p> <p>Websites/web content, including web-based applications, controlled by HSN or through a contractual relationship that allows for modification of the platform.</p>	<p>Corporate Communications &amp; IT</p>	<ul style="list-style-type: none"> <li>A complete corporate website redesign will help us achieve WCAG guidelines.</li> <li>Establishing best practices for creating AODA friendly content and training all website contributors to ensure consistency in compliance moving forward.</li> </ul>	<p>Dec. 2020</p> <p>Completed</p>

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	By When
<p>6. <b>Employment Standards (see Recruitment, Assessment or Selection Process)</b></p> <ul style="list-style-type: none"> <li>• Notify about accommodation in recruitment process - employees, applicants, public</li> <li>• Workplace Emergency Response – individual plans for employees with a identified disability</li> <li>• Review individualized Workplace Emergency Response (employee moves, changes to policy)</li> <li>• Develop written process for documented individual accommodation plans</li> </ul>	<p>Human Resources</p> <p>OH&amp;S</p>	<ul style="list-style-type: none"> <li>• Both internal and external job posting sites provide clear messaging about HSN’s commitment to accessibility in the recruitment process and the workplace.</li> <li>• Emergency Response Assessment forms are sent to all employees with identified disabilities when they are permanently accommodated, when accommodations are updated and no less frequently than bi-annually.</li> <li>• Plans are reviewed and updated as required.</li> <li>• Written processes for written individualized accommodation plans are required under standard work and HSN policy.</li> </ul>	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
<b>General</b>			
<p>7. <b>Design of Public Spaces</b></p> <p>Accessible Parking</p>	<p>Facilities Management</p>	<p>Installation of tactile mats Addition of depressed curbs NECC</p>	<p>2018</p> <p>Completed</p>



Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	By When
Exterior Spaces		Ensuring that existing or redeveloped paths meet accessibility requirements	On-going
Interior Spaces		<p>Facilities will be incorporating AODA design with all new construction as well as continuing reviewing existing opportunities.</p> <p>Sam Bruno PET Suite project</p> <ul style="list-style-type: none"> <li>• Two (2) barrier-free washroom as being introduced with door operators.</li> <li>• Main door entering the suite are operable.</li> <li>• Tech station have height adjustable table.</li> <li>• Control room station have height adjustable table.</li> <li>• Change room is accessible with bench.</li> <li>• Waiting room seating can accommodate bariatric patients.</li> </ul>	<p>2019/2020</p> <p>Project completed June 2019</p>

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	By When
		<p><b>Labelle Innovation and Learning Centre project</b></p> <ul style="list-style-type: none"> <li>• All floors accessibly by elevator</li> <li>• Universal washroom installed in main lobby.</li> <li>• Accessible ramp being install for main entrance.</li> <li>• Main entrance door operable by push button.</li> <li>• Multiple barrier-free washrooms on each level.</li> <li>• Two (2) barrier-free on-call rooms.</li> <li>• Reception counter design with lower counter space.</li> </ul>	<b>Completed</b>
<b>Maintenance</b>		<ul style="list-style-type: none"> <li>• Ensuring that new or redeveloped service counters meet accessibility requirements</li> <li>• New or redeveloped waiting areas meet accessibility requirements</li> <li>• Each accessibility request is reviewed and</li> </ul>	<b>On-going</b>

Requirement of the Accessibility Standards	Who Leads	What (describe your planned initiatives)	By When
		delivered where possible.	

**6. REVIEW AND MONITORING PROGRESS**

HSN’s Accessibility Steering Committee meets quarterly to review progress. Members of the Committee will provide updates on their annual commitments to the Committee and Executive Sponsor on a quarterly basis. Program leads responsible for each deliverable will be asked to provide regular reports on these action items. The Steering Committee’s Terms of Reference will be reviewed annually, or updated as required, and then presented to Senior Leadership Committee for approval.

**7. COMMUNICATION OF THE PLAN**

The hospital’s 2024-2025 Accessibility Plan will be made available to both internal and external audiences in various ways. These will include but are not limited to:

1. The plan will be posted for staff, patients and the public to view on the hospital’s external website.
2. An introduction to the new Multi-Year Accessibility Plan, and access to it, will be communicated to staff through the intranet.
3. Hard copies are available from the Corporate Communications Department by email at [communications@hsnsudbury.ca](mailto:communications@hsnsudbury.ca)
4. A suitable accessible version will be made available upon request based on the required need. Requests for other versions can be made at [patientrelations@hsnsudbury.ca](mailto:patientrelations@hsnsudbury.ca).