



Health Sciences North
Horizon Santé-Nord

MULTI-YEAR ACCESSIBILITY PLAN

FOR HEALTH SCIENCES NORTH / HORIZON SANTÉ-NORD (HSN)

2013-2017

PREPARED BY

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*This publication is available on the
hospital's website (www.hsnsudbury.ca),
and upon request,
in multiple formats as well
as in hard copy.*

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1. BACKGROUND

In 2005, the government of Ontario passed the *Accessibility for Ontarians with Disabilities Act* (AODA), which requires that Ontario be an accessible province by 2025. To help public, private and non-profit organizations identify, prevent and remove barriers to accessibility; the AODA contains accessibility standards in areas, including:

- Customer service
- Information and communications
- Employment
- Transportation
- The built environment

The Accessibility Standards for Customer Service (Reg. 429/07) came into force in 2008. HSN is in compliance with these standards and will continue to improve on, maintain, and report on this standard. The next three standards – information and communications, employment and transportation – have been combined into the Integrated Accessibility Standards Regulation (IASR). The IASR is now law and the requirements will be phased in over time. The standard for the built environment for facilities and outdoor spaces is still in development but will be monitored, noted and updated in the multi-year plan.

As of January 1, 2013, HSN will be required to submit a Multi-year Accessibility Plan outlining our strategy to prevent and remove barriers and to meet the requirements under the Regulation, as well as provide annual status reports on the progress of measures taken to implement the strategy. The focus of this multi-year plan will be on the IASR, while we will continue to promote knowledge of the AODA and maintain the requirements of the Accessibility Standards for Customer Service.

2. STATEMENT OF COMMITMENT

The vision of HSN is:

Globally recognized for patient-centred innovation

In pursuit of this vision, HSN, supported by the Board of Directors, is committed to:

- ❖ 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***.

3. THE ACCESSIBILITY WORKING GROUP

The Accessibility Working Group is accountable for overseeing the implementation of this multi-year plan. Members, as of December 31st, 2012 include:

Group Member	Department	Contact Information
Natalie Aubin (Co-Chair)	Northeast Cancer Centre	705.523.7100 ext. 2326
Diane Barbeau (Co-Chair)	Human Resources	705.523.7100 ext.3738
Dan Bodson	Building Services	705.523.7100 ext. 3943
Natalie Carscadden	Corporate Safety Specialist	705.523.7100 ext.3047
Linda Coffin	Occupational Therapy	705.523.7100 ext. 3136
Yvette Filion	Seating Clinic	705.523.7100 ext. 3162
Melanie Hinton	Clinical Representative	705.523.7100 ext. 3148
Susanna Mansell	Patient Representative	705.523.7100 ext. 4140
Jayne Moskal	Emergency Preparedness	705.523.7100 ext. 4428
Francoise Roussel	Volunteer Services	705.523.7100 ext. 3181
Jeff Sampson	Children's Treatment Centre	705.523.7100 ext. 1450
Alice Sauv�	Pre-Admission/Surgical Day Care	705.523.7100 ext. 8366
Jayme Watson	Emergency Department	705.523.7100 ext. 1745
Randel Wilson	Community Representative	705.674.3219
To be determined	Corporate Communications	

4. REVIEW AND MONITORING PROCESS

The Working Group will meet quarterly to review progress on the multi-year plan. After each meeting, the Working Group will remind staff, either through personal contacts or by e-mail, about their roles in implementing the plan. An annual formal review of the plan will take place in September in preparation for the annual status report on the progress of measures taken to implement the strategy. The multi-year plan will be updated minimally once every 5 years.

5. REMOVAL AND PREVENTION OF ARCHITECTURAL / PHYSICAL BARRIERS – ACCOMPLISHMENTS

Architectural and **physical** barriers are features of buildings or spaces that may present difficulties for people with disabilities. HSN welcomes and accepts feedback from patients, visitors and staff and from this feedback is able to identify architectural and physical barriers. HSN will strive to remove these barriers as is reasonably possible. By monitoring feedback, HSN attempts to remove barriers and prevent them for any new or future building renovations or developments. Highlights of barriers removed include:

- Modifications made to the South Tower entrance door i.e. location of electronic push button.
- Adjustments made to roof top doors. Replacement of doors will be considered in the future.
- Automatic door opener installed in the Respiratory/sleep clinic area.
- Voice messaging in elevators has been revised for clarity at the Ramsey Lake Health Centre.
- Soap dispensers lowered in washrooms to be accessible at the Ramsey Lake Health Centre.
- Speed bumps in the parking lot lowered to accommodate Handi-Transit vehicles.
- Accessibility toolkits, containing a modest number of typically requested assistive communication devices, developed to provide to patients, visitors, or employees.
- Dedicated cafeteria seating created for handicap patients/visitors.
- New auditing tool developed with new Building Code requirements.
- Site audits conducted of various areas throughout the hospital to determine accessibility deficits/barriers.

HSN will continue to review feedback & consider alternatives when the need arises. Planned improvements include:

- Sudbury Outpatient Centre renovations: Improve accessibility to washrooms for those utilizing wheelchairs/walkers, modification of one kiosk desk.
- Upgrade designated washrooms to all sites to meet accessibility standards.
- Have members of public with disabilities come through the hospital to assist with audits.

6. ACCESSIBILITY STANDARD FOR CUSTOMER SERVICE STATUS REPORT

HSN is in compliance with the requirements of the Accessibility Standard for Customer Service (Reg. 429/07), and will continue to improve on, maintain, and report on this standard. Compliance with these standards and the IASR help to identify and address non-architectural/physical barriers to accessibility, such as informational or communications barriers, attitudinal barriers, technological barriers, and policy or a practice (organizational barriers).

REQUIREMENT	DELIVERABLES / HIGHLIGHTS
<ul style="list-style-type: none"> Development of policies, practices and procedures on providing goods or services to people with disabilities Make reasonable effort to ensure that policies, practices and procedures are consistent with the principles of independence, dignity, integration and equality of opportunity. 	<p>Existing policies have been reviewed and updated including:</p> <ul style="list-style-type: none"> Accessibility Policy (overarching policy) Accessibility Policy for Support Persons Accessibility Training Requirements for Contracted Services Personal Assistive Devices Policy Service Animals Policy Accessibility Toolkit Policy <ul style="list-style-type: none"> Policies will be reviewed every two years. Compliance, effectiveness and gaps in relevant policies and practices will be monitored through review of patient or staff complaints, compliments and suggestions.
<ul style="list-style-type: none"> Communicate with a person with a disability in a manner that takes into account their disability. 	<ul style="list-style-type: none"> Tandberg machine made available by OTN. Three machines are available to provide access for patients / families in order to obtain services of a sign language interpreter for American Sign Language (ASL) and Langue des signes québécoise (LSQ) Communications devices are purchased and approximately 5 accessibility toolkits are complete. “Coaster-like” paging devices are being piloted in the Pre-Admission waiting area.

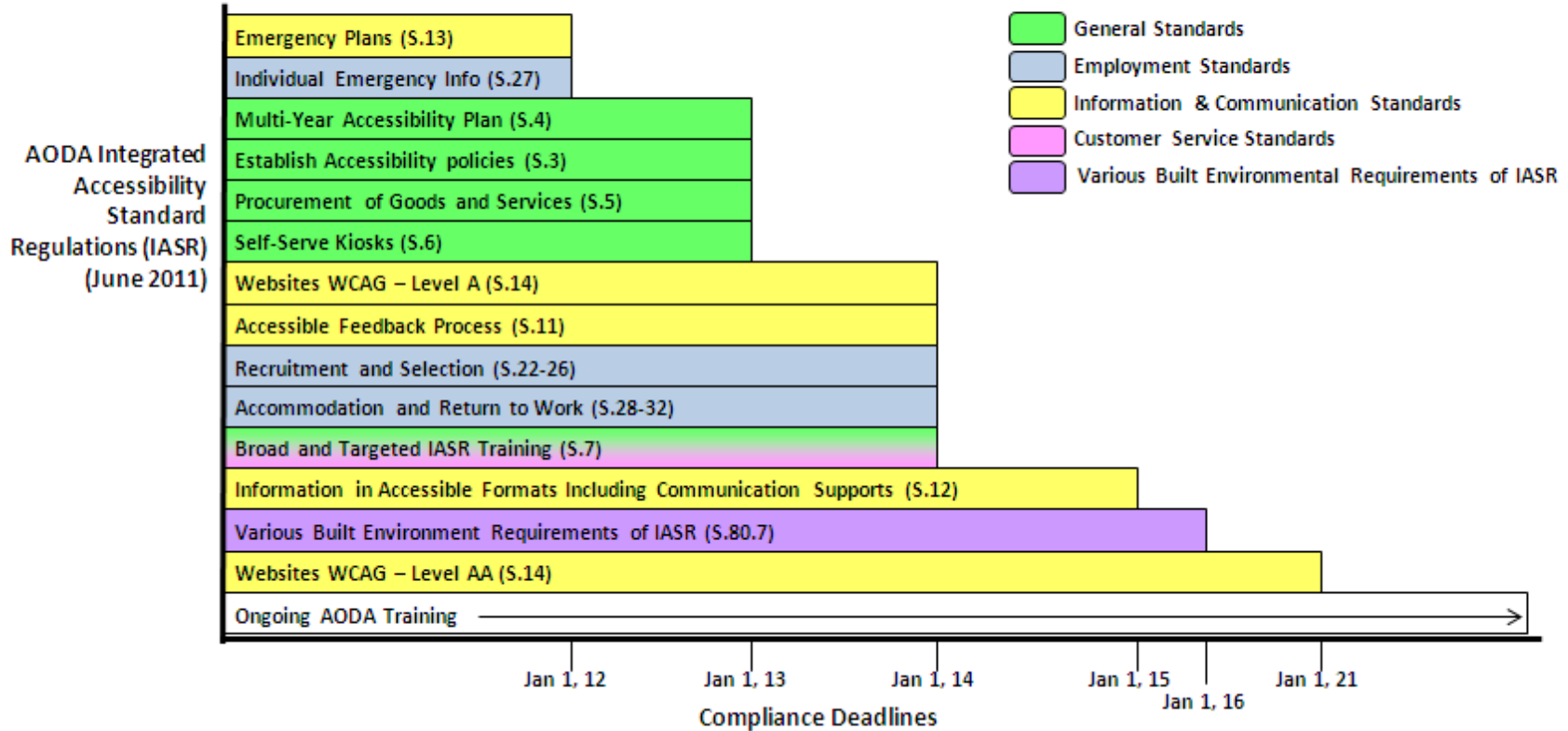
REQUIREMENT	DELIVERABLES / HIGHLIGHTS
<ul style="list-style-type: none"> Provide notice when facilities or services that people with disabilities usually use to access goods or services are temporarily disrupted. 	<ul style="list-style-type: none"> Notification system for planned/unplanned disruptions is in place. Notice of service disruption is posted on external website. <p>Notice of disruption includes the following information:</p> <ul style="list-style-type: none"> The nature of the disruption in service The reason for disruption The expected duration of the disruption A description of alternatives to service, if available A contact number for more information <p>Service Disruptions for which Public will be notified:</p> <ul style="list-style-type: none"> Elevator bank out-of-service where no other elevator is working in that specific area and therefore requires redirection of visitors and patients Walkway is closed and/or under construction causing barriers to access for individuals with disabilities Onsite roadway is closed and/or under construction causing barriers to access for individuals with disabilities Main entrance to Health Sciences North is closed and/or relocated Handicapped parking relocation Major power outage/water main breakage <p>HSN will provide a reasonable amount of notice in the event of a planned service disruption that affects access to our facilities or services. In the event of an unexpected disruption of service, Health Sciences North will provide notice as soon as possible. During the disruption, we will make every effort to provide alternative accommodations that take into consideration the needs of the individual.</p> <p>HSN will take the following steps to communicate any significant disruption to our facilities or services.</p> <ol style="list-style-type: none"> Notice of Service Disruption will be posted at the site of the disruption If the disruption is in a critical location (i.e., main entrance, elevators), a media release or other public alerts may be implemented and updated when disruption is concluded In the case of a disruption that requires individuals to make alternate arrangements before coming to the hospital (disruption to accessible parking spaces, accessible entrances, elevators, etc.), a notice will also be provided on our website. Updates to the notice of disruption will be made as needed and posted accordingly. Once the issue is resolved and/or repair completed, the notice will be removed and the media will be alerted as needed. <ul style="list-style-type: none"> Monitoring effectiveness of processes through review of patient or staff complaints, compliments and suggestions.

REQUIREMENT	DELIVERABLES / HIGHLIGHTS
<ul style="list-style-type: none"> Provide training material to anyone who interacts with the public or third parties on the provider’s behalf on topics outlined in the customer service standard AND to anyone who is involved in developing the provider’s customer service policies, practices and procedures on topics outlined in the customer service standard. 	<ul style="list-style-type: none"> A self-learning package (SLP) is utilized for training and will be updated as required based on feedback, or updates in policies, practices or procedures. New staff will continue to be trained at orientation and all other staff via the SLP posted on our learning management system (LMS), the Education Portal. In-services have been provided. Corporate tracking and monitoring attendance & participation is maintained via the Education Portal. The SLP made available to third party contractors, volunteers, students and all those that interact with the public and confirmation of training is monitored. Monitoring effectiveness of training through staff evaluations and patient or staff complaints, compliments and suggestions.
<ul style="list-style-type: none"> Maintain a process for receiving and responding to feedback about the way the organization provides goods or services to people with disabilities, including the actions to be taken if a complaint is received, and make information about the process readily available to the public. 	<ul style="list-style-type: none"> Implemented a link on the HSN website Accessibility Portal to submit feedback (AccessibilityS&C@hsnsudbury.ca) Patient Representative provides multiple means for individuals to provide feedback on accessibility issues related to patient care Manager/Director of Building Services provides follow-up to lodged concerns related to the structure and outside grounds Implemented a hospital-wide poster campaign to direct staff/visitors/patients to the Accessibility e-mail address in order to submit their suggestions/concerns Feedback information obtained via NRC picker monitored for accessibility issues and/or concerns →Ongoing and reported quarterly to the Accessibility Working Group for barrier removal and prevention priority setting In April 2012, a student from the Ryerson University School of Disabilities Studies conducted an independent study to identify physical, technological, communicational, architectural, attitudinal and political (policy) barriers within HSN. Recommendations were presented to the Accessibility Working Group. Barrier removal priority identification will form part of the 2013 workplan.
<ul style="list-style-type: none"> Upon request, provide the documented information to a person with a disability in a format that takes into account their disability. 	<ul style="list-style-type: none"> Continue to develop the mechanisms to be able to provide accessibility related information in a format that takes into account a person’s disability i.e. toolkits as noted above. Accessibility information will be made available in a format that takes into account an individual’s disability (e.g., computer disk, large print and/or Braille, etc.). Initial information posted on website Font size on the HSN website can be adjusted for easier reading Implement new options as they become available Post additional information as it becomes available Continue to explore and implement other options as availability and feasibility allow

7. MULTI-YEAR ACCESSIBILITY PLAN

This Multi-Year Accessibility Plan detailed below outlines the path, actions and timelines that Health Sciences North will put in place to improve opportunities for people with disabilities, while removing and preventing accessibility barriers and meeting Ontario’s accessibility laws. HSN’s goal is to harmonize accessibility planning with our business planning activities so we can build accessibility into our regular business processes.

Accessibility for Ontarians with Disabilities Act (AODA) 2005
Compliance Schedule for Large Public Sector Organizations (HSN)



Part I: General Standards – s.3

AODA Standards / Regulation Reference O. Reg.191/11, s. 3	I: Accessibility Policies	Compliance Deadline: January 1 st , 2013
	DELIVERABLES	
3.1 Establish accessibility policies	<p>HSN accessibility policies as at December 2012 include:</p> <ul style="list-style-type: none"> • Accessibility Policy (overarching policy) • Accessibility Policy for Support Persons • Accessibility Training Requirements for Contracted Services • Personal Assistive Devices Policy • Service Animals Policy • Accessibility Toolkit Policy <p>New and existing policies will be developed, implemented and maintained as required to ensure we will achieve accessibility through meeting the IASR requirements.</p>	
3.2 Statement of organizational commitment	<p>HSN accessibility policies include value statements that identify the organizational commitment to meet the accessibility needs of persons with disabilities. This multi-year plan also includes a statement of commitment.</p>	
3.3 Make policy documents publicly available	<p>HSN accessibility policies made publicly available on the HSN website, www.hsnsudbury.ca via a direct accessibility link on the homepage. Accessible formats can be made available upon request</p>	

Part I: General Standards – s.4

AODA Standards / Regulation Reference O. Reg.191/11, s. 4	I: Multi-Year Accessibility Plans	Compliance Deadline: January 1 st , 2013
	DELIVERABLES	
4.1 Establish multi-year accessibility plan	<p>This multi-year accessibility plan outlines HSN's strategy to identify, remove and prevent barriers and meet requirements of IASR. A more detailed multi-year work plan will be utilized by the Accessibility Working Group in order to implement, maintain and monitor progress.</p> <p>The multi-year accessibility plan is available on the HSN website, www.hsnsudbury.ca via a direct accessibility link on the homepage. Accessible formats can be made available upon request</p> <p>The plan will be updated and reposted publicly at least once every 5 years (by at least January 1st, 2018 if not sooner.)</p>	
4.2 Conduct consultation with persons with disabilities	<p>Accessibility Working Group will include at least one individual with a disability in order to ensure there is consultation with persons with disabilities.</p>	
4.3 Prepare annual status report	<p>HSN will report on the year's progress toward goals and targets identified in multi-year accessibility plan. The status report will be posted on the HSN website, www.hsnsudbury.ca and will be provided in an accessible format upon request.</p>	

Part I: General Standards – s.5

AODA Standards / Regulation Reference O. Reg.191/11, s. 5	I: Procuring or Acquiring Goods, Services or Facilities
	Compliance Deadline: January 1st, 2013
	DELIVERABLES
<p>5.1 Incorporate accessibility criteria and features into procurement process</p>	<p>HSN will incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so. General principles of accessibility will be considered, such as:</p> <ul style="list-style-type: none"> • Accessible: can a person with a disability use the service? • Equitable: can someone with a disability use the facility as quickly and easily as a person without a disability? • Adaptable: can a user configure the item to meet their specific needs and preferences and will it work with common assistive technologies? <p>An <i>Accessible Procurement Declaration Form</i> has been implemented by the Purchasing Department and highlights the requirement as it relates to procurement and establishes how it has been considered in the scope of a particular procurement.</p>
<p>5.2 Provide explanation if impracticable, upon request</p>	<p>If procuring or acquiring goods, services of facilities with accessibility criteria incorporated is impracticable, an explanation will be provided upon request.</p>

Part I: General Standards – s.6

AODA Standards / Regulation Reference O. Reg.191/11, s. 6	I: Self-Service Kiosks
	Compliance Deadline: January 1st, 2013
	DELIVERABLES
<p>6.1 Incorporate accessibility features when procuring or acquiring self-service kiosks</p>	<p>HSN will incorporate accessibility features when procuring or acquiring self-service kiosks, except where it is not practicable to do so. General principles of accessibility will be applied:</p> <p>Accessible: can a person with a disability use the service?</p> <p>Equitable: can someone with a disability use the facility as quickly and as easily as a person without a disability?</p> <p>Adaptable: can a user configure the item to meet their specific needs and preferences and will it work with common assistive technologies?</p>

Part I: General Standards – s.7

AODA Standards / Regulation Reference O. Reg.191/11, s. 7	I: Training
	Compliance Deadline: January 1st, 2014
	DELIVERABLES
<p>7.1 Provide training on IASR accessibility standards and Human Rights Code</p>	<p>All employees, volunteers, persons participating in development of organizational policy and other persons who provide goods, services or facilities on behalf of HSN shall receive training on IASR accessibility standards and Human Rights Code via a self-learning package (SLP) that will be posted on the HSN Learning Management System, the Education Portal and will be made available to those without access. This will complement the existing SLP that meets the training requirements of the Accessibility Standard for Customer Service.</p>
<p>7.2 Training is appropriate to duties</p>	

HSN Multi-Year Accessibility Plan

<p>7.3 As soon as practicable</p>	<p>The training that is provided will be appropriate to duties of the participant, will be provided as soon as practicable, and will be continually updated as required to include relevant policy changes.</p>
<p>7.4 Training regarding policy changes</p>	
<p>7.5 Record of training</p>	<p>A record of training provided under this section, including dates of training and number of individuals will be kept via our HSN learning management system, the Education Portal.</p>

Part II: Information and Communication Standards – s.11

<p>AODA Standards / Regulation Reference O. Reg.191/11, s. 11</p>	<p>II: Feedback Process Compliance Deadline: January 1st, 2014</p>	
	<p>DELIVERABLES</p>	
<p>11.1 Ensure feedback processes are accessible by accessible formats and/or communication supports upon request</p>	<p>HSN will ensure feedback processes are accessible by accessible formats and/or communication supports upon request. Accessibility toolkits are available to assist with patient communication/feedback. Staff will be informed to encourage feedback and relay that feedback via the email address on behalf of those who are unable to do so themselves. Alternative feedback methods/formats will be explored.</p>	
<p>11.3 Notify the public about the availability of accessible formats and communication supports</p>	<p>Once all formats and communication supports are in place, HSN will notify the public about the availability of accessible formats and communication supports</p>	

Part II: Information and Communication Standards – s.12

<p>AODA Standards / Regulation Reference O. Reg.191/11, s. 12</p>	<p>II: Accessible Formats and Communication Supports Compliance Deadline: January 1st, 2015</p>	
	<p>DELIVERABLES</p>	
<p>12.1 Provide accessible formats and communication supports for information</p>	<p>Accessible formats and communication supports will be provided in a timely manner that takes into account the person’s accessibility needs due to disability and at a cost that is no more than the regular cost charged to other persons. HSN will roll out a number of Accessibility Toolkits that provide patients, visitors, or staff, with a modest number of typically requested assistive communication devices. Once in place, the Toolkits will be monitored for the degree of usage and determine whether there is an increased need. A related policy is being implemented.</p>	
<p>12.2 Consult with person requesting alternate format</p>		

HSN Multi-Year Accessibility Plan

<p>12.3 Notify public of availability of these alternatives</p>	
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Part II: Information and Communication Standards – s.13

<p>AODA Standards / Regulation Reference O. Reg.191/11, s. 13</p>	<p>II: Emergency Procedure Plans and Public Safety Information Compliance Deadline: January 1st, 2012</p>
<p>13.1 Provide emergency procedure and public safety information in accessible formats or with communication supports as soon as practicable, upon request</p>	<p>DELIVERABLES</p> <p>HSN does not typically prepare emergency procedures, plans or public safety information that is available to the public. In the event that it does, it will be provided in an accessible format or with the appropriate communication supports, as soon as practicable, upon request.</p>

Part II: Information and Communication Standards – s.14

<p>AODA Standards / Regulation Reference O. Reg.191/11, s. 14</p>	<p>II: Accessible Web Sites and Web Content Compliance Deadline: January 1st, 2014 and January 1st, 2021</p>
<p>14.1 Ensure internet and intranet websites and web content conform to WCAG 2.0 guidelines</p>	<p>DELIVERABLES</p> <p>HSN shall make HSN Internet/Intranet websites and web content conform with the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0 as/when follows:</p> <ul style="list-style-type: none"> • New websites and web content to Level A by January 1, 2014 (14.4) • All websites and web content to Level AA by January 1, 2021 (other than live captions and audio descriptions) (14.4)

Part III: Employment Standards – s.22

<p>AODA Standards / Regulation Reference O. Reg.191/11, s. 22</p>	<p>III: Recruitment, General Compliance Deadline: January 1st, 2014</p>
<p>22.0 Notify about accommodation in recruitment process</p>	<p>DELIVERABLES</p> <p>All HSN employees and the public will be notified about the availability of accommodation for applicants with disabilities in the recruitment process via job postings and the job posting website.</p>

Part III: Employment Standards – s.23

AODA Standards / Regulation Reference O. Reg.191/11, s. 23	III: Recruitment, Assessment or Selection Process Compliance Deadline: January 1st, 2014
	DELIVERABLES
23.1 Notify selected job applicants of the availability of accommodations upon request in relation to the materials or processes used for selection.	HSN will notify selected job applicants of the availability of accommodations upon request in relation to the materials or processes used for selection.
23.2 Consult with selected applicant and provide/arrange for suitable accommodation in a manner that takes into account the applicant’s accessibility needs.	HSN will consult with selected applicant and provide/arrange for suitable accommodation in a manner that takes into account the applicant’s accessibility needs.

Part III: Employment Standards – s.24

AODA Standards / Regulation Reference O. Reg.191/11, s. 24	III: Notice to Successful Applicants Compliance Deadline: January 1st, 2014
	DELIVERABLES
24.0 When making offers of employment, notify successful applicant of policies for accommodating employees with disabilities	Letters or other communications of offers of employment will include information about the accommodation policies

Part III: Employment Standards – s.25

AODA Standards / Regulation Reference O. Reg.191/11, s. 25	III: Informing Employees of Supports Compliance Deadline: January 1st, 2014
	DELIVERABLES
25.1 Inform employees of policies supporting employees with disabilities	HSN will inform employees of policies supporting employees with disabilities as they are developed. This information will be provided to new employees as soon as practicable after hiring and HSN will provide updated information on accommodations policies to employees when changes occur.
25.2 Provide this information to new employees as soon as practicable after hiring	
25.3 Provide updated information on accommodations policies to employees when changes occur	

Part III: Employment Standards – s.26

AODA Standards / Regulation Reference O. Reg.191/11, s. 26	III: Accessible Formats and Communication Supports for Employees Compliance Deadline: January 1st, 2014
	DELIVERABLES
26.1 Provide accessible formats and communication supports for job or workplace information, upon request	Upon request, HSN will provide accessible formats and communication supports for job or workplace information that is: <ul style="list-style-type: none"> • needed in order to perform the employee’s job • generally available to employees in the workplace Employees will be consulted with to determine suitability of format or support. Any plans for alternative or accessible communication are included in the employee’s individual accommodation plan.
26.2 Consult with employee to determine suitability of format or support	

Part III: Employment Standards – s.27

AODA Standards / Regulation Reference O. Reg.191/11, s. 27	III: Workplace Emergency Response Information Compliance Deadline: January 1st, 2012
	DELIVERABLES
27.1 Provide individualized workplace emergency response information to employees who have a disability	Provide individualized workplace emergency response information to employees who have a disability.
27.2 Provide information to person designated to provide assistance upon consent	Provide information to person designated to provide assistance upon consent
27.3 Provide information as soon as practicable after becoming aware of the need	Provide information as soon as practicable after becoming aware of the need
27.4 Review individualized workplace emergency response information.	Review individualized workplace emergency response information when: <ul style="list-style-type: none"> • employee moves location • individual plans are reviewed • general emergency policies reviewed

Part III: Employment Standards – s.28

AODA Standards / Regulation Reference O. Reg.191/11, s. 28	III: Documented Individual Accommodation Plans Compliance Deadline: January 1 st , 2014
	DELIVERABLES
<p>28.1 Develop written process for documented individual accommodation plans</p> <p>28.2 Include prescribed elements in process.</p> <p>28.3 Individual accommodation plans specifics.</p>	<p>HSN will develop written process for documented individual accommodation plans.</p> <p>28.2 Include prescribed elements in process.</p> <ul style="list-style-type: none"> • How employee can participate • How employee will be assessed • How employer can request assessment to determine accommodation • How employee can request participation of union representative • How employee’s personal information will remain private • How, and how often, plan will be reviewed and updated • How reasons for denied request will be communicated • How plan will be provided to employee <p>28.3 Individual accommodation plans shall:</p> <ul style="list-style-type: none"> • Include any information regarding accessible formats and communications supports provided, if requested • Include individualized workplace emergency response information, if required <p>Identify any other accommodation that is to be provided</p>

Part III: Employment Standards – s.29

AODA Standards / Regulation Reference O. Reg.191/11, s. 29	III: Return-to-Work Compliance Deadline: January 1 st , 2014
	DELIVERABLES
<p>29.1 Develop a documented return-to-work process</p> <p>29.2 Include steps employer will take to facilitate return to work and use documented individual accommodation plans</p>	<p>HSN will develop a documented return-to-work process.</p>

Part III: Employment Standards – s.30

AODA Standards / Regulation Reference O. Reg.191/11, s. 30	III: Performance Management Compliance Deadline: January 1 st , 2014
	DELIVERABLES
30.1 Include accessibility considerations in performance management processes	Managers will be informed of the employment standards and will be informed that performance management process must take into account the accessibility needs of employees with disabilities, including existing accommodation plans.

Part III: Employment Standards – s.31

AODA Standards / Regulation Reference O. Reg.191/11, s. 31	III: Career Development Compliance Deadline: January 1 st , 2014
	DELIVERABLES
31.1 Include accessibility considerations and individual accommodation plans in career development and advancement, including additional responsibilities within current position	Through education, Managers and Supervisors will be able to include accessibility considerations and individual accommodation plans in career development and advancement, including additional responsibilities within current position.

Part III: Employment Standards – s.32

AODA Standards / Regulation Reference O. Reg.191/11, s. 32	III: Redeployment Compliance Deadline: January 1 st , 2014
	DELIVERABLES
32.1 Include accessibility considerations and individual accommodation plans in redeployment processes	Include accessibility considerations and individual accommodation plans in redeployment processes.

Part IV: DRAFT Built Environment Standards (Design of Public Spaces)

<p>AODA Standards / Regulation Reference O. Reg.191/11, Part IV</p>	<p>IV: Design of Public Spaces (DRAFT) Compliance Deadline: Estimated as January 1st, 2016</p>
<p>HSN will develop plans to ensure technical requirements outlined in the AODA Built Environment Standards (Design of Public Spaces) – once finalized - are met in all new construction and/or renovation, in all relevant areas. From current draft standards, it is expected this will include:</p>	
<p>Ss. 80.32 to 80.39 Accessible Parking</p>	
<p>Ss. 80.16, 80.17 Outdoor public use eating areas</p>	
<p>80.21 - 80.31 Exterior Paths</p>	
<p>Ss. 80.40 - 80.43 Obtaining Services E.g.: service counters, waiting areas</p>	
<p>Ss. 80.44 Maintenance</p>	

8. COMMUNICATION OF THE PLAN

The HSN Accessibility Plan will be communicated through a variety of means, including but not limited to:

- Knowledge of the existence / location of the plan will be provided to all new employees at orientation sessions;
- Currently posted on the HSN external website in both official languages;
- Currently posted on the HSN Intranet;
- Hard copies are made available from the Corporate Communications Department;
- Wherever possible, the plan will be made available in a format that takes into account an individual's disability (e.g., computer disk, large print and/or Braille, etc.). You can make your request by email at: AccessibilityS&C@hsnsudbury.ca.