

Accessibility Plan

2018-2023

We make it possible.

Executive Summary

- Runnymede Healthcare Centre is committed to identifying and removing barriers.
- Barriers can impede an individual's ability to access our health services and/or to work or visit the hospital.
- Runnymede cultivates a quality improvement culture and promotes opportunities for improving accessibility.
- The 2018-2023 accessibility plan builds on the previous plan.
- The plan outlines the objectives and removal strategies for barriers guided by best practices and feedback from patients, staff, physicians, volunteers and visitors that was gathered by the annual accessibility survey.



Statement of Commitment

 Runnymede Healthcare Centre is committed to treating all people in a way that allows them to maximize their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility and meeting accessibility requirements under the Accessibility for Ontarians with Disabilities Act (AODA) and the Integrated Accessibility Standards Regulation.



Accessibility Plan Objectives

- Describe how barriers are identified and chosen for inclusion in the plan.
- Outline the process to remove, prevent or reduce barriers to people with disabilities over the next 5 fiscal years 2018-2023
- Outline the process by which the status of each barrier will be reviewed and monitored.



Barrier Identification

- The Hospital conducts an annual accessibility survey for patients, families, staff, physicians, volunteers and visitors to identify barriers.
- The survey was provided in accessible formats (online, hardcopy and verbal) and distributed in the following ways to gather feedback:
 - Email
 - iConnect
 - Face to face
 - Operations Committee meeting
 - Patient Family Council meeting



2018 Accessibility Survey

- The survey was conducted in January 2018 to identify communication, policy & practice, physical, architectural, and technological barriers that may exist for people accessing programs and services at the hospital.
- 122 responses were received in total:
 - 72 Staff and Physicians
 - 4 Volunteers
 - 16 Patients
 - 30 Family and Visitors
- Over 88.5% of respondents experienced no barriers while accessing program and services at Runnymede Healthcare Centre.
- The results demonstrate the hospital's outstanding commitment to accessibility and ongoing quality improvement.



Areas of Improvement

- Survey results were validated by subject matter experts who
 provided input on strategies to remove, prevent or mitigate the
 barriers going forward that are in line with the strategic directions
 and priorities of the hospital.
- Identified barriers and strategies for removal have been organized into the categories outlined below and prioritized:
 - Communication
 - Policy & practice
 - Physical, architectural
 - Technological



Barrier: Communication

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Language Barrier	Promote the availability of interpreter services	Director, Clinical Programs	
	Promote the availability of Speech Language Pathology resources on iConnect	Manager, Allied Health & Pharmacy	
Pocket Talkers	Create a formal process to track the availability of pocket talkers	Director, Clinical Programs & Director, Patient Care	



Barrier: Communication

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Signage	Utilize Electronic Medical Record capability to implement electronic boards on patient floors	Director, Nursing	



Barriers: Policy & Practice

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Accessibility policies	Update accessibility policy to include Integrated Accessibility Standards Regulation (IASR)	Human Resources	
	Promote and post the policy	Human Resources	
	Schedule learning sessions in conjunction with the launch of Accessibility Plan	Human Resources	



Barriers: Policy & Practice

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Accessibility Training	Staff will participate in annual refresher training	Human Resources	



Barriers: Physical & Architectural

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Wayfinding	Update wayfinding sign in reception (MAP)	Director, Communications	
	Support Wayfinding by providing maps of Hospital at main Reception to guide visitors and patients	Director, Communications	
	Develop process with Reception to distribute maps to patients and visitors	Human Resources	



Barriers: Physical & Architectural

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Elevators	Explore ways to reduce the wait time before elevator doors close	Manager, Facilities and Environmental Sustainability	
	Add Signage to indicate location of elevators		
	Clear signage for service elevator		
Door Bell on Finance Door	Replace the door bell button outside of the Finance Department	Manager, Facilities and Environmental Sustainability	



Barrier: Technology

Barrier	Removal/Prevention	Responsibility	Update/Outcome
Public Computer Access	Investigate the feasibility of increasing the number of computers available to the public	Director, Information Services	
	Investigate the viability of implementing monthly training sessions with patients facilitated by the Activation Department	Manager, Activation and Volunteer Services	
Access to Internet	Research ways to increase access to the	Director, Information	
p.14	internet	Services	RUNN MEDE HEALTHCARE CENTRE

Reporting & Communication

- Status reporting outlining the progress of the accessibility plan will be provided on an annual basis to the Operations Committee, Executive Advisory Committee and the Board of Directors.
- The plan will be reviewed on an annual basis by March 31 to ensure that it aligns with the strategic directions and priorities of the hospital and revisions will be made as necessary.
- The accessibility plan and status reports will also be made available on iConnect, iBoard and the website

