

St. Joseph's General Hospital Elliot Lake 2024-2028 Accessibility Plan

Prepared by SJGHEL's Accessibility Committee



Updated 2023

St Joseph's General Hospital Accessibility Plan 2024-2028

Table of Contents

Contents

Introduction.....	3
About Sghel.....	3
Purpose Of The Plan	3
Plan Member Sites.....	4
Commitment To Accessibility.....	5
Sghel's Accessibility Committee	5
Committee Members.....	6
Accessibility Compliance Achievement In The Past Years	6
2024-2028 Accessibility Initiatives.....	9
Review And Monitoring Process.....	14
Communication Of The Plan	14

Introduction

About SJGHEL

St Joseph's General Hospital Elliot Lake (SJGHEL) is the largest and the only facility in the 3.5-hour corridor between Sault St. Marie and Sudbury that provides: Obstetrical Services intensive care, surgical services, specialist clinics, addiction treatment services, CT Scanning, dialysis services, and inpatient/outpatient diabetes education and care. We also provide the largest satellite oncology program with over 500 visits annually.

Purpose Of the Plan

A comprehensive work plan was developed to address the Integrated Accessibility Standards Regulation (IASR) requirements. By following these itemized action plans, full compliance with legislated AODA standards will be achieved, and locally identified priorities will also be addressed. The 2024-2028 Accessibility Plan will guide SJGHEL through its planned actions and commitments to continue to prevent and eliminate barriers for persons with disabilities on all three sites of SJGHEL.

Plan Member Sites

The Corporation of St. Joseph's General Hospital includes three (3) active sites:

- i. St. Joseph's General Hospital site
- ii. St. Joseph's Manor site
- iii. The Oaks Treatment Centre site

This plan is intended to continue to move SJGHEL toward the vision of accessibility and inclusion for all who come to work or use the Hospital facilities and services.

This plan:

- i. Describes St. Joseph's General Hospital Elliot Lake which is covered by this accessibility plan.
- ii. Outlines the methodology used to identify barriers.
- iii. Outlines the measures to be taken during the next five years to meet the mandatory requirements of IASR (AODA)
- iv. Outlines the review and monitoring process of the annual accessibility plan and describes how the plan will be communicated internally and to the public via the website.

Commitment to Accessibility

St. Joseph's General Hospital Elliot Lake (SJGHEL) is committed to excellence in serving all patients including people with disabilities. The Hospital's Mission and Values are built around our ability to meet the needs of all who come to us for health care, and it is our commitment that we will do this to the best of our ability.

We believe in providing care to community members in a way that best fits their needs, and we are committed to removing barriers to receiving care by complying with the requirements of the *Accessibility for Ontarians with Disabilities Act, 2005 (AODA)*.

SJGHEL's Accessibility Committee

The accessibility committee provides leadership to SJGHEL to help fulfill its obligations under the *Accessibility for Ontarians with Disabilities Act (2005)*, and the integrated Accessibility Standards regulation (191/11). The committee guides the organization regarding barrier-free access to all SJGHEL programs, implementation of this multi-year plan, and monitoring and reporting on its annual progress.

Committee Members

Christopher Piel, Vice President of Finance and Corporate Services / Chief Financial Officer

Tammi Beeson, Manager of Employee and Labor Relations

Don Gelinias, Building Services Manager, Facilities Management

Accessibility Compliance Achievement In The Past Years

Accessibility Standards	Lead	Initiatives	Completed by
Accessible website and web content	The project was led by HR along with the dedicated support of all the administrative staff.	A complete corporate website following the WCA Guidelines.	September 2022
Improved and added Parking	Facilities management	Improved main entrance driveway. Added additional parking for accessible parking permit	2023

		holders and expectant mothers.	
Interior spaces	Facilities management	Replaced flooring	2023
Wayfinding	Facilities management	Updated wayfinding to assist individuals in navigating the building. Main wayfinding is tri-lingual (English, French & Ojibwe) to accommodate the communities we serve.	2023
Add walkway	Facilities management	Provide a sidewalk from the east parking lot to the main entrance, eliminating individuals walking on the roadway.	2021
Elevators modernization	Facilities management	Renovate elevator cabs. Braille for floor selection buttons, audible provides floor location in English and French	2019
New Accessible bathroom- Diagnostic imaging department	Facilities management	New bathroom with door operator and ADA-compliant fixtures.	2021
Improved lighting-Patient overbed	Facilities management	Replaced old lighting with new LED fixtures-better lighting for patients as well as night light function.	2023



Improved corridor/lobby lighting on 3 rd floor	Facilities management	Replaced lighting fixtures with LED units and added additional fixtures.	2023
Patient bed replacement (54)	Facilities management	Replace the fleet of beds utilized in patient care and have additional features for patient and staff use	2022
CT Scan	Facilities management	Install CT scans in DI department service for the community, reduces travel for patients, the next CT unit is 160 km away.	2022
Exterior lighting upgrades—Safety & Security	Facilities management	Improve lighting in all areas, walkways, and parking lots	2022
Wheelchairs	Facilities management	Provide 20 new wheelchairs, some by the main entrance and others in clinical areas	2023

2024-2028 Accessibility Initiatives

Requirement of Accessibility Standards	Lead	What (Planned Initiatives)	Anticipated to be done
General			
<ol style="list-style-type: none"> 1. Accessibility plan <ol style="list-style-type: none"> a. Conduct regular meetings to monitor the progress of the plan. b. Adding more members to the planning committee from all three sites of SJGHEL. c. Develop a new multi-year accessibility plan by mid-2028. 	Accessibility planning committee	<i>Outlined under General</i>	December 2023
<ol style="list-style-type: none"> 2. Training <ol style="list-style-type: none"> a. Train employees, volunteers, those involved in the development of SJGHEL policies, and other persons who provide goods, services, or facilities on behalf of the hospital on the following: <ol style="list-style-type: none"> i. The purpose of the AODA and the requirements of the patient service standards. ii. The Human Rights Code and how it pertains to persons with disabilities. 	HR/Occ Health/Facilities	TBD	2024-2028



<ul style="list-style-type: none">iii. How to interact and communicate with patients with disabilities.iv. How to interact with people with disabilities who use assistive devices, require the assistance of a service animal, or require the use of a support person.v. How to use hospital-provided equipment or devices available at the organization to help patients with disabilities.vi. What to do if a person with a disability is having difficulty accessing the hospital's services, or facilities.			
<p>3. Policies</p> <ul style="list-style-type: none">i. Review and maintain policies regarding the provision of goods, services, or facilities to individuals with disabilities that are consistent with the principles of dignity, independence, integration, and equal opportunity.ii. Include a statement of organizational commitment describing the hospital's goal to meet the needs of individuals with disabilities promptly.iii. Document the organization's training policy as required under the IASR,	HR	Policies are in place and posted on our official website .	Updating of the policies – 2024-2028



including a summary of the content covered and to whom it will be provided and when.			
4. Building Infrastructure	Facilities Management	Facilities will incorporate AODA design with all new construction and continue reviewing existing opportunities. -New accessible entry for dialysis area, larger doorway with door operator. -Add a larger door entry into the Hospice Suite. -Overhead paging system. Update the system to provide clearer audio.	On-going 2024 2024 2025



		-Replace the master clock system with a digital display to make viewing easier.	2026
5. Interior Spaces	Facilities Management	-Continue to improve lighting throughout the building.	On-going
		-Replace knob-style door handles with lever style.	On-going
		-Install AODA compliant toilets.	On-going
		-Install accessible door operators.	On-going
		-Flooring replacement. Lighter colours without patterns	On-going



6. Mobility and accessibility	Facilities Management	-Provide bus shelter-pick up/drop off point by the hospital's main entrance. Work with the city of EL transit service to add to existing routes.	2025
		-Provide a wheelchair ramp in the chapel.	2025
7. Information and communication	IT, HR, and Facilities	Website maintenance. Wayfinding External/public-facing documents	On-going
8. Technology	IT	Website improvements. Review of available assistive devices Training in technology to remove accessibility barriers.	On-going

Review And Monitoring Process

SJGHEL's Accessibility Compliance Committee has decided to meet regularly to review progress. The committee provides updates on their annual commitments on a quarterly basis. The committee's Terms of Reference will be reviewed annually or updated as required and presented to the Senior leaders for approval.

Communication Of the Plan

The hospital's Multi-Year Accessibility Plan will be available to internal and external audiences in many ways.

These will include but are not limited to:

- a. The plan will be posted for staff, patients, and the public to view on the hospital's external website.
- b. An introduction to the new Multi-Year Accessibility Plan, and access to it, will be communicated to staff through the intranet.