



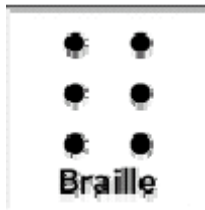
**Wheelchair
Accessible**



**Print size
Easier to see**



**Assistive
Listening System**



Braille

**ANNUAL
ACCESSIBILITY PLAN**

2008 - 2009

Submitted by:

**Accessibility Advisory
Committee (AAC)**

**The Scarborough
Hospital
3050 Lawrence
Avenue East
Scarborough, Ontario
M1P 2V5
Tel: 416 431-8200**

www.tsh.to



Information



**Access for vision
Impairments**



Volume Control



**Telephone
Typewriter**

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September 1, 2008

General Campus
3050 Lawrence Ave. E.
Scarborough, ON
M1P 2Y5
Tel: 416-438-2911
Fax: 416-431-8204

Green Campus
3030 Birchmount Rd.
Scarborough, ON
M1W 3W3
Tel: 416-495-2400
Fax: 416-495-2631

Hemodialysis Services
Bridgepoint Centre
14 St. Matthews Rd.
Toronto, ON
M4M 2B5
416-461-8252

Hemodialysis Services
Corporate Drive Centre
78 Corporate Drive
Scarborough, ON
M1H 3G4
416-438-2911

Community Outreach Services
Kennedy Road Centre
1225 Kennedy Rd.
Unit 1
Scarborough, ON
M1P 4Y1
416-431-8230
416-431-8160
(Day Clinic)

Community Mental Health
Outpatient Services
Eglinton Avenue Centre
2425 Eglinton Ave. E.
Suite 301
Scarborough, ON
M1K 5G8
416-431-8135

Residential Support Services
Wassa Road Centre
125 Wassa Rd.
Scarborough, ON
M1E 3V2
416-268-0766

Urban Outreach Health Centre
3000 Lawrence Avenue East
Building A, 2nd Floor
Scarborough, ON
M1P 2Y1
416-431-8224

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At The Scarborough Hospital (TSH), we are very concerned about how the care we provide is experienced by our patients. A critical part of this focus is creating a barrier-free environment for our patients, community, staff, physicians and volunteers. To help achieve that goal, our Accessibility Advisory Committee has completed TSH's 6th Annual Accessibility Plan, which I am pleased to share with you.

The **Ontarians with Disabilities Act** was passed on December 14, 2001. The purpose of this Act is to improve opportunities for people with disabilities and to allow for their involvement in the identification, removal and prevention of barriers. This is very important work!

I would like to extend my sincere appreciation to the Accessibility Advisory Team and Committee Chair Anne Botond for their outstanding efforts in helping TSH achieve our commitment to provide a safe and accessible environment for everyone. TSH fully supports this initiative and appreciates the hard work, commitment and dedication this group has shown for the last six years.

If you have any questions or comments about this plan, please feel free to contact Anne Botond, Chair of the AAC, at abotond@tsh.to.

Sincerely,

Dr. John Wright
President and CEO

MISSION VISION AND VALUES

The Scarborough Hospital unites The Salvation Army Scarborough Grace Hospital and The Scarborough General Hospital. We will build on the values of our founding partners and the strength of our diversity. We are committed to creating a dynamic organization, in which we fulfill our mission, achieve our vision and live our values.

MISSION:

As your community hospital, our purpose is to:

- Provide excellent patient care, promote health and improve quality of life.
- Deliver a broad range of emergency, ambulatory and inpatient care along with services that reach out to our community.
- Foster research and education that enhances healthcare delivery.

VISION:

We will:

- Meet your physical, emotional, cultural and spiritual needs within a caring and supportive environment.
- Understand and advocate for the needs of our diverse community and meet those needs with timely, responsive services.
- Ensure coordinated, quality care by fostering partnerships with families, other health-care providers and community agencies.
- Provide a healthy, creative and rewarding work environment that attracts and develops the best staff, physicians and volunteers.
- Be a leader among community hospitals through continuous improvement, innovation and investment in our people, technology and facilities.

VALUES:

We believe in:

- Compassion, dignity, respect and the sanctity of life.
- Honesty, trust and effective communication.
- Respecting patient and staff confidentiality.
- Valuing our staff, physicians and volunteers.
- Competence, skill and life-long learning.
- Responsible use of our resources.

EXECUTIVE SUMMARY

The purpose of the ***Ontarians with Disabilities Act, 2001 (ODA)*** is to improve opportunities for people with disabilities and to involve them in the identification, removal and prevention of barriers. The **ODA** has mandated all hospitals to prepare an Annual Accessibility Plan.

This is the 6th annual plan (2008 – 2009) prepared by the Accessibility Advisory Committee (AAC) of The Scarborough Hospital.

This report summarizes the measures that TSH has taken to date, the endorsement of the Annual Accessibility Plan by TSH's Executive Team, and the activities of the Accessibility Advisory Committee for the coming year.

During this 6th year of Accessibility awareness, including planning and educating for the future, our subgroups continued to work to promote a barrier-free environment for patients, visitors and staff.

The Facilities and Transportation subgroup adopted the slogan:

**"A BARRIER FREE ENVIRONMENT –
EVERYONE'S RIGHT, EVERYONE'S RESPONSIBILITY".**

This slogan was prominently displayed during the **"visitor accessibility survey"** conducted at both hospital campuses. This survey asked visitors to identify any issues regarding accessibility/way-finding in the organization.

The slogan was adopted formally by the AAC and continues to be displayed at the hospital campuses.

GOALS FOR 2008 – 2009

1. Identify barriers experienced by persons with disabilities related to:
 - Environment
 - Policy
2. Build partnerships with our community
3. Increase awareness about accessibility issues with staff, physicians, volunteers and community
4. Increase patient/visitor awareness of resources available for patients within the hospital
5. Increase assistance for visitors/patients in accessing our facilities

THE SCARBOROUGH HOSPITAL (TSH)

TSH is a multi-location urban community hospital that delivers innovative, high-quality patient care, advocates for our community's health and wellness issues, and is a leader in research, teaching and learning. TSH is a regional treatment centre for Dialysis and MRI and is renowned for its Sexual Assault Care Centre and Mental Health programs. Affiliated with the University of Toronto, TSH is also a referral centre for Vascular Surgery, Pacemakers and Corneal Implants.

TSH is Canada's largest urban community hospital with over 3,700 staff, 730 physicians and 800 volunteers, with a 600-bed capacity and an annual budget of just over \$311 million. We provide a full range of services to a diverse and fast growing population.

In 2007 - 2008 The Scarborough Hospital hosted 188,871 inpatient days and 369,036 outpatient visits, including:

- **97,047 emergency visits**
- **5,646 births**
- **76,916 surgical visits**

TSH COMMITMENT TO ACCESSIBILITY PLANNING

TSH is committed to providing access for all of our patients, their families, and our employees. Part of this work includes our Annual Accessibility Planning process, which helps us organize appropriate facility changes and staff training to accommodate community and employee access.

ACCESSIBILITY ADVISORY COMMITTEE (AAC)

The Accessibility Advisory Committee was established in February 2003 and is comprised of hospital staff, individuals and groups from our community who represent those with accessibility issues.

TSH's Executive Team is under the leadership of Dr. John Wright, President and CEO and endorses the Accessibility Advisory Committee.

Anne Botond, Manager, Volunteer Services, is the committee Chair for 2008 - 2009.

Seemi Khan, Program Assistant, Access and Equity Services is responsible for coordinating the Accessibility Advisory Committee meetings. Included in Seemi's portfolio are initiatives related to access, equity, and diversity.

She leads the hospital's Access and Equity Services, formerly known as Ethno-Racial Patient Services, which was established in 1994 in response to the multilingual and multicultural needs of our patients.

Access and Equity Services provides education to staff about how to provide culturally sensitive and culturally competent care to our patients. Trained community and staff volunteers provide interpretation in 47 languages. The department advocates and works with immigrant service organizations to identify community needs, and has established guidelines to care for our diverse patient population. These include; cultural, linguistical care of the blind, deaf, deafened and hard of hearing.

In 2002, Access and Equity Services initiated the ACCESS PROGRAM for the deaf, deafened and hard of hearing. Working in partnership with the Canadian Hearing Society, the hospital trained 180 trainers. These trainers then trained other staff. The hospital's telecommunication departments are able to respond to the deaf through a TTY. Various listening and communication aids are available for the deaf, deafened, and hard of hearing patients. As well, both hospital campuses have a public TTY. Sign Language Interpreters are accessed through the Ontario Interpreter Services and the Canadian Hearing Society.

ACCESSIBILITY
Advisory Committee Members (AAC)



Grace Campus
3030 Birchmount Road
Scarborough, ON M1W 3W3
416-495-2400



General Campus
3050 Lawrence Avenue East
Scarborough, ON M1P 2V5
416-431-8200

Anne Marie Males
Director,
Public Affairs and Community Relations
General: Ext. 6790

Anne Botond
Chairperson AAC,
Manager, Volunteer Services
General: Ext. 6218

Cindy Woods
Corporate Communications
General: Ext. 6594

Cheryl Hendriks
Director, Risk Management
General: Ext. 6401

Elian Rotman
Capital Projects
General: Ext. 6792

Jayshree Somani
Laboratory
General: Ext. 6069

Jo-Ann Bentley
Canadian Hearing Society
416-964-9595 Ext. 318

Joanie Turner
Patient Relations Facilitator
General: Ext. 6433

Michelle Clarkward
Paediatrics
Grace: Ext. 2423

Paul Morrell
Social Worker, Social Work
General: Ext. 6118

Susan Kuttritz
Purchasing Department
General: Ext. 8127

Sophia Leung
Director, Nutritional and Food Services
General: Ext. 6179

Victor Gouveia
Community Representative
Canadian National Institute for the Blind

ACCESSIBILITY
ADVISORY COMMITTEE MEMBERS

Assistant and Administrative Support

Seemi Khan, Program Assistant, Access and Equity Services

Resource Staff

Keith Cameron, Patient Care Director, Mental Health Services

Henry Borkowski, Director, Capital Projects

Executive Team Resource

Lindsey Crawford, Vice President, Patient Services

ANNUAL ACCESSIBILITY WORK PLAN 2008 - 2009

Achievements:

- Voice Activated Elevators
 - ↳ All hospital elevators have been updated and provide brail and verbal orientation to floors.
- Taxi Telephone
 - ↳ All taxi phones have been replaced with a handset with volume control for hearing aid compatibility.
- Disabled Parking
 - ↳ Four designated disabled parking spots have been created in the staff parking.
 - ↳ Nine more disabled parking spots have been created to accommodate the physically challenged community members.
- Information Desk:
 - ↳ The main information desk at the Grace Campus was relocated closer to the main entrance to make accessibility to information easier for patients and visitors.
- Waiting bench
 - ↳ A waiting bench has been placed at the Coffee Time entrance.
 - ↳ Roadway in the wheelchair parking area has been repaired.
- West Wing
 - ↳ The new West Wing provides ramps at entrance doors, push buttons at almost every door including the doors from the Medical Mall.
 - ↳ Wheelchair washrooms are provided on all floors for staff and visitors.
 - ↳ Within the existing space of the hospital, the accessibility has been improved wherever we have completed new projects (e.g. the second floor, the recently renovated dialysis area, etc).
- Accessibility audits/Visitors surveys
 - ↳ Visitors Surveys have been conducted; Environmental assessments of all centers have been completed; results/analysis is complete.
 - ↳ Recommendations for improvement and change have been made. The group has compiled a list by priority for submission and review to the AAC.

Work in Progress:

- Information Flyer for the preadmission package for elective patients and all patient care units.
 - ↳ Committee members met with the representatives from Accessible Printing to review needs for the visually impaired.
- Washrooms
 - ↳ All washroom grab bars are being replaced with reserve L type wherever practical.
- Labels for Visually Impaired
 - ↳ Committee members have met with the representatives and requested a quotation to provide labels. These labels will be provided to all nursing care units, to be used on patient charts and also by patients' bed sides.

Future Planning:

- The education and communication subgroup has arranged for annual education sessions for staff about disabilities (i.e. sessions by CNIB/CHS). These sessions will be held in May and June 2009.
- Develop a "Did you know" section for the Vital Signs, Connections and Outlook by June 2009.
- Committee recommended including the training from CNIB and CHS as a component to the Nursing Orientation, which is held once per month.
- Staxi Chairs – The committee has recommended purchasing Staxi Chairs to better serve our patient population. These chairs will be in addition to the wheelchairs we already have. The benefit of the Staxi Chairs is that they stack together and take less room for storage.

Ongoing:

- Liaise with Capital Projects department re building and related issues.
- Identifying policies that need revision/development and timelines to complete project. The AAC and Human Resource members reviewed policies and guidelines and have made appropriate recommendations.
- Identifying budgets for priority items.
- Identifying other community groups to invite to present at our meeting in order to increase our awareness/identify issues.
- Researching and communicating accessibility success stories and feature in the hospital newsletter **Vital Signs** and communicate the success stories with the local media.
- Continue to refine accessibility information on MOX and CONNECTIONS.
- Distribute any information we develop widely through our community.

REVIEW PROCESS

The Committee meets eight times a year to review progress and discuss arising issues. At each meeting, the AAC reviews priorities, action taken, goals met and work completed. The AAC uses formal and informal feedback mechanisms to monitor progress, including meetings with ability organizations and with individuals who participated in the development of the plan. The Annual Accessibility Plan is modified and presented to the Executive Team annually.

COMMUNICATION

Copies of the TSH Annual Accessibility Plan are available on the TSH web site and TSH intranet. Information about the plan and TSH's progress is also provided through a variety of internal and external communication tools.

Copies of the TSH Annual Accessibility Plan including task groups' recommendations and implementation for previous years (2003, 2004, 2005, 2006, 2007, 2008), are available upon request from the Chairperson of the Committee.

ACCESSIBILITY WORKING GROUP TERMS OF REFERENCE

1. PREAMBLE

It should be noted that some of the portions of these Terms of Reference have been modified from the Provincial Regulations of the Accessibility for Ontarians with Disabilities Act (2001/2005).

2. DEFINITIONS

Within these Terms of Reference the term:

2.1 “**TSH**” refers to all sites of The Scarborough Hospital and includes:

- ◆ General Campus
- ◆ Grace Campus
- ◆ Hemodialysis Services (Bridgepoint Centre)
- ◆ Hemodialysis Services (Corporate Drive Centre)
- ◆ Mental Health:
 - Community Mental Health Outpatient Services (Eglinton Avenue Centre)
 - Community Outreach Services (Kennedy Road Centre)
 - Residential Support Services (Manse Road Centre)
- ◆ Temporary Portable Sites
- ◆ Urban Outreach Family Health Centre

2.2 “**Barrier**” means:

Anything that prevents a person with a disability from fully participating in all aspects of society because of said disability, including a physical barrier, an architectural barrier, an information or communication barrier, an attitudinal barrier, a technological barrier, or a policy or practice.

2.3 “**Disability**” means:

2.3.1 Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and includes: diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impairment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device;

- 2.3.2 A condition of mental impairment or a developmental disability;
- 2.3.3 A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols of spoken language;
- 2.3.4 A mental disorder;
- 2.3.5 An injury for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

(Adapted from Bill 125, 2001).

3. PURPOSE

The TSH Accessibility Advisory Committee shall advise The Scarborough Hospital to facilitate a barrier-free environment for patients, visitors, volunteers, physicians, and staff of all levels of abilities. This shall be achieved through the review of policies, programs, and services, and the identification, removal, and prevention of barriers faced by persons with disabilities.

4. OBJECTIVES

The Accessibility Advisory Committee shall report to the Director, Public Affairs and Community Relations of The Scarborough Hospital.

The Accessibility Advisory Committee shall be responsible for the following:

- 4.1 Advise the hospital on issues and concerns (barriers) faced by persons with disabilities and the means by which the hospital may work towards the elimination of these barriers.
- 4.2 Participate in the annual development and/or refinement of the hospital's Accessibility Plan(s) which is intended to improve the quality of life for all persons with disabilities.
- 4.3 Advise the hospital with its review of by-laws, policies, programs, and services to ensure identification and removal of barriers to persons with disabilities.
- 4.4 Advise the hospital on information and appropriate format for dissemination of information to the members living with disabilities.
- 4.5 Support, encourage, and be an ongoing resource to the hospital by building awareness about measures (taken by the hospital) for improving the quality of life and access to persons with disabilities through removal of barriers and education.

5. MEMBERSHIP

Staff and community members who have personal or professional knowledge of disability issues:

- ◆ Administration
- ◆ Access and Equity
- ◆ CHS - Canadian Hearing Society
- ◆ CNIB - Canadian National Institute for the Blind
- ◆ Environment and Facilities
- ◆ Human Resources/Safety
- ◆ Laboratory
- ◆ Maternal Newborn
- ◆ Nutritional and Food Services
- ◆ Patient Relations
- ◆ Public Affairs and Community Relations
- ◆ Risk Management
- ◆ Social Work

Other hospitals and community representatives will be invited as needed.

6. TERM OF OFFICE

The term for the initial appointments to the AAC will continue until December 2011.

Members will be appointed for a 3-year term.

Members are eligible for membership for a maximum of two consecutive 3-year terms.

Hospital members may elect to have a designate attend some meetings.

7. ORGANIZATION

Chairperson

- ◆ The working group shall select a Vice Chairperson every 2 years.
- ◆ The Chairperson shall be appointed for a period of 2 years. The Vice Chairperson shall assume the role of Chairperson for the following 2 - year term.

Task Forces

- ◆ The AAC may appoint such task forces as deemed necessary.

8. QUORUM

A quorum shall be 51 percent of members on the AAC.

9. MEETINGS

Meetings will be held eight to nine times a year or at the call of the Chair.

Recorder/Minutes

- ◆ The Program Assistant, Access and Equity Services shall record the minutes.
- ◆ Minutes shall be distributed with the Agenda at least one week prior to the next meeting.
- ◆ A copy of the minutes shall be circulated to the Director of Public Affairs and Community Relations of The Scarborough Hospital.

10. REPORTING

The AAC shall report to the Director, Public Affairs and Community Relations of The Scarborough Hospital.

APPROVED: _____
Chairperson

DATE: Revised June 2008

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