

# The Scarborough Hospital

## Policy & Procedure Manual

### Corporate – Accessibility for People with Disabilities

#### Policy

In fulfilling its mission *to provide an outstanding care experience that meets the unique needs of each and every patient*, The Scarborough Hospital (TSH) strives at all times to provide its services in a way that respects the dignity and independence of people with disabilities.

TSH is dedicated to excellence in serving all patients, families and visitors. We are committed to providing a barrier-free environment where people with disabilities have the same opportunities to access our care and services.

This policy establishes accessibility standards at TSH in accordance with the Ontario Human Rights Code and the Integrated Accessibility Standards Regulation (IASR) created under the Accessibility for Ontarians with Disabilities Act (2005).

TSH is committed to becoming fully accessible by 2021 by ensuring full compliance of accessibility standards in five areas: customer service, information and communication; employment, transportation and built environment.

#### Definitions

**Accessibility:** Giving people of all abilities opportunities to participate fully in everyday life.

**Assistive Device:** An assistive device is any device that is designed and/or adapted to assist a person to perform a particular task. Assistive devices include specialized aids and devices that enable people with disabilities to carry out their everyday activities. These include, but are not limited to, wheelchairs, hearing aids, adaptive computer technologies, ventilators, walkers, crutches and personal sound amplification devices. An assistive device may be their own personal devices, or one supplied by TSH.

**Barrier:** As defined by the Accessibility for Ontarians with Disabilities Act, 2001, anything that prevents a person with a disability from fully participating in all aspects of society because of his/her disability. It includes a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier...a policy or a practice barrier.

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**Disability:** As defined in Section 2 of the AODA Act, Disability means:

- Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, 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;
- A condition of mental impairment or a developmental disability;
- A learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- A mental disorder; and/or
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.
- The definition includes disabilities of different severity, visible as well as non-visible disabilities, and disabilities the effects of which may come and go.

**Guide Dog:** A dog trained as a guide for a blind person and having the qualifications prescribed by the regulations: R.S.O. 1990, c. B.7, s. 1(1). Additionally, the Blind Persons Rights Act, defines a guide dog as a dog that has been trained at one of the facilities listed in Ontario Register 58 under the *Blind Persons' Rights Act* to act as a guide dog for people who are blind.

**Integrated Accessibility Standards Regulation (IASR):** Standards that build upon the Accessibility for Ontarians with Disabilities Act (2005) and contain four new areas of focus to make Ontario accessible by 2025: Information & Communication; Employment; Transportation; Built Environment. As defined by the Ministry of Economic Development, Trade and Employment, the IASR establishes the compliance framework for obligated organizations. The IASR applies to all public, private and not-for-profit organizations, with at least one employee.

**Support Person:** A support person is an individual hired or chosen by a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs, or access to goods or services. The support person could be a paid personal support worker, a volunteer, or friend or family member. He or she does not necessarily need to have special training or qualifications.

## Procedure

### Section 1: Providing Goods & Services to People with Disabilities

TSH will ensure people with disabilities will be provided with equitable access to goods, services facilities and/or employment provided by TSH taking into account the person's disability.

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## Section 2: Procurement

TSH will incorporate accessibility criteria and features when procuring or acquiring goods, services or facilities through a variety of methods including asking potential suppliers about accessible options they offer and incorporating accessibility criteria in all sourcing documents where applicable e.g. Request for Proposals, Request for Quotations.

## Section 3: Kiosks

TSH will incorporate accessibility features when designing, procuring or acquiring self-service kiosks.

## Section 4: Communication

TSH will communicate with persons with disabilities in ways that take into account their specific needs. Staff will be trained on how to interact and communicate with people at all levels of disabilities. Upon request, an individual can request communication provided in, but not limited to, large print, braille and sign language interpreter. Assistive devices are also available upon request.

## Section 5: Format of Documents

Upon request, TSH will provide accessible documents, materials or information in alternate formats.

## Section 6: Notice of Availability of Documents

TSH will provide the public notice of the availability of the documents, required by the Accessibility Standards for Customer Service, (Ontario Regulation 429/07) upon request. Notice of availability will be provided on the website and through other printed methods.

## Section 7: Internet Websites

TSH's internet websites and web content will conform with the World Wide Web Consortium Web Content Accessibility Guidelines in accordance with the schedule set out in the integrated accessibility standard.

## Section 8: Notice of Temporary Disruptions

TSH will provide notice to the public in the event of planned or unexpected disruptions in the facilities or services usually used by people with disabilities. These notices will include information about:

- the reason for the disruption
- how long the disruption is expected to last

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- a description of any available alternative facilities, services or resources

All disruptions to accessibility services must be reported to the Facilities Department so that a notice of temporary disruption can be issued. Disruptions of a serious or prolonged nature must be reported to the Communications and Community Relations Department. Notices of Temporary Disruption may be:

- Posted in large print in key areas of the hospital, such as at public entrances and on service counters, as determined by Corporate Communications.
- Posted on The Scarborough Hospital's public website (if public disruption) or communicated via intranet or email (if internal disruption) so TSH staff are aware and can appropriately guide individuals with disabilities to alternative services, if available.
- Issued to the local media through news releases in the case of serious and longer term disruptions in accessibility services.
- Notices communicating a temporary disruption to TSH service will be in:
  - a. plain language
  - b. suggested use of Arial font style
  - c. at least 24-font size
  - d. high contrast colours such as black and white and easy to read

## Section 9: Inclusive Meetings

TSH will strive to ensure all meetings are organized, co-ordinated, and planned to accommodate persons with disabilities and will arrange for appropriate requests based on the individual's disability.

## Section 10: Telephone Services

TSH will provide accessible telephone service, including, but not limited to, TTY and relay services and will train all applicable employees, volunteers and others working with the public on how to communicate over the telephone in clear and plain language.

## Section 11: Assistive Devices

TSH will ensure that relevant staff members know how to access and use the assistive devices that are available at TSH and that there are instructions available for these devices. These include, but are not limited to:

- Staxi Chairs are available at both main campuses.
- Accessible washrooms are available at all of our locations.
- TTY and access to sign language are available for deaf, deafened, and hard of hearing patients.
- Assistive devices are located in Patient Registration and on the following units/departments across both campuses:

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Location	Type of Device	Quantity
Emergency Department – General Campus and Birchmount Campus	<ul style="list-style-type: none"> <li>• Uniphone 1000 TTY (for patient’s room)</li> <li>• Hearing Stickers</li> <li>• Pocket Talker Pros/Stetoclip Headsets with adapters</li> <li>• Call Alert 100</li> <li>• Neck Loop</li> </ul>	<ul style="list-style-type: none"> <li>• 1 phone at each site</li> <li>• Several rolls of stickers</li> <li>• 2 Pocket Talkers with adapters at each site</li> <li>• 1 Call Alert at each site</li> <li>• 2 Neck Loops at each site</li> </ul>
Medicine – CP4 (General Campus) and 4D (Birchmount Campus)	<ul style="list-style-type: none"> <li>• Uniphone 1000 TTY (for patient’s room)</li> <li>• Pocket Talker Pros/Stetoclip Headsets with adapters</li> <li>• Neck loop for Pocket Talker</li> <li>• Extension cord for Pocket Talker</li> <li>• Call Alert 100</li> <li>• In-Line Phone Amplifier</li> <li>• Alert Master 6000 (for labour and delivery)</li> </ul>	<ul style="list-style-type: none"> <li>• 1 phone at each site</li> <li>• 1 Pocket Talker with adapters at each site</li> <li>• 1 Neck Loop at General Campus</li> <li>• 1 Extension Cord at General Campus</li> <li>• 1 Call Alert at each site</li> <li>• 1 In-Line Phone Amplifier at each site</li> <li>• 1 Alert Master at each site</li> </ul>

- If units/departments require assistive devices, the Canadian Hearing Society ([www.chs.ca](http://www.chs.ca)) can be contacted at 416-964-9595 to place an order. Units/departments will be responsible for any charges/fees related to ordering any assistive devices.

## Section 12: Use of Service Animals, Safety and Support Persons

### 12.1 Service Animals

We are committed to welcoming people with disabilities who are accompanied by service animals to all areas of the hospital unless excluded by law or public health concern. Exclusions at TSH include: the Intensive Care Unit (ICU), Operating Room (OR), Coronary Care Unit (CCU), Acute Medical Unit (AMU), Acute Surgical Unit (ASU), Hospital laboratories, dialysis, burn units, kitchens, isolation rooms for infectious illness and colonization with an antibiotic resistant organism, labour and delivery, medication preparation areas, nurseries, sterilization areas (SPD) and clean or sterile supply storage areas.

When people with disabilities are accompanied by a service animal, the following must be noted:

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- The service animal must have current vaccinations and the owner of the animal may be asked to provide a certificate of vaccination.
- The service animal must be free of any parasites, fleas/ticks, diarrhea and exposed skin lesions.
- The service animal must have recently been bathed.
- Patients with service animals cannot be placed in a room with another patient who has an allergy to the service animal.
- Persons who object to a service animal being in close proximity will be provided with alternative arrangements so as not to negatively impact access to services requested.
- Service animals may be evicted or excluded from TSH from its owner **only** for the following reasons:
  - if the animal's behavior poses a direct threat to safety towards other patients or staff members
  - if contraindicated by the attending physician for sound medical and/or safety reasons
- If a patient must be removed from his/her service animal while in the Hospital, the health care provider must contact the owner's next of kin, support person or emergency contact to come to the Hospital and assume responsibility of the service animal. Appropriate arrangements must be made to address the patient's needs in the absence of the service animal.
- If a person with a disability is prevented from accessing their support animal, the hospital will, where appropriate and available, arrange an alternate service to allow that person to access hospital services.

### 12.1.1 Responsibilities

- **Owner:**
  - a. People accompanied by service animals are responsible for the care and supervision of their service animals.
  - b. TSH will not accept responsibility for service animals' care while the animal is on the premises. It is the owner's responsibility to make arrangements for their animals' care.
- **Area Charge Person:**
  - a. Charge persons are responsible to ensure they inform staff of the role of the service animal, and how to interact with the patient and animal.
  - b. Patients, visitors and other staff and volunteers working on the unit should be notified of the service animal's presence and address any concerns (e.g. allergies).
  - c. Instructions as to how the service animal should be fed, cared for and handled should be discussed with the owner and staff members.

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- **Staff (including physicians):**
  - a. Staff members are obligated to allow the service animal to accompany the patient at all times except where noted otherwise (see above).
  - b. Actions such as talking, toileting, interacting, feeding, touching or making eye contact with a service animal should be avoided at all times as animals are working and need to stay focused.
  - c. Staff members should remember to never separate the patient from the service animal. If uncomfortable providing care to the patient with an animal support, finding an alternative professional who will provide that care and document this in the patient's health record is advised.

## 12.2 Safety

If a staff member is reportedly bitten, scratched or injured by a service animal, a safety report must be completed in the Safety and Accountability for Everyone (SAFE) system detailing the name of the injured, circumstances and nature of the injury. The Occupational Health and Safety Department must be notified and if necessary, staff should be assessed in the Emergency Department.

If a patient is reportedly bitten, scratched or injured by a service animal, the primary care physician must be notified. Additionally, a SAFE report must be completed and Patient Relations notified.

If a visitor is reportedly bitten, scratched or injured by a service animal, they should be referred to the Hospital's Emergency Department for assessment and Patient Relations notified.

All bites should also be reported to the nearest Animal Services Centre or by calling 416-338-PAWS (7297).

## 12.3 Support Persons

People with disabilities who are accompanied by a support person have the right to have access to that support person while receiving care and services at TSH. The hospital may, however, limit a support person's access to their charge on the basis of medical or safety considerations. For example, if a designated support person has a communicable illness and it is likely that they will put others at risk due to their illness, they may be denied access to their charge or to areas of the hospital. Support persons may be denied accompanying the patient in areas such as surgical suites, procedure rooms, xrays, PACU and recovery rooms if this poses a risk to being present in these areas.

If a person with a disability is deprived of access to their support person for this reason, the hospital will assume responsibility for the basic care of the individual with a disability. If

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possible, situations requiring the separation of the individual and support person will be discussed with the individual in advance and appropriate measures taken. The hospital may also require the presence of a support person, if it is deemed by staff that a significant amount of risk is incurred by an individual with a disability who is attempting to access hospital services without assistance.

When people with disabilities are accompanied by a support person, the following must be noted:

- All health care providers are to ask the patient directly if he/she requests the support person to be present when personal health issues are being discussed and to document in the patient’s health record.
- A support person may be requested to leave the building premises or separated from the patient if his/her actual behavior poses a threat to the patient or healthcare provider or the attending physician has sound medical reasons. These circumstances must be documented in the patient’s health record.

**12.3.1 Responsibilities**

- **Charge Person:** Inform staff about the role of the support person and appropriate interaction with the patient and the support person.
- **Staff and Physicians:**
  - a. Should not remove a patient from his/her support person without the patient’s permission and consent unless there are medical reasons for the separation.
  - b. If a health care provider refuses to provide care to the patient with the support person present, alternative arrangements will be made for the patient to receive care and this will be documented in the patient’s health record.

**Section 13: Emergency Procedures, Plans or Public Safety Information**

TSH will make information about emergency procedures, plans or public safety information available to the public in an accessible format upon request.

**Section 14: Workplace Emergency Response**

TSH will provide individualized workplace emergency response information to employees who have self-identified a disability.

**Section 15: Employment**

TSH will meet the requirements as set in the schedule of the Integrated Accessibility Standard Regulation for all areas of employment.

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## Section 16: Multi-Year Accessibility Plan

TSH will establish, implement, maintain and document a multi-year accessibility plan outlining TSH's strategy under AODA and the supporting standards to meet its requirements in preventing and removing barriers for persons with disabilities.

## Section 17: Accessibility Training

TSH will provide training to all employees, physicians, volunteers and others who deal with the public or other third parties on TSH's behalf, and all those who are involved in the development and approval of customer service policies, practices and procedures.

Training will be provided based on individuals' needs and duties within the Hospital and as soon as is practical after they are assigned the applicable duties. Training may be in the form of a group session, a brochure, web-based training modules and/or as a component of the New Hire Orientation agenda. Training records will be kept for all participants.

Training will include:

- the purposes of the Accessibility for Ontarians with Disabilities Act (AODA) and the requirements of the Customer Service Standard;
- the requirements of the Accessibility Standards as outlined in the Integrated Accessibility Standards Regulation and the Ontario Human Rights Code;
- how to interact and communicate with people with various types of disabilities;
- how to interact with people with disabilities who use assistive devices, or who require the assistance of a service animal or support person;
- how to access equipment made available by the Hospital to help people with disabilities access care and services;
- what to do if a person with a disability is having difficulty accessing the Hospital's care and services;
- the process to receive feedback on the provision of goods and services provided to people with disabilities accessing service at TSH; and
- the Hospital's policies, practices and procedures relating to the customer service standards.

## Section 18: Feedback Process

Feedback and comments on the quality of care and services The Scarborough Hospital provides to people with disabilities are welcome and appreciated. All feedback will be reviewed and responded to. Feedback can be provided to the Hospital by:

- Speaking directly to a hospital employee
- Contacting a Patient Relations Facilitator:
  - o Birchmount Campus: 416-495-2400 ext. 5424

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o General Campus: 416-431-8200 ext. 6140

- Completing the online **Patient Feedback Form** on our website: Go to [www.tsh.to](http://www.tsh.to) and under the “Contact” section, click on the link to the “Patient Feedback Form.”
- Mailing comments to the Hospital, addressed to “Patient Relations”. This feedback process is promoted on the website and through other printed outreach methods.

## References

1. Accessibility for People with Disabilities, Policy Number 1.20.011 (2010). University Health Network, Toronto.
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3. Assistive Devices and Services Policy – AODA 09-001 (2009). Mental Health Centre, Penetanguishene
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