To be the best for our patients, people and community, we must be accessible, inclusive and equitable.

#### **Customer Service Standard**

Hospitals are required to provide accessible customer service, which includes:

- Training staff and volunteers on service standards for people of all abilities;
- Keeping a written record of the training;
- Welcoming service animals and support persons;
- Creating accessible ways for people to provide feedback;
- Informing the public when accessible goods and services are temporarily unavailable; and
- Developing, implementing and maintaining policies on the provision of goods, services and facilities to persons with disabilities.

### Response

New employees must complete the online training prior to their first day at work. Volunteers participate in some accessibility and equity training. Additionally, targeted training is available upon request from within and outside of the Hospital.

As the Hospital becomes more aware of the needs of its patient and staff population, it provides a great opportunity to consider and design new training modules to meet those needs.

Customer Service	Description	Strategies	Timeline	Responsibility
AODA Training	Provide Customer Service training to staff, students and volunteers.	Training to be provided through a learning management system or PowerPoint	Before their first day at work, learning or volunteering	KK, SG, AC
	Provide overall AODA training to the Board of Governors (BoG).	To collaborate with the BoG in identifying when and how to deliver this training.	2023	VN
	Provide updates for Volunteer training package.	To review and update volunteer training materials.	2024	KK, AC
Professional Development Training	Provide accessibility related training to Leadership Team.	Acquire training material and deliver to leadership.	2023/2024	VN

Ongoing Sessions	Targeted sessions/stories.	Provide avenues to promote sessions including relatable stories.	During All Staff Meetings	VN
			Widely available on website/intranet	RY, CN
		Promote new RL6 reporting for		
		accessibility and equity concerns	Staff Meetings, Monday Report, Huddles	VN, RY, SG
Recognition & Awareness	Promote awareness of recognized dates	Promote dates in Monday Report, on intranet/social media	Ongoing	RY
		Offer experiences to celebrate National AccessAbility Week, Kawartha Lakes Pride Week and Invisible Disabilities Week	May, July, October	KK/KC, TJ/KK, CN/EB

#### **Information and Communication**

- Organizations must provide accessible formats and communication supports in relation to their communications with the public.
- This includes a number of requirements that hospitals must phase into regular business processes by 2021 (including accessible websites, feedback processes, emergency procedures/plans and public safety information).

### Response

The Hospital's website was upgraded to meet the Web Content Accessibility Guideline (WCAG) 2.1 Level AA. Because of this transition, for example, people who are blind can now use their speech technical devices to access information on the Hospital's website. In other words, they can now have access to the same information as someone who is sighted. After website platform upgrades, the Hospital will re-audit to ensure ongoing compliance.

Also, many documents are printed every year either by the Print Shop or at the unit level. At times, creativity and design preferences can un-intentionally turn a document into one that is not considered accessible or inclusive. Font styles and/or size, graphic designs, poor colour contrast and biased language are a few examples that can lead to this end.

Historically, the Hospital will seize opportunities to be inclusive for all staff or volunteers to participate in the recording of videos or testimonials in promotional articles. Their involvement in this capacity will further demonstrate that the Hospital is an inclusive employer

of choice inviting people with disabilities to consider it as an ideal place to work and to volunteer.

Information and Communication	Description	Strategies	Timeline	Responsibility
Audit updated website to meet WCAG 2.0 Level AA	After the website was updated, some links require repair; pictures require descriptions and ownership of these processes need to be reassigned.	Audit the external website, internal intranet and relevant social media.	Complete by 2023	RY, CN, KC
Standardize Public PDF Documents	Standardize requirements of various PDF documents intended for the public website.  Ensure all PDF documents posted meet accessibility guidelines.	Create a process for various PDF documents on the public website to meet clear print and accessibility guidelines.  Provide guidelines and training for staff to follow when using templates.	Complete templates by end of 2024  Update by end of 2023	KC, RY, CN
Visibility of persons with disabilities & inclusion	Increase the participation of persons with disabilities and be inclusive when creating promotional opportunities.	Being inclusive, invite staff / volunteers with disabilities to sign up as 'participants' in the event or program as promotional material is being developed.	2023 and updated annually.	SG, RY
Plain Language, Inclusive Language	Provide guidance to staff regarding drafting documents to be posted on the external website to use plain and inclusive language where possible.	Update the guide for use of all staff.  Offer editing service for documents with high readership.	2024 Ongoing	RY, KC

public use should a accommodate the CNIB see	With external partners, provide an accessibility and inclusive related session(s) for management including Graphic Design and Printing teams.	Annually starting 2023	VN, External Partner(s)
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#### **Employment Standards**

- Hospitals, as employers, are required to make their employment practices and workplaces accessible to potential and existing employees with disabilities.
- This includes:
  - o Recruitment, selection and assessment processes;
  - o Performance management and career development processes; and
  - Accommodation plans for employees with disabilities.
     Note: these obligations do not apply in respect of volunteers and other non-paid individuals.

### Response

The Hospital's workforce consists of approximately 900 dedicated and hardworking employees. The Hospital endeavours to be a workplace of choice for all individuals by ensuring an accessible and inclusive work environment. Input from our employees, patients and visitors provides the Equity & Accessibility Steering Committee with great insight into how to continue to attract all individuals who wish for a career in the Hospital by creating a work environment that works for all individuals.

Employment	Description	Strategies	Timeline	Responsibility
Community Partners	Leveraging the regional Equity, Diversity and Inclusive (EDI) Steering Committee implement regional supports in job searches.	Participate in the regional EDI Steering Committee and bring relevant initiatives forward.  Leverage KL-OHT partners to collaborate on supporting people with disabilities.	Ongoing 2024	KK VN

Recruitment	Increase knowledge of leaders regarding the hiring of persons with disabilities.	Creation of inclusive environment through weaving accessibility related issues throughout regular conversations and ensuring our leadership and unions are aware of available accessibility and inclusion supports for new recruits and current employees.	Begin discussions 2023	Human Resources Union Reps
Job Accommodation	Encourage staff with disabilities to request accommodation when needed	Be deliberate in communication during employee rounding, performance interviews and other opportunities.	Ongoing	Human Resources
Emergency Plan	Review of emergency response information currently provided to new hires and current employees.	organization.	2023	Human Resources
		Emergency Accessibility Response Plans will be reviewed annually and when changes occur with the individual or the area they work in.	2024	Emergency Codes Steering Committee

### **Transportation Standards**

- Hospitals are classified as organizations not primarily in the business of transportation.
- If they provide transportation services, they are required to either use accessible vehicles on main transit routes, or provide an equivalent service on request (this service must offer similar fares, schedules and routes).

#### Response

The Hospital does not provide transportation services. However, non-emergent patient transportation (NEPT) is utilized regularly.

Transportation	Description	Strategies	Timeline	Responsibility
Partnership / Contract Review	Review accessibility provisions in the NEPT agreements	Invite service providers to demonstrate their compliance with current standards and best practices.	2023/2024	SG, VN

### **Design of Public Spaces Standards (Built Environment)**

- A number of technical requirements apply for new and redeveloped outdoor recreational, eating, travel, service counter, waiting area, and parking spaces. See the Regulation for specific requirements.
- Multi-year accessibility plans must include procedures for preventative and emergency maintenance of above spaces and procedures for dealing with temporary disruptions of the above spaces.

The Hospital has a process in place to review project requests that identify physical / architectural barriers for persons with disabilities.

Built Environment	Description	Strategies	Timeline	Responsibility
Master Plan	Review accessibility features / design of upcoming infrastructure upgrades	Involve Accessibility group in the design phase and take into consideration best practices and AODA standards/guidelines	Ad hoc as needs arise	VN, MZ
Renovations with Accessibility Related Designs	Ensure that accessibility is a key consideration in the planning/design of renovations of existing facilities.	Bring Accessibility experts into the design process for feedback and input on new build/reno designs. Ensure new builds/renos are compliant with current standards and best practices.	Immediately/Ongoing	MZ, VN
		Review conducted regularly and prioritized by Equity & Accessibility Committee.	Ongoing and seasonal	MZ
Accessible Washrooms	Identification and strategic plan to increase the number of accessible washrooms	Develop a plan to increase the number of accessible and gender-neutral washrooms.	Annually	MZ

Parking / Sidewalk / Gates	Accessibility features of sidewalks (or lack thereof), gates through walkways and surface parking.	Annual ongoing repairs and restoration.	Annually	MZ
Wayfinding	Signage – easy to read/interpret, taking accessibility and inclusion into consideration.	Update signage, other forms of notification at time of renovations and ensure any new signage follows established guidelines.	Immediately/Ongoing	RY, MZ

### Health Equity (Aligned with Ontario's Equity, Inclusion, Diversity, Anti-Racism Framework)

- Review and understand the provincial EIDA-R Framework, Guidance Document and Reporting Templates released April 2023 included in the Hospital's Service Accountability Agreements.
- This year's regional priorities include implementation plans for equity recommendations, reducing disparities in health equity and sustainability through AccessMHA and digital services.

The Committee has completed and provided feedback on initial education provided through the local Chamber of Commerce, concluding that value from learning should be strengthened through ongoing initiatives.

<b>EIDA-R Framework</b>	Description	Strategies	Timeline	Responsibility
EIDA-R Education	Review provincial education and plan for rollout with management team	Involve Committee to select education from the provincial plan and rollout to management.  Enhance and align the E & A Plan to the regional priorities.	Q4 annually and at staff orientation	VN, KK
AccessMHA	Raise awareness of service	Promote initiative on website, with partners and throughout organization.	Q3	RY, KC

## Ross Memorial Hospital Equity & Accessibility Steering Committee Membership

Name	Initials	Job Title/Representation
Nelson, Veronica (Chair)	VN	Vice President & Chief Operating Officer
Kydd, Kim	KK	Human Resources Consultant
Carvalho, Laurie (Recorder)	LC	Executive Assistant
Zahra, Mark	MZ	Director, Facilities, Maintenance & Support Services
Jones, Thomas	TJ	Director, Mental Health Services
Grant, Susan	SG	Director, Quality, Risk & Professional Practice
Bruce, Erin	EB	Manager, Senior Services
Young, Ryan	RY	Communications and Public Affairs Officer
Coulter, Kim	KC	RMH Foundation Communications Officer
Olaivar, Nicole	NO	Nutrition Services
Nugent, Heather	HN	CUPE Representative
Swamy, Mohan Babu Narayana	MS	OPSEU Representative
McPeake, Mary	MM	ONA Representative
Vemb, Natasha	NV	Patient Experience Partner
Lafee, Kyle	KL	Patient Experience Partner
Robinson, Trish	TR	Patient Experience Partner
Nelson, Cassandra	CN	IT Representative
Vacant		RMH Auxiliary Representative