

Multi-Year Accessibility Work Plan 2019-2022

Category/Standard	Opportunity	Action and Accountability	Patient idea	On-Going	Pending	Not Yet Started	Timeline (green= complete)	Status or photo of improvement
2019 Actions Identified For Improvement By Patient/Family And Staff Feedback, Legislation/Policy Change, and Building Requirements								
1. Accessibility Multi-Year Plan	Review of legislation and regulation. Update multi-year plan.	Post on external website.					2019	Complete
2. Feedback	Consider developing report from questions from patient satisfaction survey as it relates to accessibility						2019	Complete
	Quarterly review of the trends from the RL6 Feedback on concerns, compliments and general feedback						2019	Complete
3. Built Environment	Built Environments Compliance	Follow Ontario Building Code for incorporating accessibility when building or renovating areas throughout the hospital.		✓			March 2020	Ongoing compliance including Heart Rhythm Project.
	Parking Spaces	Requirements for parking spaces are met, but complaints from visitors continue					2019	Security completed an audit in July 2019 for comparison to audit completed in April 2017.
	Invite the City of Kitchener/Waterloo Accessibility and/or other External Kitchener Agency(s)				✓		March 2020	Discussion with Independent Living Centre – Representative will join the Committee
	Wayfinding	Carried over from 2018. Improve accessibility through wayfinding/ signage program – mall maps			✓		2019	Sent to digital design company, but they were not purchased last year. Future considerations will include Heart Rhythm and

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								improving accessible visual signage.
4. Customer Service	Audit of accessible devices completed last year.	Prioritization and costing of list is needed. Process is to purchase items is through departmental budget. Accessibility Committee can submit capital items through capital process this fiscal year.			✓		2019	Sherri Ferguson sent email to request consideration for additional bariatric equipment.
5. Information and Communication	Website Compliance Update	All websites and web content to be accessible by January 1, 2021.					2019	SLT approved moving forward to refresh website. Communications developing plan to revise content.
	Recommend education opportunities for organization i.e. customer service standards	Carried over from 2018				✓	2019	Opportunity to be included with diversity training. Organizational Development – Diversity Training is not on this year’s plan.
	Increase awareness & showcase	Team brainstorming and actions needed <ul style="list-style-type: none"> Possible brochure/webpage 				✓	2019	Carryover to 2020
	2019 Accessibility Compliance Report https://www.ontario.ca/page/completing-your-accessibility-compliance-report	Report to be submitted to the Quality Committee of the Board. Report to be submitted to the Ministry					2019	Submitted to the Ministry in December.
2020 Actions Identified for Improvement By Patient/Staff Feedback, Legislation/Policy Change, And Building Requirements								
1. Accessibility Multi-Year Plan	Review of legislation and regulation. Update multi-year plan.	Post on external website.					2020	

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2. Feedback	Expand report from questions from patient satisfaction survey as it relates to accessibility.	Addition of open-ended custom questions to surveys.		✓			2020	Due to cost we are unable to capture this through NRC. Captured through patient advocacy.
	Quarterly review of the trends from the RL6 Feedback on concerns, compliments and general feedback			✓			2020	
3. Built Environment	Built Environments Compliance	Follow Ontario Building Code for incorporating accessibility when building or renovating areas throughout the hospital.		✓			2020	Heart Rhythm and Pharmacy
	Wayfinding - Improve accessibility through signage program – mall maps	Sent to digital design company in 2019, but not purchased. Future considerations will include Heart Rhythm and improving accessible visual signage.			✓		2020	Carryover
4. Customer Service	Audit of accessible devices completed last year.	Process is to purchase items is through departmental budget. Accessibility Committee can submit capital items through capital process this fiscal year.					2020	Consideration was requested for additional bariatric equipment for 2020/21.
	Accessibility Audit - GEMBA	Conduct audit through key areas to identify gaps in inclusivity			✓		2020	Postponed due to Pandemic – carryover to 2022
5. Information and Communication	Website Compliance Update	All websites and web content to be accessible by January 1, 2021.		✓			2020	Carryover - approved and in progress to meet 2021 deadline.
	Recommend education opportunities for organization i.e. customer service standards	Carried over. Opportunity to be included with diversity training. Organizational Development – Diversity Training is not on this year's plan.		✓			2020	AODA components will be included in new diversity & inclusion program in conjunction with SJHS & the Canadian Centre of Diversity and Inclusion.
	Increase awareness & showcase	Team brainstorming and actions needed				✓	2020	Carryover

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		<ul style="list-style-type: none"> Possible brochure/webpage 						
2021 Actions Identified For Improvement By Patient/Staff Feedback, Legislation/Policy Change, And Building Requirements								
1. Accessibility Multi-Year Plan	Review of legislation and regulation. Update multi-year plan for SLT approval	Post on external website. Recommendation from Health Care Standards to have SLT approval.			✓		2021	
	Review and incorporate some initial recommendations from the Health Care Standards Development Committee	22 recommendations have been suggested.				✓	2021	
2. Feedback	Quarterly review of the trends from the RL6 Feedback on concerns, compliments and general feedback.			✓			2021	
3. Built Environment	Built Environments Compliance	Follow Ontario Building Code for incorporating accessibility when building or renovating areas throughout the hospital.		✓			2021	New building projects, heart rhythm and pharmacy met City of Kitchener compliance. 3 rd Cath Lab compliance.
	Ensure procedures for any temporary disruptions are in place for preventive and emergency maintenance.	Required under maintenance of accessible elements to be included on the plan as part of compliance submission			✓		2021	
	Accessible triage doors in Emerg	Nurse regulated switch at the desk would eliminate the struggling and protect privacy.	✓	✓			2021	Approved.
4. Customer Service	Annual equipment planning process, an allocation is made for the purchase/repair/replacement of specialized equipment used to meet accessibility-related patient needs.	Audit of accessible devices is needed prior to 2022 equipment planning.			✓		2021	Two bariatric beds, four Sara Stedys, two Broda chairs and six bariatric recliners were purchased in 2021
	Ensure continued access for persons with disabilities to their personal	Recommendation from Health Care Standards			✓			

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	caregivers and support persons while in the hospital during a state of emergency.							
	Increase awareness and improve process for KW4 Interpretation Services	Education at staff orientation is being initiated to ensure awareness.		✓				Changes initiated in Cerner to access interpretation services. Phones upgraded to 3-way handsets
5. Information and Communication	2021 Accessibility Compliance Report https://www.ontario.ca/page/completing-your-accessibility-compliance-report	Report to be submitted to the Ministry			✓		December 2021	
	Website Compliance Update	All websites and web content to be accessible by January 1, 2021.		✓			January 2021	Website Compliance Update
	Recommend education opportunities for organization i.e. customer service standards	AODA components will be included in new diversity & inclusion program in conjunction with SJHS & the Canadian Centre of Diversity and Inclusion.			✓			
2022 Actions Identified For Improvement By Patient/Staff Feedback, Legislation/Policy Change, and Building Requirements								
1. Accessibility Multi-Year Plan	Review of legislation and regulation. Update multi-year plan for SLT approval	Post on external website.				✓	2022	
	Ensure additions of recommendations from the Health Care Standards Development Committee					✓	2022	

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2. Feedback	Review questions for "new" patient satisfaction survey as it relates to accessibility. New vendor April 2022					✓	2022	
	Quarterly review of the trends from the RL6 Feedback on concerns, compliments and general feedback					✓	2022	
3. Built Environment	Built Environments Compliance	Follow Ontario Building Code for incorporating accessibility when building or renovating areas throughout the hospital.				✓	2022	
	Wayfinding - Improve accessibility through signage program – mall maps. Sent to digital design company in 2019, but not purchased.	Future considerations will include Heart Rhythm and improving accessible visual signage.				✓	2022	
4. Customer Service	Annual equipment planning process, an allocation is made for the purchase/repair/replacement of specialized equipment used to meet accessibility-related patient needs.					✓	2022	
	Accessibility Audit - GEMBA	Conduct audit through key areas to identify gaps in inclusivity			✓		2022	Postponed due to Pandemic carryover to 2022
	Accessibility team completes GEMBA walk to inform our planning and identify system issues related to accessibility	Relevant Topics: <ul style="list-style-type: none"> Code Green Evacuation, Lift Training, AODA – Customer Service Code of Conduct Accessible devices use 				✓		Move to 2023?
5. Information and Communication	Increase awareness & showcase	Team brainstorming and actions needed <ul style="list-style-type: none"> Possible brochure/webpage 				✓	2022	