



Red Lake Margaret Cochenour  
MEMORIAL HOSPITAL

# MULTI-YEAR ACCESSIBILITY PLAN

Red Lake Margaret Cochenour Memorial Hospital  
Accessibility Advisory Committee  
2019 – Progress Report



**ACCESSIBILITY ADVISORY COMMITTEE**

The Accessibility Advisory Committee has the following responsibilities:

1. Preparation of the multi-year accessibility plan
2. Advise the RLMCMH on accessibility issues with respect to the review of existing and new/proposed by-laws, policies, programs, practices and facilities projects.
3. Monitor the progress of annual accessibility plans
4. Advocate, educate and promote accessibility issues and goals with the staff and the community.

The Accessibility Advisory Committee conducted a review of the Red Lake hospital building and structures in December 2012 and again in May 2019. The group completed the Accessibility Plan using universal design standards and the Ontario Health Care Network of Accessibility Professional Accessibility Assessment tool. This plan was developed in consultation with persons with disabilities.

<b>Committee Member</b>	<b>Department</b>
Amanda Kaczmarek	Director of Patient Safety and Quality Improvement
Sue LeBeau	Chief Executive Officer
Rebecca Ross	Chief Nursing Executive
Meghan Gilbert	Registered Nurse (Nurse Manager)
Ken Burgess	Facilities Supervisor
Tracy Melquist	Physiotherapist
Tamer Aytimer	Patient Advisor (need permission to include)
Mitch Rogowsky	Patient Family Advisor

RLMCMH MULTI-YEAR ACCESSIBILITY PLAN: 2013 – 2022

Built Environment													
BARRIER TYPE	DESCRIPTION OF BARRIER	STRATEGY to ADDRESS	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	
Public Washrooms	Emergency waiting area <ul style="list-style-type: none"> <li>Washroom is small and inaccessible</li> </ul>	<ul style="list-style-type: none"> <li>Designed with a 36" entrance width</li> <li>Designed to permit a wheelchair to turn in an open space that has a diameter of not less than 96"</li> <li>Toilet top of the seat between 15 ¾ and 18 inches from the floor</li> <li>Grab bars, drop-down or two grab bars set at 90 degree angles to each other</li> <li>Collapsible coat hook not more than 47" from the floor on a side wall</li> <li>Mirror and washroom accessories conforming with accessible standards</li> <li>Soap and towel dispensers with reach of a seated person</li> <li>Lavatory with the top located not more than 34" from the floor</li> <li>Lavatory with a clearance of 30" wide by 29" high</li> <li>Capable of being locked from the inside with one hand and being released from the outside</li> <li>Soap dispenser located so that dispensing height is not more than 47" above the floor</li> </ul>		Completed									
	Ultrasound room <ul style="list-style-type: none"> <li>Grab rail is positioned on a 45 degree angle</li> </ul>	<ul style="list-style-type: none"> <li>Drop-down grab bars or two grab bars set at 90 degree angles to each other</li> </ul>			Completed								
	Laboratory department <ul style="list-style-type: none"> <li>15" toilet</li> <li>One grab rail on 45 degree angle</li> </ul>	<ul style="list-style-type: none"> <li>Install 17" toilet</li> <li>Drop-down grab bars or two grab bars set at 90 degree angles to each other</li> </ul>							Completed				

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Built Environment												
BARRIER TYPE	DESCRIPTION OF BARRIER	STRATEGY to ADDRESS	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	X-ray department <ul style="list-style-type: none"> <li>One grab rail on 45 degree angle</li> </ul>	<ul style="list-style-type: none"> <li>Drop-down grab bars or two grab bars set at 90 degree angles to each other</li> </ul>			Completed							
Public Washrooms	Emergency department washroom <ul style="list-style-type: none"> <li>24.5" clearance at front edge of lavatory</li> <li>Soap dispenser is located 55" above the floor</li> </ul>	<ul style="list-style-type: none"> <li>29" clearance at front edge of lavatory</li> <li>Reposition soap dispenser so that dispensing height is not more than 47" above the floor</li> </ul>	Completed									
	Lower level washroom located across from Board room entrance <ul style="list-style-type: none"> <li>Open space diameter is 48 "</li> <li>Toilet is 15 ½ " in height</li> <li>There are no grab rails</li> </ul>	<ul style="list-style-type: none"> <li>Open space diameter of not less than 96"</li> <li>Designed with a 36" entrance width</li> <li>Designed to permit a wheelchair to turn in an open space that has a diameter of not less than 96"</li> <li>Toilet top of the seat between 15 ¾ and 18 inches from the floor</li> <li>Grab bars, drop-down or two grab bars set at 90 degree angles to each other</li> <li>Collapsible coat hook not more than 47" from the floor on a side wall</li> <li>Mirror and washroom accessories conforming with accessible standards</li> <li>Soap and towel dispensers with reach of a seated person</li> <li>Lavatory with the top located not more than 34" from the floor</li> <li>Lavatory with a clearance of 30" wide by 29" high</li> <li>Capable of being locked from the inside with one hand and being released from the outside</li> </ul>					Completed					

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BARRIER TYPE	DESCRIPTION OF BARRIER	STRATEGY to ADDRESS	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Wheelchair Seating Space	No allocated wheelchair seating spaces in the common waiting areas: <ul style="list-style-type: none"> <li>Emergency department waiting area</li> <li>Family room</li> <li>Diagnostic/rehab waiting area</li> </ul>	<ul style="list-style-type: none"> <li>Incorporate a clear floor space not less than 30" by 54" in common waiting areas</li> <li>Signage to identify wheelchair seating space</li> </ul>	Completed									
Customer service areas	Front entrance <ul style="list-style-type: none"> <li>Information and reception service counter is not accessible to the full range of visitors.</li> </ul>	<ul style="list-style-type: none"> <li>Redevelop front entrance to include at least one section usable by persons in wheelchairs:</li> <li>Between 28" and 35" above the finished floor, and at least 36" wide</li> <li>Knee space below of at least 27" by 19" deep.</li> </ul>						Completed				
	Front entrance <ul style="list-style-type: none"> <li>Distance between external/internal doors is too narrow</li> </ul>	Renovate to increase distance between internal and external sliding doors								√		
	Vending machine area <ul style="list-style-type: none"> <li>Doorway is 29"</li> </ul>	<ul style="list-style-type: none"> <li>Redesign vending machine area to include an entrance way that is at minimum 36" wide</li> </ul>		Completed								
Door Handles	Door handles are not usable by persons with upper extremity weakness or limited mobility. <ul style="list-style-type: none"> <li>Family Room</li> </ul>	<ul style="list-style-type: none"> <li>Replace knob-style door handles with lever-style door handles:                             <ul style="list-style-type: none"> <li>❖ Boardroom</li> <li>❖ Cafeteria service area</li> <li>❖ Laboratory washroom</li> </ul> </li> </ul>							√			

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<ul style="list-style-type: none"> <li>• Boardroom</li> <li>• Cafeteria service area</li> <li>• Laboratory washroom</li> <li>• Physiotherapy department</li> <li>• X-ray washroom</li> </ul>	<ul style="list-style-type: none"> <li>❖ Physiotherapy department</li> <li>❖ X-ray washroom</li> </ul>										
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**Accessibility for Ontarians with Disabilities Act (AODA)  
Integrated Accessibility Standards Regulations (IASR)**

Year	EMPLOYMENT STANDARDS	ACTION REQUIRED	Progress: January 2014	Progress: 2019
2019	<b>Accessible websites and web content</b> <ul style="list-style-type: none"> <li>• New internet websites and web content will conform with WCAG 2.0 Level A</li> <li>• Applies to web content published on a website after January 1, 2012</li> </ul>	<b>ACTION:</b> <b>1.</b> Ensure all new web content conforms to WCAG 2.0 Level A.	We are 100% compliant with Level A.	COMPLETED
	<b>Accessibility Plans</b> <ul style="list-style-type: none"> <li>• A multi-year accessibility plan outlining strategy to identify, remove and prevent barriers and meet requirements of IASR is posted on website and provided in an accessible format upon request</li> <li>• Plan is reviewed and updated at least once every 5 years</li> <li>• The plan is developed in consultation with persons with disabilities</li> <li>• Annual progress report is prepared</li> <li>• The report is posted on website and provided in an accessible format upon request</li> </ul>	<b>ACTION:</b> <b>1.</b> Review of built environment in consultation with persons with disabilities <b>2.</b> Plan developed using principles of universal design <b>3.</b> Plan posted on the website.	→Review of built environment, December 2012  →Accessibility Plan 2013 – 2010 <ul style="list-style-type: none"> <li>❑ Posted on the website</li> <li>❑ Revised: April 2014</li> </ul>	<ul style="list-style-type: none"> <li>❑ Completed with assistance with persons with a disability</li> </ul>

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	<ul style="list-style-type: none"> <li>Ensure all <b>internet websites</b> and web content conform with WCAG 2.0 Level AA</li> </ul>		<p>Approximately 90% compliant with Level AA.</p>	
	<p><b>Parking</b></p> <ul style="list-style-type: none"> <li>Add an additional accessible parking space to the upper parking lot</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Decide on space</li> <li>Order and post signage</li> <li>Replace old signage with new signage in current accessible places</li> </ol>		
	<p><b>Main Entrance</b></p> <ul style="list-style-type: none"> <li>Ensure clear accessible signage</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Post accessible sign on automatic door</li> </ol>		
	<p><b>Reception – Waiting area</b></p> <ul style="list-style-type: none"> <li>Ensure accessible signage in place</li> <li>Ensure area items are accessible</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Place wheelchair signage over accessible seating area</li> <li>Lower infection control supplies to allow everyone access</li> <li>Lower ED survey box to allow access</li> </ol>		
	<p><b>Dining Area</b></p> <ul style="list-style-type: none"> <li>Designated wheelchair spaces</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Create and label a designated space in dining areas</li> </ol>		

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	<p><b>Public Washrooms</b></p> <ul style="list-style-type: none"> <li>• signage</li> </ul>	<p><b>ACTION</b></p> <ol style="list-style-type: none"> <li>1. ensure all public washrooms have accessibility symbol in place</li> </ol>		
<p><b>2020</b></p>	<p><b>Workplace emergency response information:</b></p> <ul style="list-style-type: none"> <li>• RLMCMH is committed to providing the customers and clients with publicly available emergency information in an accessible way upon request</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Include availability of emergency information in an accessible format in the Accessibility Policy.</li> </ol>	<p>Fire alarms are visual and auditory</p>	<p>All plans available in accessible format upon request.</p> <ul style="list-style-type: none"> <li>□ Ensure tag line in each policy to this effect.</li> </ul>
	<ul style="list-style-type: none"> <li>• RLMCMH will provide employee with disabilities with individualized emergency response information when necessary.</li> <li>• Provide information to person designated to provide assistance upon consent</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Develop Policy, “Emergency Response Planning for Employees with Disabilities”</li> <li>2. Integrate self-identification process for new employees into Employee Health nurse screening at orientation.</li> <li>3. Memo to all staff offering opportunity for self-identification of disability and need for individualized emergency response plan.</li> <li>4. Review individualized emergency response plans with OH&amp;S committee.</li> </ol>	<p>→New Policy: Emergency Response Planning for Employees with Disabilities</p> <ul style="list-style-type: none"> <li>• Approved January 2013</li> <li>• Change Policy Category/Number from ADM-AODA-IASR-01 to ADM-HR-III-03</li> </ul>	<ul style="list-style-type: none"> <li>□ Update and ensure part of modified work plan</li> </ul>



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	<p><b>Establish accessibility policies</b></p> <ul style="list-style-type: none"> <li>• Policies that govern how to achieve accessibility through meeting the IASR requirements</li> <li>• Statement of organizational commitment to meet the accessibility needs of persons with disabilities</li> <li>• Written policy documents are made publicly available and in accessible format upon request</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Develop, implement and maintain Accessibility Policy</li> <li>2. Policy posted on hospital website</li> </ol>	<p>Policy: Accessibility Policy and Planning ADM-AODA-IASR-02</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Approved Jan 2013</li> <li><input type="checkbox"/> Revised April 2014</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Review and update all policies to ensure current and meet best practice standards</li> </ul>
	<p><b>In-Patient's Room</b></p> <ul style="list-style-type: none"> <li>• Use indicators to identify when the patient is either blind or with hearing loss to accommodate the care process</li> </ul>			<ul style="list-style-type: none"> <li><input type="checkbox"/></li> </ul>
	<p><b>Emergency Preparedness</b></p> <ul style="list-style-type: none"> <li>• Paint building exit doors in a different colour to allow for easier identification</li> </ul>			

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Year	GENERAL STANDARDS	ACTION REQUIRED	Progress: January 2014	2019
2020	<p><b>Procuring or acquiring good, services or facilities:</b></p> <ul style="list-style-type: none"> <li>Incorporate accessibility criteria and features into procurement process except where it is not practicable to do so, and,</li> <li>If it is not practicable to do so, provide, upon request, an explanation</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Add a statement of accessibility criteria to the "Procurement of Services and Supplies and Supply Chain Code of Ethics" Policy ADM-FIN-II-12.</li> </ol>	<p>→Policy: Procurement of Services &amp; Supplies and Supply Chain Code of Ethics, ADM-FIN-II-12</p> <ul style="list-style-type: none"> <li>Approved April 2011</li> <li>Revised January 2013 to include accessibility criteria</li> </ul>	<p>☐ Ensure policy is updated with current standards and best practices</p>
	<p><b>Recruitment, general</b></p> <ul style="list-style-type: none"> <li>All employees and the public about the availability of accommodation for applicants with disabilities in recruitment processes.</li> </ul> <p><b>Recruitment, assessment or selection,</b></p> <ul style="list-style-type: none"> <li>Notify selected job applicants that accommodations are available upon request in relation to the materials or processes to be used for selection.</li> <li>Consult with selected applicant and provide/arrange for suitable accommodation in a manner that takes into account the applicant's accessibility needs.</li> </ul> <p><b>Notice to successful applicants</b></p> <ul style="list-style-type: none"> <li>When making offers of employment, notify the successful applicant of policies for accommodating employees with disabilities.</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Add statement of availability of accommodation for applicants to "Hiring and recruitment:</li> <li>Include statement of availability of accommodation in all internal/external job postings, interview package material and offers of employment.</li> </ol>	<p>→New Policy on Hiring and recruitment✓</p> <p>→Policy "Employment Principles", ADM-HR-I-14</p> <ul style="list-style-type: none"> <li>Original August 2003</li> <li>Revised January 2014 to include accessibility employment standards</li> </ul> <p>→Standard templates for "Letters of Offer", include accessibility criteria</p> <p>→Template for internal and external job postings/ads include accessibility statement</p>	<p>☐ Review all practices and policies to ensure these standards are still being met and the progress is in line with best practices</p>
	<p><b>Processes to accommodate employees</b></p> <ul style="list-style-type: none"> <li>Provide accessible formats and communication supports for information that is needed in order to perform the employee's job</li> <li>Information that is generally available to employees in the workplace.</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>Develop a policy and procedure for the provision of accessible formats and communication supports for employees.</li> </ol>	<p>→Policy: Communication Supports for Employees with Disabilities, ADM-HI-III-02</p> <p>☐ Approved January 2014</p>	<p>☐ Review and update policy to ensure meeting best practices and current standards</p>

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Year	EMPLOYMENT STANDARDS	ACTION REQUIRED	Progress: January 2014	2019
2020	<p><b>Documented individual accommodation plans</b></p> <ul style="list-style-type: none"> <li>• A written process for the development of documented individual accommodation plans</li> <li>• Plans shall include (if requested) information regarding accessible formats and communications supports; if required, individualized workplace emergency response information, and any other accommodation that is to be provided.</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Develop an HR policy/procedure for development and implementation of individual accommodation plans, including, but not limited to, accessible formats and communication supports.</li> </ol>	<p>→Policy: Accommodation Plans for Individual Employees ADM-HR-III-01</p> <ul style="list-style-type: none"> <li>• Approved January 2014</li> </ul> <p>→Form:</p> <ul style="list-style-type: none"> <li>• Functional Capacity Assessment Form</li> <li>• Individual Accommodation Plan</li> </ul>	<ul style="list-style-type: none"> <li>☐ Review and update policy to ensure meeting best practices and current standards</li> </ul>
	<p><b>Return to work process</b></p> <ul style="list-style-type: none"> <li>☐ Develop a documented process for its employees who have been absent from work due to a disability and require disability-related accommodations in order to return to work; use individual accommodation plans</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Add requirement for documented process and disability-related accommodations to RLMCMH Policy, "Early &amp; Safe Return to Work", OHS-OH-II-01</li> </ol>	<p>→Policy: Early and Safe Return to Work: OHS-ADM-II-01</p> <ul style="list-style-type: none"> <li>• Approved July 2008</li> <li>• Revised January 2014</li> </ul>	<ul style="list-style-type: none"> <li>☐ Review and update policy to ensure meeting best practices and current standards</li> </ul>
	<p><b>Performance management</b></p> <ul style="list-style-type: none"> <li>☐ Take into account the accessibility needs of employees, as well as individual accommodation plans</li> </ul>	<p><b>ACTION:</b></p> <ol style="list-style-type: none"> <li>1. Human Resource policy statement that includes a commitment to take into account the accessibility needs of employees for the purposes of performance management, career development, advancement and redeployment.</li> </ol>	<p>→ Policy: ADM-HR-II-06: Employee Performance Review</p> <ul style="list-style-type: none"> <li>☐ approved January 2014</li> <li>☐ Circulated to staff</li> <li>☐ Posted on the intranet</li> </ul>	<ul style="list-style-type: none"> <li>☐ Review and update policy to ensure meeting best practices and current standards</li> <li>☐ Ensure new appraisals include accessibility statements</li> </ul>
	<p><b>Career development and advancement</b></p> <ul style="list-style-type: none"> <li>☐ Take into account the accessibility needs of its employees when providing career development and advancement (both additional responsibilities and employee movement)</li> </ul>			
<p><b>Redeployment</b></p> <ul style="list-style-type: none"> <li>☐ Take into account the accessibility needs of its employees with disabilities</li> </ul>				

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	GENERAL	ACTION REQUIRED	Progress: January 2014	2019
2021	<b>Training on IASR accessibility standards and Human Rights Code</b> <ul style="list-style-type: none"> <li>All employees, volunteers, persons participating in development of organizational policy and other persons who provide goods, services or facilities on behalf of the organization receive training</li> <li>Training is appropriate to the duties of the participants and delivered as soon as practicable</li> <li>A record of the training provided, including the dates and number of individuals is kept</li> </ul>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Training for the Board of Directors, and Senior Leadership Team.</li> <li>General training information included in new staff orientation package.</li> <li>General training for all staff delivered during Annual Mandatory education session.</li> </ol>	<ul style="list-style-type: none"> <li>→ARCHIVED: ADM-AODA-CSS-05 Customer Service Training</li> <li>→New Policy: ADM-HR-II-05: Mandatory Training on Accessibility Standards; training for IASR requirements and customer service training integrated into one policy</li> <li>→Plan on Training requirements - document found at: abishop/<a href="#">Employment Standard\Training for AODA.docx</a></li> <li>→Training: Completed for managers, Board of Directors; training for staff to be completed by June 30, 2014</li> </ul>	<ul style="list-style-type: none"> <li>☐ Update and deliver new training package as part of mandatory training and board retreat</li> </ul>
	<b>Informing employees of supports</b> <ul style="list-style-type: none"> <li>Inform its employees of its policies used to support employees with disabilities</li> <li>provide the information as soon as practicable</li> <li>provide updated information on accommodations policies to employees when changes occur</li> </ul>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Include information on policies used to support employees with disabilities in the orientation binder.</li> <li>Inform employees at Annual mandatory education sessions.</li> </ol>	<ul style="list-style-type: none"> <li>→AODA Customer Service video training included in orientation.</li> <li>→ Information on Employment Policies as they relate to disability, summary of accommodation policies and OHR brochure included in orientation</li> <li>→ circulated to current staff</li> </ul>	<ul style="list-style-type: none"> <li>☐ Review materials to ensure they are the most up-to-date</li> </ul>
2022	<b>Feedback</b> <ul style="list-style-type: none"> <li>Ensure that the processes for receiving and responding to feedback are accessible by providing or arranging for the provision of accessible formats and communications supports</li> <li>Notify the public about the availability of accessible formats and supports</li> </ul>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Feedback processes on the hospital website include information on provision of accessible formats.</li> <li>'Patient Relations' brochure to include information on accessible formats.</li> </ol>	<ul style="list-style-type: none"> <li>→Website statement that feedback may be given verbally (in person or telephone), in writing or by email.</li> <li>→Patient Rights brochure revised to include alternate formats for feedback.</li> <li>→Patient Satisfaction Survey revised to include statement on availability of alternate formats.</li> </ul>	<ul style="list-style-type: none"> <li>☐ Review current accessibility options available for feedback</li> </ul>

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Year	EMPLOYMENT STANDARDS	ACTION REQUIRED	Progress: January 2014	2019
2022	<b>Communication support</b> <ul style="list-style-type: none"> <li>Provide or arrange for the provision of accessible formats and communication supports at a cost that is no more than the regular cost, upon request</li> <li>Notify the public about the availability of accessible formats</li> </ul>			Move towards all printed forms in the hospital stating “accessible formats available upon request”
	<b>Service entrance</b>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Add railing to service entrance stairs on missing side</li> <li>Paint high contrast color on exterior steps forward entrances for easy visibility</li> </ol>		
2023	<ul style="list-style-type: none"> <li>Review, update and create plan for the next 5 years</li> </ul>			
	<b>Outdoor space</b>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Assess feasibility for the creation of an accessible outdoor space</li> <li>Assess feasibility to make current outdoor patient space more accessible</li> </ol>		
	<b>Reception areas</b>	<b>ACTION:</b> <ol style="list-style-type: none"> <li>Replace reception area seating with seats that are easier to get out of</li> </ol>		