



# **Sault Area Hospital**

## **Annual Accessibility Status Report**

### **2021**

**Prepared By:**

**The SAH Accessibility Committee**

This publication is available on the SAH website ([www.sah.on.ca](http://www.sah.on.ca)) and in accessible formats upon request.

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## PURPOSE OF THIS REPORT

In 2013, Sault Area Hospital (SAH) created a Multi-Year Accessibility Plan which was designed to foster a healthy, respectful and positive environment and to facilitate barrier-free access to all SAH goods, services and facilities. In that plan, we outlined our strategy to prevent and remove barriers and to meet the requirements set out under the provincial accessibility legislation.

The purpose of this report is to:

- (1) Provide an update on the progress of those accessibility issues identified in our Multi-Year Accessibility Plan and the steps taken to address them;
- (2) Describe accessibility issues identified since the creation of that Multi-Year Accessibility Plan and in response to which improvements have already been made;
- (3) Describe accessibility issues identified since the creation of that Multi-Year Accessibility Plan for which improvements are underway or planned for the coming calendar year; and
- (4) Meet the requirement set out under subsection 4(3)(a) of the *Integrated Accessibility Standards Regulation (IASR)* that we create an annual status report and make that report publicly available.

This report will be made available to the public via the SAH website and in accessible formats upon request.

## BACKGROUND

In 2005, the Ontario government passed the *Accessibility for Ontarians with Disabilities Act, 2005*, S.O. 2005, C. 11. This statute requires that Ontario be an accessible province by 2025. To guide and assist employers with the identification, prevention and removal of barriers to accessibility, 2 regulations were also developed: *Accessibility Standards for Customer Service*, O. Reg. 429/07 and *Integrated Accessibility Standards*, O. Reg. 191/11. This legislation contains accessibility standards governing:

- (1) Customer service;
- (2) Information and Communications;
- (3) Employment;
- (4) Transportation; and
- (5) The Design of Public Spaces.

The *Accessibility Standards for Customer Service* regulation (O. Reg. 429/07) came into force in 2008. SAH is in compliance with these standards and will continue to maintain, monitor and improve upon accessibility in customer service.

The *Integrated Accessibility Standards* regulation (hereinafter “IASR”) (O. Reg. 191/11) contains the remaining standards. The IASR is now law and the requirements are being phased in over the coming years.

## **ABOUT SAH**

Serving a catchment population of approximately 150,000 SAH provides primary, secondary and select tertiary services to residents in Sault Ste. Marie and the District of Algoma.

In addition to providing core services in Emergency and Critical Care; Medicine; Surgery; Obstetrics, Maternity and Pediatrics; Mental Health and Addictions; Complex Continuing Care; and Rehabilitation, SAH is also home to the Algoma Regional Renal Program and the Algoma District Cancer Program including radiation therapy services.

SAH is proud to operate 252 beds, have approximately 2050 dedicated employees, over 400 volunteers and approximately 365 physicians (active, supportive and locums)

## **COMMITMENT TO ACCESSIBILITY**

All people, regardless of disability, have equal right of access to all goods, services and facilities provided by the Sault Area Hospital. SAH is committed to:

- Providing goods, services and facilities in a manner that:
  - Maintains the dignity, autonomy, respect, privacy and safety of persons with disabilities;
  - Is inclusive, sensitive and responsive to unique needs.
- Integration and equal opportunity;
- Preventing and removing barriers to accessibility;

- Meeting the standards set out under the *Accessibility for Ontarians with Disabilities Act, 2005*.

#### **SAH ACCESSIBILITY COMMITTEE**

The SAH Accessibility Committee is a working group that prepares, monitors and revises the Multi-Year Accessibility Plan and Annual Status Reports required under the *IASR*. Various departments across the organization are represented on this Committee and efforts are made to include representation from the broader community. The working group responsible for preparation of this plan includes representatives from:

<b>SAH Department / Community Organization</b>
Strategy and Business Planning
Communications and Public Affairs
Facilities Management
Clinical/Allied Health
Planning and Risk Management
Patient & Family Advisor
Community Member
Human Resources (ad hoc)

#### **REVIEW AND MONITORING OF PROGRESS**

The Strategy and Business Planning at Sault Area Hospital is responsible for monitoring accessibility concerns within the organization. Members of the SAH Accessibility Committee will provide input on accessibility issues during the monthly Accessibility Committee meetings.

Annually, the SAH Accessibility Committee review and prepare an Annual Status Report regarding.

Annual Status Reports will be published on the SAH website upon completion.

#### **STATUS OF ACTIONS ITEMS IN 2021 OF THE MULTI-YEAR ACCESSIBILITY PLAN**

#### **SEE BELOW**

Accessibility Issue	Description	Improvement	Progress
<b>Accessibility feedback gathering</b>	Ensure that the Accessibility Committee is gathering input from the community, workers and PFAC when developing actions on the multi-year plan.	The Accessibility Committee successfully launched the Report a Barrier button back in 2018, and has since received regular feedback and suggestions for removing barriers at SAH.	Complete
		The Committee has successfully maintained two community members to sit on the committee.	
<b>Review and input into new development of re-development of space</b>	Ensure that the Accessibility Committee is consulted when hospital operated space is developed or redeveloped. The committee should provide feedback and input and provide attestations for the work when completed.	The committee reviewed & participated in the new developments of the Pharmacy space, as well as the new Mental Health & Addictions facility & provided attestations as to their involvement in the process.	Complete
<b>Multi-year actuator review</b>	Audit facilities to determine the need for door actuators and “hold opens”.	Added an actuator to the washroom at the COVID Assessment Centre, front door of the Assessment Centre, and Diagnostic Imaging (DI). Hold Opens were also added to a washroom in the DI change area.	Complete
<b>Barrier Removal</b>	Review opportunities to remove barriers throughout the facility.	Turned two of the change rooms in the Diagnostic Imaging area into one larger, accessible change room. Provided input into the new parking system being installed at SAH.	Complete
<b>Support Patient Relations re: Accessibility-related concerns</b>	Provide Accessibility-related advice and support to Patient relations Department, as required,	Supported Patient Relations by providing Accessibility-related advice when responding to Patient Concerns.	Complete

<b>Accessibility Policy</b>	Ensure the Accessibility and Service Animal Policies are up-to-date and current.	Updated the Accessibility Policy.	Complete
<b>Signage Review</b>	Ensure signage relating to accessibility is clear and in place when required.	Added additional signage near the Algoma District Cancer program entrance to increase awareness of actuators.	Complete
<b>Increase Accessibility related awareness</b>	Promote Accessibility Committee activity through promotional material.	Completed multiple stories for Vital Links.	Complete
<b>Review parking and public spaces</b>	Review parking and public space review to find opportunity for improvements.	Reviewed curbs and transition points between parking areas and main buildings.	Complete
<b>Accommodation Process</b>	Support Human Resources and Emergency Management with AODA requirements for accommodation and emergency plans.	Provided input to the update of the accommodation process in HR to ensure it includes the review of emergency evacuation plans for workers with accessibility issues.	Complete
<b>Website AODA Compliance</b>	As per legislation, ensure that SAH's website meets AODA standards.	Ensured full website accessibility and compliance to AODA Legislation with the new SAH website redevelopment.	Complete
<b>Community and Worker Accessibility Feedback</b>	Review, responded and addressed (if applicable) concerns or feedback from workers or community member coming to the Committee through the Report a Barrier page or by other means.	Responded and addressed all concerns that were submitted to the Committee.	Committee
<b>COVID Precautions and Accessibility</b>	Review pandemic precautions and measures put in place to remove or minimize any barriers created in keeping community safe.	Installed microphones and speakers at COVID screening points at the main entrances at SAH in order to reduce the impact of having plexi-glass barriers that hampered communication.	Complete
<b>Develop annual status report and multi-year work plan.</b>	Prepare status update on items that were identified to be completed in 2020. Prepare multi-year work plan for the Accessibility Committee. Post both to the SAH Website.	Posted a 2020 status report and a 2022-2025 accessibility work plan on the SAH website.	Complete
<b>Compliance Report</b>	File an AODA compliance report.	AODA compliance report completed and submitted by the CEO/President.	Complete

FOR PLANNED ACCESIBILITY ACTIVITY FOR 2022, PLEASE SEE THE 2022-2025 MULTI-YEAR ACCESSIBILITY WORKPLAN AVAILABLE ON THE SAH WEBSITE.