



SAULT AREA
HOSPITAL
HÔPITAL DE
SAULT-SAINTE-MARIE

Sault Area Hospital Multi-Year Accessibility Plan 2025 – 2028

Prepared by the SAH Accessibility Committee

**This publication is available on the
SAH website (www.sah.on.ca) and in
accessible formats upon request.**

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EXECUTIVE SUMMARY

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

ABOUT SAH

Located at the hub of the Great Lakes in beautiful Sault Ste. Marie, Ontario, across from our sister city of Sault Ste. Marie, Michigan, Sault Area Hospital (SAH) is a vital cornerstone in our community with a long, storied and proud history.

SAH began as two community hospitals, both situated on the St. Mary's River in downtown Sault Ste. Marie—the Sault Ste. Marie General Hospital (Catholic hospital founded by the Sisters of the Cross in 1898) and the Plummer Memorial Public Hospital (founded in 1919). In 1993, the two formed a partnership becoming Sault Area Hospital. Then, in March 2011, we opened a spectacular one-site, state-of-the-art hospital.

With a total annual budget of \$260 million and operating up to 300 beds, SAH provides primary, secondary and select tertiary services to residents in Sault Ste. Marie and the district of Algoma. We provide core services in Emergency and Critical Care; Cardiac; Medicine; Surgery; Obstetrics, Maternity and Pediatrics; Mental Health and Addictions; Complex Continuing Care; and Rehabilitation.

Our regional programs include the Algoma Regional Renal Program (ARRP), which provides comprehensive renal services and is one of 26 regional renal programs across Ontario. The Algoma District Cancer Program (ADCP) offers comprehensive cancer treatment services to residents of the Algoma district. Additionally, SAH operates several programs and services in locations throughout the community.

SAH works collaboratively with our local educational institutions to provide a training site for nurses and many other allied health disciplines. We are also a training site for the Northern Ontario School of Medicine (NOSM), supporting the learning of our medical learners and residents.

Sault Ste. Marie is a growing hub for health research. There are approximately 30 studies being spearheaded by physicians at SAH. In addition, SAH has a thriving Clinical Trials Department that works out of our Algoma District Cancer Program. There are approximately 30 clinical trials active at any given time, giving patients access to novel treatments for their care.

We are incredibly proud of our approximately 2100 dedicated staff, 160 active physicians and 400 volunteers who provide exemplary service to a catchment population of approximately 114,000 in the Algoma District.

SAH is a proud member of the Algoma Ontario Health Team, supporting an integrated health system focused on the unique needs of Algoma residents.

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. Sault Area Hospital (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.

In accordance with the *IASR*, SAH is required to develop and maintain a Multi-Year Accessibility Plan outlining our strategy to prevent and remove barriers and to meet the requirements under the accessibility legislation. In addition, SAH is required to prepare annual status reports on the progress of measures taken to implement the strategies contained in our Multi-Year Accessibility Plan. These documents will be posted on the SAH website and made available in accessible formats upon request.

In meeting this requirement, SAH has prepared this Multi-Year Accessibility Plan which outlines the actions that SAH has taken and will take to foster a healthy, respectful and positive environment and to facilitate barrier-free access to all SAH goods, services and facilities. The plan is developed by the SAH Accessibility Committee which is made up of workers, patient and family advisors as well as community members.

DEFINITIONS

Assistive Devices and Measures: Assistive devices and measures are supports to improve access to care for patients with disabilities. For example, wheelchairs, volunteers, real-time captioning services (on-screen typing of what speakers are saying), sign language interpreters or deaf-blind interveners. Other examples include, text, Telephone Teletypes (TTY), and audio loops to communicate with clients who are deaf, hard of hearing, have speech impairments or are deaf-blind (Guide to the Accessibility Standards for Customer Service, Ontario Regulation).

Disability: According to the Ontario Human Rights Code, a "Disability" is defined as:

- a. 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 impediment, 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,
- b. a condition of mental impairment or a developmental disability,
- c. a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d. a mental disorder, or
- e. 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. This definition describes common disabilities and is not considered exhaustive.

Emotional Support Animals: Emotional support animals provide comfort and security; however, they do not have training for specific tasks. Therefore, emotional support animals do not formally qualify as service animals under the AODA.

At SAH, an Emotional Support Animal will be considered a “service animal” if the patient/visitor provides documentation from a regulated health professional confirming that the person requires the animal for reasons relating to the disability (Point 3 under Identification below) and at the discretion of the area manager or delegate based on a risk analysis.

Personal Assistive Devices: For the purpose of this policy, Personal Assistive Devices are personal supports used by persons with disabilities that enable them to carry out the activities of daily living and allow access to services. Patient-owned equipment such as power-mobility devices (power wheelchairs or scooters) are regarded as Personal Assistive Devices.

Service Animals: Service animals are used by people with many different kinds of disabilities. Examples of service animals include dogs used by people who are blind, hearing alert animals for people who are deaf, deafened or hard of hearing, and animals trained to alert an individual to an oncoming seizure and lead them to safety (Guide to the Accessibility Standards for Customer Service, Ontario Regulation). For the purposes of this section, an animal is a service animal for a person with a disability, (a) if it is readily apparent that the animal is used by the person for reasons relating to his or her disability; or (b) if the person provides a letter from a physician or nurse confirming that the person requires the animal for reasons relating to the disability.

Support Person: A "Support Person" accompanies a person with a disability, in order to help with communication, mobility, personal care or medical needs or with access to goods or services. Medical needs may include, but are not limited to, monitoring an individual's health or providing medical support by being available in the event of a seizure. A Support Person may be a paid professional, a volunteer, family member or friend of the person with a disability (Guide to the Accessibility Standards for Customer Service, Ontario Regulation).

PROCEDURE AND COMPLIANCE

SAH will ensure we are identifying, preventing and removing barriers to access for people with disabilities through procedures in the following areas:

General Procedures

- Enabling and accommodating people with disabilities to access our goods and utilize our services.
- Communicating with a person with a disability in a manner that takes into account his or her disability

PREVENTATIVE MAINTENANCE OF ACCESSIBLE ELEMENTS IN PUBLIC SPACES AND TEMPORARY INTERRUPTIONS

In the event of a planned or unexpected disruption to services or facilities for customers with disabilities, Sault Area Hospital will notify staff, patients and families promptly.

This clearly posted notice will include information about the reason for the disruption, its anticipated length of time, and a description of alternative facilities or services, if available.

Services/Facilities include:

- Accessible washrooms;
- Courtyards; and
- Entrances and other access points with door actuators for accessibility purposes.

The notice will be made publicly available in the following ways:

- Signage at location of disruption;
- Notice on our website;
- Email (if required); and
- Social Media (if required).

Public Spaces will be audited and review every two years to ensure equipment and space remains accessible and no maintenance is required.

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. Patient and Family Advisors and community members are always represented on the committee. The working group responsible for preparation of this plan includes representatives from:

SAH Department / Community Organization
Strategy and Business Planning
Communications and Public Affairs
Facilities Management
Planning, Quality and Risk Management
Patient and Family Advisory Council Member
Spinal Cord Injury Ontario – Sault Ste. Marie Office
Clinical/Allied Health
Human Resources (ad hoc)
Community Member (if available)
PFAC Member

ACCESSIBILITY PLAN

- SAH, in consultation with persons with disabilities, will establish and maintain a multi-year accessibility plan.
- This Plan will be reviewed and updated at least once every 5 years.
- Each year, SAH will prepare a status report of the measures taken to implement the strategies set out in the multi-year accessibility plan.
- Both the multi-year accessibility plan and the annual status reports will be made publicly available through the SAH website.

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.

Accessibility activities completed in 2023-2024

- We reviewed, responded, and remove numerous barriers in 2024 through feedback from the “report a Barrier” tool and through other means.
- We have reviewed and discussed the proposed changes to the AODA legislation that have been provided to the government to look for opportunities to make changes in advance of legislative changes.
- After working directly with the Auditorium seat manufacturer, we determined that by removing some seats and changing the arm rest spacing, would make the seating accessible.
- The committee reviewed the latest potential Emergency Department designs and provided feedback from an Accessibility perspective.
- Modifications were made to the cashier office door to make it more accessible.
- Modification to the change rooms in day surgery were complete and now offer a fully accessible place for changing.
- Hold opens were installed for the door from the day surgery change room into the corridor.
- Some minor alternations were made to the door leading to Ventures coffee shop to provide greater clearance for larger wheelchairs. Structural changes are being investigated.
- New bottle fill stations were installed at an accessible height.
- Actuators for Patient Records and for the outer staff door near Ophthalmology, which were ordered in 2023, were successfully installed this past year.
- Warning tape was installed on emergency exits where there is a drop of surface level which could pose a safety risk to those in wheelchairs or with mobility issues.
- Working with the SAH Foundation and Facilities, we were able to influence a decision to buy a new outdoor table and seating to ensure that they are not only accessible, but would be functional for exercises our rehab patients.
- Reviewed and updated Accessibility Policy and Service Animal Policy.
- Supported Patient Relations by providing Accessibility-related advice when responding to Patient Concerns.
- Completed the annual status report for publication on the SAH website for year end.

3-YEAR ACCESSIBILITY PLAN – 2025-2028

2025/2026	CATEGORY	ACTIONS
Review AODA legislation for updates	Information/Communication	Understand the requirements and obligations outlined in the AODA legislation. Review the standards and guidelines that pertain to healthcare. Regularly monitor updates and revisions to the AODA legislation. Check the official AODA website, subscribe to relevant newsletters or mailing lists, and follow reliable sources that provide information on accessibility regulations.
Courtyard and outdoor space accessibility review	Barrier removal	As per legislation, we will review outdoors spaces to look for potential maintenance improvements.
Review of offsite locations for barriers	Barrier removal	Complete an inspection of offsite locations to look for opportunities to remove barriers.
Actuator review	Barrier removal	Ongoing review of doorways/entrances to find opportunity for improvement utilizing actuators
Accessibility check-in re: new Mental Health and Addictions facility	Barrier removal	Although we reviewed the new development/planning for the new Northway facility for AODA compliance, we should do a walkaround now that it is operational.
Update the SAH Accessibility Brochure	Information/Communication	Update the SAH Accessibility brochure. Look for opportunity to place on Intranet and SAH website.
Signage in main corridors	Information/Communication	Revisits the original work planned for 2021 to ensure signage in main corridors identifying nearest accessible washroom.
Review Accessibility and Service Animal Policy	Information/Communication	Review both policies for any potential updates needed.
Prepare annual status report	Information/Communication	Complete and post report to website.
Prepare compliance report	Information/Communication	Prepare and submit AODA compliance report to Ministry with SLT's approval.

3-YEAR ACCESSIBILITY PLAN – 2025-2028

2026/27	CATEGORY	ACTIONS
Review AODA legislation for updates	Information/Communication	Ensure that there are no new legislation requirements to consider.
Parking and transitions accessibility review	Barrier removal	We will review potential opportunities for improvement in parking at SAH.
Actuator review	Barrier removal	Ongoing review of doorways/entrances to find opportunity for improvement utilizing actuators
Participation in information fair at SAH	Information/Communication	To further general understanding of SAH's commitment to accessibility and the work done by the Accessibility Committee, participate in workplace information fair.
Review of accessibility during emergency situations	Barrier removal	Review of emergency protocols to determine if there is an opportunity to improve accessibility during emergency events (ex. visual cue for Code Red)
Review accessibility training on LMS on-boarding training modules	Information/Communication	Review accessibility training on LMS on-boarding training modules to find opportunities for improvement in information re: accessibility
Survey workers re: accessibility	Barrier removal	Survey workers regarding accessibility in the workplace. Last survey was 2019/2020.
Review Accessibility and Service Animal Policy	Information/Communication	Review both policies for any potential updates needed.
Prepare annual status report	Information/Communication	Complete and post report to website.
Prepare compliance report	Information/Communication	Prepare and submit AODA compliance report

3-YEAR ACCESSIBILITY PLAN – 2025-2028

2027/28	CATEGORY	ACTIONS
Review AODA legislation for updates	Information/Communication	Ensure that there are no new legislation requirements to consider.
Actuator review	Barrier removal	Ongoing review of doorways/entrances to find opportunity for improvement utilizing actuators
Increase Accessibility budget more transparency.	Information/Communication	Develop mechanism to make the spending in the Accessibility budget more transparent.
Review Accessibility and Service Animal Policy	Information/Communication	Review both policies for any potential updates needed.
Create a customer service standard checklist.	Information/Communication	Utilizing checklist to affirm we fully comply with the provisions of the customer service standards to ensure a person's goods, services or facilities are barrier-free and provide full and equitable opportunities for persons with disabilities to freely access them, based on the aforementioned checklist.

Severity criteria development.	Information/Communication	Create severity criteria for the feedback that comes to the Accessibility Committee.
Develop document formatting process.	Barrier removal	Explore conversion-ready digital formats available to make response to accessible document requests faster.
Prepare annual status report	Information/Communication	Complete and post report to website.
Prepare compliance report	Information/Communication	Prepare and submit AODA compliance report to Ministry with SLT's approval.

LEGISLATED COMPLIANCE FROM PAST YEARS

Accessible Customer Service Standards, O. Reg. 429/07			
Regulation Section	Compliance Date	Requirements	Compliance Action
Establishment of Policies, Practices and Procedures – s. 3(1)	Jan 1, 2010	Every provider of goods and services shall establish policies, practices, and procedures governing the provision of its goods or services to persons with disabilities.	Accessibility – Administrative Policy 1.1. Accessible Customer Service Training
Establishment of Policies, Practices and Procedures – s. 3(2)	Jan 1, 2010	The Provider shall use reasonable efforts to ensure that its policies, practices and procedures are consistent with the following principles: 1. The goods and services must be provided in a manner that respects the dignity and independence of persons with disabilities 2. The provision of goods and services to persons with disabilities and others must be integrated unless an alternate measure is necessary, whether temporarily or on a permanent basis, to enable a person to obtain, use or benefit from the goods or services. 3. Persons with disabilities must be given an opportunity equal to that given to others to obtain, use and benefit from the goods or services.	Accessibility – Administrative Policy 1.1. Accessible Customer Service Training
Establishment of Policies, Practices and Procedures – s. 3(3)	Jan 1, 2010	Without limiting subsections (1) and (2), the policies must deal with the use of assistive devices by persons with disabilities to obtain, use or benefit from the provider's goods or services or the availability, if any, of other measures which enable them to do so.	Accessibility – Administrative Policy 1.1.
Establishment of Policies, Practices and Procedures – s. 3(4)	Jan 1, 2010	When communicating with a person with a disability, a provider shall do so in a manner that takes into account the person's disability.	Accessibility – Administrative Policy 1.1. Accessible Customer Service Training
Establishment of Policies, Practices	Jan 1, 2010	Every designated public sector organization and every other provider	Accessibility – Administrative Policy 1.1.

and Procedures – s. 3(5)		of goods or services that has at least 20 employees in Ontario shall prepare one or more documents describing its policies, practices and procedures and, upon request, shall give a copy of a document to any person.	
Use of Service Animals and Support Persons – s. 4(2)	Jan 1, 2010	If a person with a disability is accompanied by a guide dog or other service animal, the provider of goods or services shall ensure that the person is permitted to enter the premises with the animal and to keep the animal with him or her unless the animal is otherwise excluded by law from the premises.	Accessibility – Administrative Policy 1.1. Guidelines for Animals with the Hospital – Infection Prevention and Control Policy IV-20 Accessible Customer Service Training
Use of Service Animals and Support Persons – s. 4(3)	Jan 1, 2010	If a service animal is excluded by law from the premises, the provider of goods or services shall ensure that other measures are available to enable the person with a disability to obtain, use or benefit from the provider’s goods or services.	Accessible Customer Service Training
Use of Service Animals and Support Persons – s. 4(4)	Jan 1, 2010	If a person with a disability is accompanied by a support person, the provider of goods or services shall ensure that both persons are permitted to enter the premises together and that the person with a disability is not prevented from having access to the support person while on the premises.	Accessibility – Administrative Policy 1.1. Accessible Customer Service Training
Use of Service Animals and Support Persons – s. 4(5)	Jan 1, 2010	The provider of goods or services may require a person with a disability to be accompanied by a support person when on the premises, but only if a support person is necessary to protect the health or safety of the person with a disability or the health or safety of others on the premises.	SAH encourages, but does not require, a support person to attend on-site for accessibility purposes.
Use of Service Animals and Support Persons – s. 4(6)	Jan 1, 2010	If an amount is payable by a person for admission to the premises or in connection with a person’s presence at the premises, the provider of goods or services shall ensure that notice is given in advance about the amount, if any, payable in respect of the support person.	There are no costs payable to access SAH. Parking is available and the cost is assessed per vehicle.

Use of Service Animals and Support Persons – s. 4(7)	Jan 1, 2010	Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall prepare one or more documents describing its policies, practices and procedures with respect to the matters governed by this section and, upon request, shall give a copy of a document to any person.	Accessibility – Administrative Policy 1.1.
Notice of Temporary Disruptions – s. 5(1)	Jan 1, 2010	If, in order to obtain, use or benefit from a provider’s goods or services, persons with disabilities usually use particular facilities or services of the provider and if there is a temporary disruption in those facilities or services in whole or in part, the provider shall give notice of the disruption to the public.	Accessibility – Administrative Policy 1.1.
Notice of Temporary Disruptions – s. 5(2)	Jan 1, 2010	Notice of the disruption must include information about the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if any, that are available.	Accessibility – Administrative Policy 1.1.
Notice of Temporary Disruptions – s. 5(3)	Jan 1, 2010	Notice may be given by posting the information at a conspicuous place on premises owned or operated by the provider of goods or services, by posting it on the provider’s website, if any, or by such other method as is reasonable in the circumstances.	Accessibility – Administrative Policy 1.1.
Notice of Temporary Disruptions – s. 5(4)	Jan 1, 2010	Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall prepare a document that sets out the steps to be taken in connection with a temporary disruption and, upon request, shall give a copy of the document to any person.	Accessibility – Administrative Policy 1.1.
Training for Staff, etc. – s. 6(1)	Jan 1, 2010	<p>Every provider of goods or services shall ensure that the following persons receive training about the provision of its goods or services to persons with disabilities:</p> <p>1. Every person who deals with members of the public or other third parties on behalf of the provider, whether the person does so as an employee, agent, volunteer or otherwise.</p>	<p>Accessibility – Administrative Policy 1.1.</p> <p>Accessible Customer Service Training</p>

		<p>2. Every person who participates in developing the provider’s policies, practices and procedures governing the provision of goods or services to members of the public or other third parties.</p>	
<p>Training for Staff, etc. – s. 6(2)</p>	<p>Jan 1, 2010</p>	<p>The training must include a review of the purposes of the Act and the requirements of this Regulation and instruction about the following matters:</p> <ol style="list-style-type: none"> 1. How to interact and communicate with persons with various types of disability. 2. How to interact with persons with disabilities who use an assistive device or require the assistance of a guide dog or other service animal or the assistance of a support person. 3. How to use equipment or devices available on the provider’s premises or otherwise provided by the provider that may help with the provision of goods or services to a person with a disability. 4. What to do if a person with a particular type of disability is having difficulty accessing the provider’s goods or services. 	<p>Accessibility – Administrative Policy 1.1.</p> <p>Accessible Customer Service Training</p>
<p>Training for Staff, etc. – s. 6(3)</p>	<p>Jan 1, 2010</p>	<p>The training must be provided to each person as soon as practicable after he or she is assigned the applicable duties.</p>	<p>Accessibility – Administrative Policy 1.1.</p> <p>Accessible Customer Service Training is provided to each new hire during mandatory orientation.</p>
<p>Training for Staff, etc. – s. 6(4)</p>	<p>Jan 1, 2010</p>	<p>Training must also be provided on an ongoing basis in connection with changes to the policies, practices and procedures governing the provision of goods or services to persons with disabilities.</p>	<p>Accessibility – Administrative Policy 1.1.</p> <p>Accessible Customer Service Training</p>
<p>Training for Staff, etc. – s. 6(5)</p>	<p>Jan 1, 2010</p>	<p>Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall prepare a document describing its training policy, and the document must include a summary of the contents of the training and details of when the training is to be provided.</p>	<p>Accessibility – Administrative Policy 1.1.</p>

Training for Staff, etc. – s. 6(6)	Jan 1, 2010	Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall keep records of the training provided under this section, including the dates on which the training is provided and the number of individuals to whom it is provided.	Accessibility – Administrative Policy 1.1.
Feedback Process for Providers of Goods or Services – s. 7(1)	Jan 1, 2010	Every provider of goods or services shall establish a process for receiving and responding to feedback about the manner in which it provides goods or services to persons with disabilities and shall make information about the process readily available to the public.	Accessibility – Administrative Policy 1.1. Patient and Visitor Concerns Management Policy – Administrative Policy 2.6 Tell Us Your Views pamphlet and page on SAH website
Feedback Process for Providers of Goods or Services – s. 7(2)	Jan 1, 2010	The feedback process must permit persons to provide their feedback in person, by telephone, in writing, or by delivering an electronic text by email or on diskette or otherwise.	Accessibility – Administrative Policy 1.1. Patient and Visitor Concerns Management Policy – Administrative Policy 2.6
Feedback Process for Providers of Goods or Services – s. 7(3)	Jan 1, 2010	The feedback process must specify the actions that the provider of goods or services is required to take if a complaint is received.	Patient and Visitor Concerns Management Policy – Administrative Policy 2.6
Feedback Process for Providers of Goods or Services – s. 7(4)	Jan 1, 2010	Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall prepare a document describing its feedback process and, upon request, shall give a copy of the document to any person.	Accessibility – Administrative Policy 1.1. Patient and Visitor Concerns Management Policy – Administrative Policy 2.6
Notice of Availability of Documents – s. 8(1)	Jan 1, 2010	Every designated public sector organization and every other provider of goods or services that has at least 20 employees in Ontario shall notify persons to whom it provides goods or services that the documents required by this Regulation are available upon request.	Accessibility page of SAH website Tell Us Your Views pamphlet and page on SAH website Accessibility page on SAH website
Notice of Availability of Documents – s. 8(2)	Jan 1, 2010	The notice may be given by posting the information at a conspicuous place on premises owned or operated by the provider, by posting it on the provider's website, if any, or by such other method as is reasonable in the circumstances.	Accessibility page on SAH website Tell Us Your Views pamphlet and page on SAH website
Format of Documents – s. 9(1)	Jan 1, 2010	If a provider of goods or services is required by this Regulation to give a	Accessibility – Administrative Policy 1.1.

		copy of a document to a person with a disability, the provider shall give the person the document, or the information contained in the document, in a format that takes into account the person's disability.	
Format of Documents – s. 9(2)	Jan 1, 2010	The provider of goods or services and the person with a disability may agree upon the format to be used for the document or information.	Accessibility – Administrative Policy 1.1.

Integrated Accessibility Standards, O. Reg. 191/11 – Part I – General

Regulation Section	Compliance Date	Requirements	Compliance Action
Establishment of Accessibility Policies – s. 3(1)	Jan 1, 2013	Every obligated organization shall develop, implement and maintain policies governing how the organization achieves or will achieve accessibility through meeting its requirements referred to in this Regulation.	Accessibility – Administrative Policy 1.1.
Establishment of Accessibility Policies – s. 3(2)	Jan 1, 2013	Obligated organizations, other than small organizations, shall include a statement of organizational commitment to meet the accessibility needs of persons with disabilities in a timely manner in their policies.	Accessibility – Administrative Policy 1.1.
Establishment of Accessibility Policies – s. 3(3)	Jan 1, 2013	The Government of Ontario, the Legislative Assembly, every designated public sector organization and large organizations shall, (a) prepare one or more written documents describing its policies; and (b) make the documents publicly available, and shall provide them in an accessible format upon request.	Accessibility – Administrative Policy 1.1 can be found online at www.sah.on.ca .
Accessibility Plans – s. 4(1)	Jan 1, 2013	The Government of Ontario, Legislative Assembly, designated public sector organizations and large organizations shall, (a) establish, implement, maintain and document a multi-year accessibility plan, which outlines the organization's strategy to prevent and remove barriers and meet its requirements under this Regulation; (b) post the accessibility plan on their website, if any, and provide the plan	Accessibility – Administrative Policy 1.1. Sault Area Hospital Multi-Year Accessibility Plan 2022-2025 can be found online at www.sah.on.ca .

		<p>in an accessible format upon request; and</p> <p>(c) review and update the accessibility plan at least once every five years.</p>	
Accessibility Plans – s. 4(2)	Jan 1, 2013	The Government of Ontario, Legislative Assembly and designated public sector organizations shall establish, review and update their accessibility plans in consultation with persons with disabilities and if they have established an accessibility advisory committee, they shall consult with the committee.	<p>Accessibility – Administrative Policy 1.1.</p> <p>Sault Area Hospital Multi-Year Accessibility Plan 2022-2025</p>
Accessibility Plan – s. 4(3)	Jan 1, 2013	<p>The Government of Ontario, Legislative Assembly and designated public sector organizations shall,</p> <p>(a) prepare an annual status report on the progress of measures taken to implement the strategy referenced in clause (1) (a), including steps taken to comply with this Regulation; and</p> <p>(b) post the status report on their website, if any, and provide the report in an accessible format upon request.</p>	<p>Accessibility – Administrative Policy 1.1.</p> <p>First Annual Status Report completed by December 31, 2014.</p> <p>This document is updated annually.</p>
Procuring or Acquiring Goods, Services or Facilities – s. 5(1)	Jan 1, 2013	The Government of Ontario, Legislative Assembly and designated public sector organizations shall incorporate accessibility design, criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so.	Accessibility – Administrative Policy 1.1.
Procuring or Acquiring Goods, Services or Facilities – s. 5(2)	Jan 1, 2013	If the Government of Ontario, Legislative Assembly or a designated public sector organization determines that it is not practicable to incorporate accessibility design, criteria and features when procuring or acquiring goods, services or facilities, it shall provide, upon request, an explanation.	Accessibility – Administrative Policy 1.1.
Self-service Kiosks – s. 6(1)	Jan 1, 2013	Without limiting the generality of section 5 , the Government of Ontario, Legislative Assembly and designated public sector organizations shall incorporate accessibility features when designing, procuring or acquiring self-service kiosks.	Accessibility – Administrative Policy 1.1.

Training – s. 7(1)	Jan 1, 2014	<p>Every obligated organization shall ensure that training is provided on the requirements of the accessibility standards referred to in this Regulation and on the Human Rights Code as it pertains to persons with disabilities to,</p> <p>(a) all employees, and volunteers;</p> <p>(b) all persons who participate in developing the organization's policies; and</p> <p>(c) all other persons who provide goods, services or facilities on behalf of the organization.</p>	<p>Accessibility – Administrative Policy 1.1.</p> <p>A team was assembled and work took place to augment SAH's existing Accessible Customer Service training program to meet all of the requirements of the IASR in a manner that relates to the hospital environment.</p> <p>Human Rights Code and AODA training is done through the Learning Management System at SAH. All new employees, contractors and volunteers are required to take the training.</p>
Training – s. 7(2)	Jan 1, 2014	The training on the requirements of the accessibility standards and on the Human Rights Code referred to in subsection (1) shall be appropriate to the duties of the employees, volunteers and other persons.	
Training – s. 7(3)	Jan 1, 2014	Every person referred to in subsection (1) shall be trained as soon as practicable.	
Training – s. 7(4)	Jan 1, 2014	Every obligated organization shall provide training in respect of any changes to the policies described in section 3 on an ongoing basis.	
Training – s. 7(5)	Jan 1, 2014	The Government of Ontario, the Legislative Assembly, every designated public sector organization and every large organization shall keep a record of the training provided under this section, including the dates on which the training is provided and the number of individuals to whom it is provided.	

Integrated Accessibility Standards, O. Reg. 191/11 – Part II – Information and Communication Standards			
Regulation Section	Compliance Date	Requirements	Compliance Action
Feedback – s. 11(1)	Jan 1, 2014	Every obligated organization that has processes for receiving and responding to feedback shall ensure that the processes are accessible to persons with disabilities by providing or arranging for the provision of	<p>Accessibility – Administrative Policy 1.1.</p> <p>Patient and Visitor Concerns Management – Administrative Policy 2.6</p>

		accessible formats and communications supports, upon request.	
Feedback – s. 11(3)	Jan 1, 2014	Every obligated organization shall notify the public about the availability of accessible formats and communication supports.	<p>Accessibility – Administrative Policy 1.1</p> <p>The SAH website describes our feedback process at http://www.sah.on.ca/patients/tell-us-your-views</p> <p>As with many other Ontario hospitals, SAH patient experience surveys are administered by the National Research Corporation of Canada (NRCC). Starting in January 2014, patient experience survey cover letters include a statement informing survey participants of the availability of an accessible format upon request along with contact information at NRCC for facilitating any requests regarding accessible surveys.</p>
Accessible Formats and Communication Supports – s. 12(1)	Jan 1, 2015	<p>Except as otherwise provided, every obligated organization shall upon request provide or arrange for the provision of accessible formats and communication supports for persons with disabilities,</p> <p>(a) in a timely manner that takes into account the person’s accessibility needs due to disability; and</p> <p>(b) at a cost that is no more than the regular cost charged to other persons.</p>	SAH is currently able to provide documents in accessible formats and a range of communication supports. This is promoted in various ways and is included on our website.
Accessible Formats and Communication Supports – s. 12(2)	Jan 1, 2015	The obligated organization shall consult with the person making the request in determining the suitability of an accessible format or communication support.	Accessibility – Administrative Policy 1.1.
Accessible Formats and Communication Supports – s. 12(3)	Jan 1, 2015	Every obligated organization shall notify the public about the availability of accessible formats and communication supports.	<p>Accessibility – Administrative Policy 1.1</p> <p>Tell Us Your Views brochure is available throughout the hospital.</p> <p>The SAH website describes our feedback process at http://www.sah.on.ca/patients/tell-us-your-views.</p>

<p>Accessible Websites and Web Content – s. 14(2)</p>	<p>Jan 1, 2014 (new web sites and content to Level A) Jan 1, 2021 (all websites and content to Level AA other than Captions (live) & Audio Descriptions (Pre-recorded))</p>	<p>Designated public sector organizations and large organizations shall make their internet websites and web content conform with the World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0, initially at Level A and increasing to Level AA, and shall do so in accordance with the schedule set out in this section.</p>	<p>SAH is regularly monitoring the accessibility of our current website.</p> <p>In 2021, our website was completely redesigned and meets all requirements and standards set out by the AODA and is fully accessible.</p>
<p>Accessible Websites and Web Content – s. 14(5)</p>		<p>Except where meeting the requirement is not practicable, this section applies,</p> <p>(a) to websites and web content, including web-based applications, that an organization controls directly or through a contractual relationship that allows for modification of the product; and</p> <p>(b) to web content published on a website after January 1, 2012.</p>	

<p>Integrate Accessibility Standards, O. Reg. 191/11 – Part III - Employment Standards</p>			
<p>Regulation Section</p>	<p>Compliance Date</p>	<p>Requirements</p>	<p>Compliance Action</p>
<p>Recruitment, General – s. 22</p>	<p>Jan 1, 2014</p>	<p>Every employer shall notify its employees and the public about the availability of accommodation for applicants with disabilities in its recruitment processes.</p>	<p>Effective January 1, 2014, all SAH job postings include notice of the availability of accommodation for applicants with disabilities. The careers section of the SAH website (http://www.sah.on.ca/careers) will also be updated to reflect this information.</p>
<p>Recruitment, Assessment or Selection Process – s. 23 (1)</p>	<p>Jan 1, 2014</p>	<p>During a recruitment process, an employer shall notify job applicants, when they are individually selected to participate in an assessment or selection process that accommodations are available upon request in relation to the materials or processes to be used.</p>	<p>Effective January 1, 2014, all offers of selection assessments and / or interviews, whether verbal or written, include notice of the availability of accommodation upon request.</p>
<p>Recruitment, Assessment or Selection Process – s. 23 (2)</p>	<p>Jan 1, 2014</p>	<p>If a selected applicant requests an accommodation, the employer shall consult with the applicant and provide or arrange for the provision</p>	<p>Upon being notified of a need for accommodation, SAH works with the applicant to determine and</p>

		of a suitable accommodation in a manner that takes into account the applicant's accessibility needs due to disability.	implement suitable accommodations.
Notice to Successful Applicants – s. 24	Jan 1, 2014	Every employer shall, when making offers of employment, notify the successful applicant of its policies for accommodating employees with disabilities.	Effective January 1, 2014, all offers of employment, whether verbal or written, include notice of the availability of accommodation upon request.
Informing Employees of Supports – s. 25(1)	Jan 1, 2014	Every employer shall inform its employees of its policies used to support its employees with disabilities, including, but not limited to, policies on the provision of job accommodations that take into account an employee's accessibility needs due to disability.	SAH shares this information with employees via collective agreements as well as specific policies which are made available to all employees via the SAH intranet.
Informing Employees of Supports – s. 25(2)	Jan 1, 2014	Employers shall provide the information required under this section to new employees as soon as practicable after they begin their employment.	SAH provides this information to new employees during mandatory new hire orientation.
Informing Employees of Supports – s. 25(3)	Jan 1, 2014	Employers shall provide updated information to its employees whenever there is a change to existing policies on the provision of job accommodations that take into account an employee's accessibility needs due to disability.	SAH shares this information with employees via collective agreements as well as specific policies which are made available to all employees via the SAH intranet.
Accessible Formats and Communication Supports for Employees – S. 26(1)	Jan 1, 2014	In addition to its obligations under section 12 , where an employee with a disability so requests it, every employer shall consult with the employee to provide or arrange for the provision of accessible formats and communication supports for, (a) information that is needed in order to perform the employee's job; and (b) information that is generally available to employees in the workplace.	Accessibility – Administrative Policy 1.1
Accessible Formats and Communication Supports for Employees – S. 26(2)	Jan 1, 2014	The employer shall consult with the employee making the request in determining the suitability of an accessible format or communication support.	Accessibility – Administrative Policy 1.1
Workplace Emergency Response Information – s. 27(1)	Jan 1, 2012	Every employer shall provide individualized workplace emergency response information to employees who have a disability, if the disability is such that the individualized information is necessary and the	Workplace emergency response information is included in individual accommodation plans where needed and known to SAH.

		employer is aware of the need for accommodation due to the employee's disability.	Human Resources undertook a review of all process documents to ensure that this requirement is formally documented.
Workplace Emergency Response Information – s. 27(2)	Jan 1, 2012	If an employee who receives individualized workplace emergency response information requires assistance and with the employee's consent, the employer shall provide the workplace emergency response information to the person designated by the employer to provide assistance to the employee.	Workplace emergency response information is included in individual accommodation plans (as needed). This was updated in November 2021.
Workplace Emergency Response Information – s. 27(3)	Jan 1, 2012	Employers shall provide the information required under this section as soon as practicable after the employer becomes aware of the need for accommodation due to the employee's disability.	
Workplace Emergency Response Information – s. 27(4)	Jan 1, 2012	Every employer shall review the individualized workplace emergency response information, (a) when the employee moves to a different location in the organization; (b) when the employee's overall accommodations needs or plans are reviewed; and (c) when the employer reviews its general emergency response policies.	
Documented Individual Accommodation Plans – s. 28(1)	Jan 1, 2014	Employers, other than employers that are small organizations, shall develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities.	Human Resources at SAH has developed and maintains the process related to the development of individual accommodation plans. This was updated in November 2021.
Documented Individual Accommodation Plans – s. 28(2)		The process for the development of documented individual accommodation plans shall include the following elements: 1. The manner in which an employee requesting accommodation can participate in the development of the individual accommodation plan. 2. The means by which the employee is assessed on an individual basis. 3. The manner in which the employer can request an evaluation by an outside medical or other	Human Resources at SAH has developed and maintains the process related to the development of individual accommodation plans. This was updated in November 2021 to include these elements.

		<p>expert, at the employer’s expense, to assist the employer in determining if accommodation can be achieved and, if so, how accommodation can be achieved.</p> <p>4. The manner in which the employee can request the participation of a representative from their bargaining agent, where the employee is represented by a bargaining agent, or other representative from the workplace, where the employee is not represented by a bargaining agent, in the development of the accommodation plan.</p> <p>5. The steps taken to protect the privacy of the employee’s personal information.</p> <p>6. The frequency with which the individual accommodation plan will be reviewed and updated and the manner in which it will be done.</p> <p>7. If an individual accommodation plan is denied, the manner in which the reasons for the denial will be provided to the employee.</p> <p>8. The means of providing the individual accommodation plan in a format that takes into account the employee’s accessibility needs due to disability.</p>	
Documented Individual Accommodation Plans – s. 28(3)	Jan 1, 2014	<p>Individual accommodation plans shall,</p> <p>(a) if requested, include any information regarding accessible formats and communications supports provided, as described in section 26;</p> <p>(b) if required, include individualized workplace emergency response information, as described in section 27; and</p> <p>(c) identify any other accommodation that is to be provided.</p>	
Return to Work Process – s. 29(1)	Jan 1, 2014	Every employer, other than an employer that is a small organization,	Return to Work Program – Administrative Policy HR-AM-1

		(a) shall develop and have in place a return to work 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; and (b) shall document the process.	The process documents listed above in regard to s. 28 also guide the return to work process at SAH. SAH also respects the return to work processes set out in the collective agreements reached with bargaining agents representing SAH employees.
Return to Work Process – s. 29(2)	Jan 1, 2014	The return to work process shall, (a) outline the steps the employer will take to facilitate the return to work of employees who were absent because their disability required them to be away from work; and (b) use documented individual accommodation plans, as described in section 28 , as part of the process.	
Performance Management – s. 30(1)	Jan 1, 2014	An employer that uses performance management in respect of its employees shall take into account the accessibility needs of employees with disabilities, as well as individual accommodation plans, when using its performance management process in respect of employees with disabilities.	Performance Management Program – Administrative Policy HR-G-17 has been amended to formalize this requirement.
Career Development and Advancement – s. 31	Jan 1, 2014	An employer that provides career development and advancement to its employees shall take into account the accessibility needs of its employees with disabilities as well as any individual accommodation plans, when providing career development and advancement to its employees with disabilities.	SAH respects collective agreement provisions and legislative obligations related career development, advancement and redeployment of staff. In January 1, 2014, Human Resources at SAH created process documents to ensure that accessibility needs are taken into account in all decisions related to career development, advancement and redeployment.
Redeployment – s. 32	Jan 1, 2014	An employer that uses redeployment shall take into account the accessibility needs of its employees with disabilities, as well as individual accommodation plans, when redeploying employees with disabilities.	

Integrated Accessibility Standards, O. Reg. 191/11 - Part IV – Transportation Standards			
Regulation Section	Compliance Date	Requirements	Compliance Action
** As SAH does not provide transportation services, these standards are not applicable to this organization.			

Integrate Accessibility Standards, O. Reg. 191/11 – Part IV.1 – Design of Public Spaces Standards			
Regulation Section	Compliance Date	Requirements	Compliance Action
Outdoor Public Use Eating Areas, General Requirements – s. 80.17	Jan 1, 2016	<p>Obligated organizations, other than small organizations, shall ensure that where they construct or redevelop outdoor public use eating areas that they intend to maintain, the outdoor public use eating areas meet the following requirements:</p> <ol style="list-style-type: none"> 1. A minimum of 20 per cent of the tables that are provided must be accessible to persons using mobility aids by having knee and toe clearance underneath the table and in no case shall there be fewer than one table in an outdoor public use eating area that meets this requirement. 2. The ground surface leading to and under tables that are accessible to persons using mobility aids must be level, firm and stable. 3. Tables that are accessible to persons using mobility aids must have clear ground space around them that allows for a forward approach to the tables. 	<p>SAH has the benefit of a relatively new facility and, thus, does not anticipate any significant building or redevelopment projects in the near term.</p> <p>Should any building or redevelopment projects be undertaken, however, SAH is committed to meeting the requirements set out in Part IV.1 of the IASR through the incorporation of these standards into our decision making processes.</p> <p>The decision was made to make one of the three internal courtyards fully accessible through the addition of a door actuator in Spring 2018. The picnic table in the area meets the standards.</p> <p>These requirements are being ensured as part of the development of the new Mental Health and Addictions withdrawal management facility that is being develop.</p> <p>SAH's exterior pathways currently meet the requirements for accessibility.</p>
Exterior Paths of Travel, Technical Requirements – s. 80.23	Jan 1, 2016	<p>When constructing new or redeveloping existing exterior paths of travel that they intend to maintain, obligated organizations, other than small organizations, shall ensure that new and redeveloped exterior paths of travel meet the following requirements:</p> <ol style="list-style-type: none"> 1. The exterior path must have a minimum clear width of 1,500 mm, but this clear width can be reduced to 1,200 mm to serve as a turning space where the exterior path connects with a curb ramp. 2. Where the head room clearance is less than 2,100 mm over a portion of the exterior path, a rail or other barrier with a leading edge that is cane detectable must be provided around the object that is obstructing the head room clearance. 	<p>SAH's exterior pathways currently meet the requirements for accessibility.</p>

		<p>3. The surface must be firm and stable.</p> <p>4. The surface must be slip resistant.</p> <p>5. Where an exterior path has openings in its surface,</p> <p>(i) the openings must not allow passage of an object that has a diameter of more than 20 mm, and</p> <p>(ii) any elongated openings must be oriented approximately perpendicular to the direction of travel.</p> <p>6. The maximum running slope of the exterior path must be no more than 1:20, but where the exterior path is a sidewalk, it can have a slope of greater than 1:20, but it cannot be steeper than the slope of the adjacent roadway.</p> <p>7. The maximum cross slope of the exterior path must be no more than 1:20, where the surface is asphalt, concrete or some other hard surface, or no more than 1:10 in all other cases.</p> <p>8. The exterior path must meet the following requirements:</p> <p>(i) It must have a 1:2 bevel at changes in level between 6 mm and 13 mm.</p> <p>(ii) It must have a maximum running slope of 1:8 or a curb ramp that meets the requirement of section 80.26 at changes in level of greater than 13 mm and less than 75 mm.</p> <p>(iii) It must have a maximum running slope of 1:10 or a curb ramp that meets the requirement of section 80.26 at changes in level of 75 mm or greater and 200 mm or less.</p> <p>(iv) It must have a ramp that meets the requirements of section 80.24 at changes in level of greater than 200 mm.</p> <p>9. The entrance to the exterior path of travel must provide a minimum clear opening of 850 mm, whether</p>	<p>Curbs, travel areas, ramps and stairs meet the requirements for accessibility.</p>
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		the entrance includes a gate, bollard or other entrance design.	
Exterior Paths of Travel, Ramps – s. 80.24	Jan 1, 2016	<p>Where an exterior path of travel is equipped with a ramp, the ramp must meet the following requirements:</p> <ol style="list-style-type: none"> 1. The ramp must have a minimum clear width of 900 mm. 2. The surface of the ramp must be firm and stable. 3. The surface of the ramp must be slip resistant. 4. The ramp must have a maximum running slope of no more than 1:15. 5. The ramp must be provided with landings that meet the following requirements: <ol style="list-style-type: none"> (i) Landings must be provided, <ol style="list-style-type: none"> A. at the top and bottom of the ramp, B. where there is an abrupt change in direction of the ramp, and C. at horizontal intervals not greater than nine metres apart. (ii) Landings must be a minimum of 1,670 mm by 1,670 mm at the top and bottom of the ramp and where there is an abrupt change in direction of the ramp. (iii) Landings must be a minimum of 1,670 mm in length and at least the same width of the ramp for an in-line ramp. (iv) Landings must have a cross slope that is not steeper than 1:50. 6. Where a ramp has openings in its surface, <ol style="list-style-type: none"> (i) the openings must not allow passage of an object that has a diameter of more than 20 mm, and (ii) any elongated openings must be oriented approximately perpendicular to the direction of travel. 	<p>SAH's exterior pathways currently meet the requirements for accessibility.</p> <p>SAH's exterior pathways currently meet the requirements for accessibility.</p>

		<p>7. A ramp must be equipped with handrails on both sides of the ramp and the handrails must,</p> <ul style="list-style-type: none"> (i) be continuously graspable along their entire length and have circular cross-section with an outside diameter not less than 30 mm and not more than 40 mm, or any non-circular shape with a graspable portion that has a perimeter not less than 100 mm and not more than 155 mm and whose largest cross-sectional dimension is not more than 57 mm, (ii) be not less than 865 mm and not more than 965 mm high, measured vertically from the surface of the ramp, except that handrails not meeting these requirements are permitted provided they are installed in addition to the required handrail, (iii) terminate in a manner that will not obstruct pedestrian travel or create a hazard, (iv) extend horizontally not less than 300 mm beyond the top and bottom of the ramp, (v) be provided with a clearance of not less than 50 mm between the handrail and any wall to which it is attached, and (vi) be designed and constructed such that handrails and their supports will withstand the loading values obtained from the non-concurrent application of a concentrated load not less than 0.9 kN applied at any point and in any direction for all handrails and a uniform load not less than 0.7 kN/metre applied in any direction to the handrail. <p>8. Where the ramp is more than 2,200 mm in width,</p> <ul style="list-style-type: none"> (i) one or more intermediate handrails which are continuous between landings shall be provided and located so that there is no more than 1,650 mm between handrails, and 	<p>SAH's exterior pathways currently meet the requirements for accessibility.</p>
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		<p>(ii) the handrails must meet the requirements set out in paragraph 7.</p> <p>9. The ramp must have a wall or guard on both sides and where a guard is provided, it must,</p> <p>(i) be not less than 1,070 mm measured vertically to the top of the guard from the ramp surface, and</p> <p>(ii) be designed so that no member, attachment or opening located between 140 mm and 900 mm above the ramp surface being protected by the guard will facilitate climbing.</p> <p>10. The ramp must have edge protection that is provided,</p> <p>(i) with a curb at least 50 mm high on any side of the ramp where no solid enclosure or solid guard is provided, or</p> <p>(ii) with railings or other barriers that extend to within 50 mm of the finished ramp surface.</p>	<p>SAH's exterior pathways currently meet the requirements for accessibility.</p>
<p>Exterior Paths of Travel, Stairs – s. 80.25</p>	<p>Jan 1, 2016</p>	<p>Where stairs connect to exterior paths of travel, the stairs must meet the following requirements:</p> <ol style="list-style-type: none"> 1. The surface of the treads must have a finish that is slip resistant. 2. Stairs must have uniform risers and runs in any one flight. 3. The rise between successive treads must be between 125 mm and 180 mm. 4. The run between successive steps must be between 280 mm and 355 mm. 5. Stairs must have closed risers. 6. The maximum nosing projection on a tread must be no more than 38 mm, with no abrupt undersides. 7. Stairs must have high tonal contrast markings that extend the full tread width of the leading edge of each step. 8. Stairs must be equipped with tactile walking surface indicators that are built in or applied to the 	<p>Review of pedestrian signage has been identified as a project to watch for opportunities in the future. Currently, the pedestrian signage is not being redone, but Facilities will work with the Accessibility Committee if there was to be a change where signals can be added.</p> <p>N/A</p>

		<p>walking surface, and the tactile walking surface indicators must,</p> <ul style="list-style-type: none"> (i) have raised tactile profiles, (ii) have a high tonal contrast with the adjacent surface, (iii) be located at the top of all flights of stairs, and (iv) extend the full tread width to a minimum depth of 610 mm commencing one tread depth from the edge of the stair. <p>9. Handrails must be included on both sides of stairs and must satisfy the requirements set out in paragraph 7 of subsection 80.24 (1).</p> <p>10. A guard must be provided that is not less than 920 mm, measured vertically to the top of the guard from a line drawn through the outside edges of the stair nosings and 1,070 mm around the landings and is required on each side of a stairway where the difference in elevation between ground level and the top of the stair is more than 600 mm but, where there is a wall, a guard is not required on that side.</p> <p>11. Where stairs are more than 2,200 mm in width,</p> <ul style="list-style-type: none"> (i) one or more intermediate handrails that are continuous between landings must be provided and located so there is no more than 1,650 mm between handrails, and (ii) the handrails must satisfy the requirements set out in paragraph 7 of subsection 80.24 (1) 	<p>N/A</p> <p>Completed. Repainting was done in 19/20.</p> <p>SAH currently has accessibility aisles, but the Accessibility Committee is reviewing further signage to restrict parking in aisles when snow covers the lines. Access aisles in accessible parking spots are shared by two parking spaces.</p> <p>As part of the 2018 Accessibility planned activities, there was a review will of the potential of addition of pedestrian signals at pedestrian crossover walks in the event of future reconstruction of crosswalks.</p>
<p>Exterior Paths of Travel, Curb Ramps – s. 80.26(1)</p>	<p>Jan 1, 2016</p>	<p>Where a curb ramp is provided on an exterior path of travel, the curb ramp must align with the direction of travel and meet the following requirements:</p> <ul style="list-style-type: none"> 1. The curb ramp must have a minimum clear width of 1,200 mm, exclusive of any flared sides. 2. The running slope of the curb ramp must, 	

		<p>(i) be a maximum of 1:8, where elevation is less than 75 mm, and</p> <p>(ii) be a maximum of 1:10, where elevation is 75 mm or greater and 200 mm or less.</p> <p>3. The maximum cross slope of the curb ramp must be no more than 1:50.</p> <p>4. The maximum slope on the flared side of the curb ramp must be no more than 1:10.</p> <p>5. Where the curb ramp is provided at a pedestrian crossing, it must have tactile walking surface indicators that,</p> <p>(i) have raised tactile profiles,</p> <p>(ii) have a high tonal contrast with the adjacent surface,</p> <p>(iii) are located at the bottom of the curb ramp,</p> <p>(iv) are set back between 150 mm and 200 mm from the curb edge,</p> <p>(v) extend the full width of the curb ramp, and</p> <p>(vi) are a minimum of 610 mm in depth.</p>	<p>SAH is compliant with the number of accessible parking spaces available.</p> <p>No redevelopment is occurring at this time. SAH is currently compliant.</p>
<p>Exterior Paths of Travel, Depressed Curbs – s. 80.27(1)</p>	<p>Jan 1, 2016</p>	<p>Where a depressed curb is provided on an exterior path of travel, the depressed curb must meet the following requirements:</p> <p>1. The depressed curb must have a maximum running slope of 1:20.</p> <p>2. The depressed curb must be aligned with the direction of travel.</p> <p>3. Where the depressed curb is provided at a pedestrian crossing, it must have tactile walking surface indicators that,</p> <p>(i) have raised tactile profiles,</p> <p>(ii) have high tonal contrast with the adjacent surface,</p> <p>(iii) are located at the bottom portion of the depressed curb that is flush with the roadway,</p>	<p>The Accessibility Committee reviews opportunities for future recommendations annually.</p> <p>SAH is currently compliant with signage requirements.</p> <p>No construction or redevelopment is happening at this time.</p>

		(iv) are set back between 150 mm and 200 mm from the curb edge, and (v) are a minimum of 610 mm in depth.	<p>No new service counters are being constructed at this time.</p> <p>As SAH is a relatively new building, we meet the standards for service counters.</p> <p>All redevelopments are ensured to meet these standards.</p> <p>No new fixed queuing guides are being constructed at this time.</p> <p>No new constructing is being undertaken.</p> <p>Accessibility – Administrative Policy 1.1.</p>
Exterior Paths of Travel, Accessible Pedestrian Signals – s. 80.28(1)	Jan 1, 2016	Where new pedestrian signals are being installed or existing pedestrian signals are being replaced at a pedestrian crossover, they must be accessible pedestrian signals.	
Exterior Paths of Travel, Accessible Pedestrian Signals – s. 80.28(2)	Jan 1, 2016	<p>Accessible pedestrian signals must meet the following requirements:</p> <ol style="list-style-type: none"> 1. They must have a locator tone that is distinct from a walk indicator tone. 2. They must be installed within 1,500 mm of the edge of the curb. 3. They must be mounted at a maximum of 1,100 mm above ground level. 4. They must have tactile arrows that align with the direction of crossing. 5. They must include both manual and automatic activation features. 6. They must include both audible and vibro-tactile walk indicators. 	
Exterior Paths of Travel, Accessible Pedestrian Signals – s. 80.28(3)	Jan 1, 2016	Where two accessible pedestrian signal assemblies are installed on the same corner, they must be a minimum of 3,000 mm apart.	
Exterior Paths of Travel, Accessible Pedestrian Signals – s. 80.28(4)	Jan 1, 2016	Where the requirements in subsection (3) cannot be met because of site constraints or existing infrastructure, two accessible pedestrian signal assemblies can be installed on a single post, and when this occurs, a verbal announcement must clearly state which crossing is active.	
Exterior Paths of Travel, Rest Areas – s. 80.29	Jan 1, 2016	When constructing new or redeveloping existing exterior paths of travel that they intend to maintain, obligated organizations, other than small organizations, shall consult on the design and placement of rest areas along the exterior path of travel and shall do so in the following manner:	

		<p>1. The Government of Ontario, the Legislative Assembly, designated public sector organizations and large organizations must consult with the public and persons with disabilities.</p>	
Types of Accessible Parking Spaces – s. 80.34	Jan 1, 2016	<p>Off-street parking facilities must provide the following two types of parking spaces for the use of persons with disabilities:</p> <ol style="list-style-type: none"> 1. Type A, a wider parking space which has a minimum width of 3,400 mm and signage that identifies the space as “van accessible”. 2. Type B, a standard parking space which has a minimum width of 2,400 mm. 	
Access Aisles – s. 80.35(1)	Jan 1, 2016	<p>Access aisles that are the space between parking spaces that allows persons with disabilities to get in and out of their vehicles, must be provided for all parking spaces for the use of persons with disabilities in off-street parking facilities.</p>	
Access Aisles – s. 80.35(2)	Jan 1, 2016	<p>Access aisles may be shared by two parking spaces for the use of persons with disabilities in an off-street parking facility and must meet the following requirements:</p> <ol style="list-style-type: none"> 1. They must have a minimum width of 1,500 mm. 2. They must extend the full length of the parking space. 3. They must be marked with high tonal contrast diagonal lines, which discourages parking in them, where the surface is asphalt, concrete or some other hard surface. 	
Minimum Number and Type of Accessible Parking Spaces – s.80.36(1)	Jan 1, 2016	<p>Off-street parking facilities must have a minimum number of parking spaces for the use of persons with disabilities, in accordance with the following requirements:</p> <ol style="list-style-type: none"> 1. One parking space for the use of persons with disabilities, which meets the requirements of a Type A parking space, where there are 12 parking spaces or fewer. 2. Four per cent of the total number of parking spaces for the use of 	

		<p>persons with disabilities, where there are between 13 and 100 parking spaces in accordance with the following ratio, rounding up to the nearest whole number:</p> <p>(i) Where an even number of parking spaces for the use of persons with disabilities are provided in accordance with the requirements of this paragraph, an equal number of parking spaces that meet the requirements of a Type A parking space and a Type B parking space must be provided.</p> <p>(ii) Where an odd number of parking spaces for the use of persons with disabilities are provided in accordance with the requirements of this paragraph, the number of parking spaces must be divided equally between parking spaces that meet the requirements of a Type A parking space and a Type B parking space, but the additional parking space, the odd-numbered space, may be a Type B parking space.</p> <p>3. One parking space for the use of persons with disabilities and an additional three per cent of parking spaces for the use of persons with disabilities, where there are between 101 and 200 parking spaces must be parking spaces for the use of persons with disabilities, calculated in accordance with ratios set out in subparagraphs 2 i and ii, rounding up to the nearest whole number.</p> <p>4. Two parking spaces for the use of persons with disabilities and an additional two per cent of parking spaces for the use of persons with disabilities, where there are between 201 and 1,000 parking spaces must be parking spaces for the use of persons with disabilities in accordance with the ratio in subparagraphs 2 i and ii, rounding up to the nearest whole number.</p> <p>5. Eleven parking spaces for the use of persons with disabilities and an additional one per cent of parking spaces for the use of persons with disabilities, where more than 1,000</p>	
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		parking spaces are provided must be parking spaces for the use of persons with disabilities in accordance with the ratio in subparagraphs 2 i and ii, rounding up to the nearest whole number.	
Minimum Number and Type of Accessible Parking Spaces – s.80.36(2)	Jan 1, 2016	If an obligated organization provides more than one off-street parking facility at a site, the obligated organization shall calculate the number and type of parking spaces for the use of persons with disabilities according to the number and type of parking spaces required for each off-street parking facility.	
Minimum Number and Type of Accessible Parking Spaces – s.80.36(3)	Jan 1, 2016	In determining the location of parking spaces for the use of persons with disabilities that must be provided where there is more than one off-street parking facility at a site, an obligated organization may distribute them among the off-street parking facilities in a manner that provides substantially equivalent or greater accessibility in terms of distance from an accessible entrance or user convenience.	
Minimum Number and Type of Accessible Parking Spaces – s.80.36(4)	Jan 1, 2016	For the purposes of subsection (3), the following factors may be considered in determining user convenience: <ol style="list-style-type: none"> 1. Protection from the weather. 2. Security. 3. Lighting. 4. Comparative maintenance. 	
Signage – s. 80.37	Jan 1, 2016	Obligated organizations shall ensure that parking spaces for the use of persons with disabilities as required under section 80.36 are distinctly indicated by erecting an accessible permit parking sign in accordance with section 11 of Regulation 581 of the Revised Regulations of Ontario, 1990 (Accessible Parking for Persons with Disabilities) made under the Highway Traffic Act .	
On-Street Parking Spaces – s. 80.39(1)	Jan 1, 2016	When constructing or redeveloping existing on-street parking spaces, designated public sector organizations shall consult on the need, location and design of	

		<p>accessible on-street parking spaces and shall do so in the following manner:</p> <ol style="list-style-type: none"> 1. Designated public sector organizations must consult with the public and persons with disabilities. 2. Municipalities must also consult with their municipal accessibility advisory committees, where one has been established in accordance with subsection 29 (1) or (2) of the Act. 	
Service Counters – s. 80.41(1)	Jan 1, 2016	<p>When constructing new service counters, which includes replacing existing service counters, the following requirements must be met:</p> <ol style="list-style-type: none"> 1. There must be at a minimum one service counter that accommodates a mobility aid for each type of service provided and the accessible service counter must be clearly identified with signage, where there are multiple queuing lines and service counters. 2. Each service counter must accommodate a mobility aid, where a single queuing line serves a single or multiple counters. 	
Service Counters – s. 80.41(2)	Jan 1, 2016	<p>The service counter that accommodates mobility aids must meet the following requirements:</p> <ol style="list-style-type: none"> 1. The countertop height must be such that it is usable by a person seated in a mobility aid. 2. There must be sufficient knee clearance for a person seated in a mobility aid, where a forward approach to the counter is required. 3. The floor space in front of the counter must be sufficiently clear so as to accommodate a mobility aid. 	
Fixed Queuing Guides – s. 80.42	Jan 1, 2016	<p>When constructing new fixed queuing guides, the following requirements must be met:</p> <ol style="list-style-type: none"> 1. The fixed queuing guides must provide sufficient width to allow for the passage of mobility aids and mobility assistive devices. 2. The fixed queuing guides must have sufficiently clear floor area to 	

		<p>permit mobility aids to turn where queuing lines change direction.</p> <p>3. The fixed queuing guides must be cane detectable.</p>	
Waiting Areas – s. 80.43(1)	Jan 1, 2016	When constructing a new waiting area or redeveloping an existing waiting area, where the seating is fixed to the floor, a minimum of three per cent of the new seating must be accessible, but in no case shall there be fewer than one accessible seating space.	
Maintenance of Accessible Elements – s. 80.44	Jan 1, 2016	<p>In addition to the accessibility plan requirements set out in section 4, obligated organizations, other than small organizations, shall ensure that their multi-year accessibility plans include the following:</p> <ol style="list-style-type: none"> 1. Procedures for preventative and emergency maintenance of the accessible elements in public spaces as required under this Part. 2. Procedures for dealing with temporary disruptions when accessible elements required under this Part are not in working order. 	