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## **Vision**

**Health and well-being for all**

## **Mission**

**Empower the health and well-being of the people in our communities – together**

## **Core Values**

- **People-centred:** Individuals are empowered to be in control of their health
- **Respect and Inclusion:** Every one matters
- **Compassionate care:** For the whole person – physical, mental and social well-being
- **Interconnectedness:** Building connections at all levels to provide comprehensive care
- **Integrity and Responsibility:** Accountable for what we say and do

## 1. Purpose

The purpose of the Ontarians with Disabilities Act 2001 (ODA), now the Accessibility for Ontarians with Disabilities Act 2005 (AODA), is to improve opportunities for people with disabilities and provide for their involvement in the identification, removal and prevention of barriers in the province of Ontario. To this end, the AODA mandates that each not-for profit organization prepares an annual Accessibility Plan.

With the introduction of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the subsequent Integrated Accessibility Standards regulations (O. Reg. 197/11); the requirement to create, maintain and communicate a multi-year Accessibility Plan replaced the annual plan requirement. This document is the multi-year Accessibility Plan for the Grand Bend Area Community Health Centre (GBACHC; the Centre). The plan builds on previous years plans and includes measures that the GBACHC will take in the upcoming years to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of the GBACHC. The plan will be reviewed annually and updated as barriers are identified and/or eliminated.

GBACHC is committed to:

- The continual improvement of access to centre facilities, policies, programs, practices and services for clients, their family members, staff and volunteers
- The participation of persons with disabilities in the development and review of its annual plan
- The provision of quality services to all clients, their family members and members of the community with disabilities
- Within the AODA there are five areas that have been identified as targets for improvement in accessibility. These areas are:

### **Customer Service**

The provision of service to the public and training of employees in accessibility

### **Information and Communication**

Communication to the public of information through uses of print, electronic devices, telephone or in person to ensure accessible information no matter the disability

### **Employment**

Ensuring equal opportunities for hiring and retaining employees and providing all required measures to ensure equality during employment

### **Transportation**

Transportation methods to accommodate persons with disabilities, and equality and access and fees

### **The Built Environment**

Accessibility is provided to the physical environment, including ramps, hand rails and automatic doors

## **2. Aim and Objectives of the Plan**

This report describes:

- a. The measures that the Centre has taken in the past and,
- b. The measures that the Centre will take during the next fiscal year to identify, remove and prevent barriers to people with disabilities who use the facilities and services of the Centre, including clients, visitors, staff and other members of the community.

With respect to identifying, removing and preventing barriers for people with disabilities, this report:

- a. Describes the process
- b. Reviews efforts to date

- c. Describes the measures taken in the current year
- d. Describes how this plan will be made available to the public

### 3. Definitions

**Barrier:** Anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an informational or communication barrier, an attitudinal barrier, technological barrier, a policy or a practice

**Disability:**

- 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, 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 remedial appliance or device.
- b. A condition of mental impairment or a development 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

**Service Animal:**

An animal described in subsection 4(9) of the Accessibility Standards for Customer Service. 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 persons 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

**Guide Dog:**

Guide dog is defined in section 1 of the Blind Persons' Rights Act and means a dog trained as a guide dog for a blind person and having the qualifications prescribed by the regulation.

**Support Person:**

In relation to a person with a disability, another person who accompanies him or her in order to help with communication, mobility, personal care or medical needs or with access to goods and services.

**Accessible Formats:**

May include but are not limited to large print, recorded audio and electronic formats, Braille and other formats usable by persons with disabilities.

**Communication Supports:**

May include but are not limited to captioning, alternative and augmentative communication supports, plain language, sign language and other supports that facilitate effective communications.

**AODA Coordinator:**

Refers to the person appointed by GBACHC to carry out the duties set out under AODA.

**Requirements under the AODA 429/07 Customer Service regulation**

The Act requires that we:

1. Implement policies, practices and procedures on providing goods and services to people with disabilities.
2. Ensure centre policies, practices and procedures are in line with the core principles of independence, dignity, integration and equality of opportunity.
3. Execute a policy on allowing people to use their own personal assistive devices to access goods and services, and provide information about any other means offered by the centre (assistive devices, services etc.) to allow them access to goods and services.
4. Communicate with a person having a disability in a manner that takes into account his or her disability.

5. Allow people with disabilities to be accompanied by their guide dog, service animal or support person in areas of the premises unless the animal or person is restricted for health reasons or by law.
6. Train staff, volunteers, contractors and other people that interact with the public or other third parties on the centre's behalf on the topics outlined in the customer service standard, and record all training including the dates the training occurred and names of the individuals trained.
7. Train staff and any other people involved in developing centre policies, practices and procedures on the requirements regarding goods or services as outlined in the customer service standard.
8. Provide information on any admission fees that may be charged for a support person, with as much advance notice as possible.
9. Provide notice when services, goods or facilities used by people with disabilities are temporarily disrupted.
10. Establish a process for people to provide feedback on the centre's method of providing goods and services to people with disabilities and how you will respond to any feedback, and take action on any complaints, ensuring information about how the centre will provide feedback should be readily available to the public.
11. All policies, practices and procedures that govern accessible customer service and associated requirements must be documented.
12. Provide notice to customers that documents required under the customer service standard are available upon request.
13. Ensure the documents required under the customer service standards are available when requested, by a person with a disability, in a format that takes into account the person's disability.

During the period of the 2012-2017 Multi-Year Plan, a number of new regulations will come into effect. All of the 6 key chapters contain new requirements in the following areas: Customer Service, Communications and Information, Employment, Built Environment, Transportation, and General Requirements.

The new compliance criteria include requirements to:

- Develop and post a multi-year accessibility plan outlining strategies to prevent and remove barriers. At least once every 5 years (section 4.1.c), the plan is to be reviewed in consultation with persons with disabilities. Annual status reports are also to be posted.
- Incorporate accessibility design, criteria and features when procuring or acquiring goods, services or facilities
- Complete Accessibility Reporting with the first report due December 31, 2013.
- Then reporting is done every other year thereafter (section 86.1)

#### **4. Description of the Organization**

The Grand Bend Area Community Health Centre is a non-profit community governed organization that provides comprehensive primary medical care for our enrolled clients. Our health promotion strategies utilize multidisciplinary teams of health providers and are available to clients as well as everyone in the community.

The centre's two sites work in collaboration with the Southwest and Erie-St. Clair Local Health Integration Networks along with various agencies and services within the counties of Lambton and Huron. Our ongoing partnership with South Huron Hospital Association enables us to seek out and provide the best care for our clients/patients along with programming for the surrounding communities.

Grand Bend Area Community Health Centre has two facilities.

- Grand Bend
- Hensall

The geographic area served by the Grand Bend Area Community Health Centre lies at the junction of the Counties of Huron, Lambton, and Middlesex, and consists of parts of the new municipalities of Bluewater, Lambton Shores, and South Huron. It is bounded by the Ausable Cut on the south, the Village of Crediton on the east, Highway 84 on the north, and Lake Huron to the west.

The Grand Bend Area Community Health Centre provides primary health care services to the individuals who reside or do business in:



- Grand Bend (NOM 1T0)
- Hensall (NOM 1X0)

and to individuals in other communities who have previously established relationships with the Centre's medical staff or have no other access to primary medical services. Such as:

- Crediton (NOM 1M0)
- Dashwood (NOM 1N0)
- Kippen (NOM 2E0)
- Port Franks (NOM 2L0)

The GBACHC coordinates its health promotion activities with other community agencies, especially the North Lambton Community Health Centre for services in Port Franks and the southern portion of the area.

The centre employs greater than fifty (50) employees.

## **5. Accessibility Committee**

Accessibility Working Group/ AODA team (Joint Health & Safety Committee)

The Centre Joint Health & Safety Committee (JHSC) is responsible for reviewing and updating the GBACHC Accessibility Plan annually and reviewing updates to the AODA 2005 on an ongoing basis. The JHSC consists of employees from various Centre departments and management representation. The Committee meets quarterly to discuss and monitor issues to be addressed for the next fiscal year.

The Accessibility Coordinator endorses the plan with the Centre Executive Director.

## **6. Commitment to Accessibility**

The Centre is committed to excellence in serving all customers, including people with disabilities, and will carry out functions and responsibilities in the following areas as required under Bill 103, Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the Integrated Accessibility Standards Regulation (IASR). It is the policy of the centre to strive, at all times, to provide goods and services in a way that respects the dignity and independence of people with disabilities. The centre is also committed to giving people with disabilities the same opportunity to access our

goods and services, allowing them to benefit from the same services, in the same place and in a similar way as other customers. In order to do so, the centre will address the specific needs of all persons with disabilities in a timely manner.

The centre will establish policies, practices and procedures on eliminating barriers and providing services and supports to people with disabilities. These will be consistent with the core principles of independence, dignity, integration and equality of opportunity.

Documentation that describes this policy and each of its requirements shall be maintained on the centre website and provided to individuals upon request in the appropriate format or with communication support.

The Centre will produce an annual Accessibility Plan, in consultation with persons with disabilities. The plan will be posted on the Centre's website and shall be made available in an accessible format and with communication supports, upon request. Progress on the plan will be provided on the schedule determined by the AODA legislation.

The Centre maintains and develops policies on how the centre will meet its requirements under the AODA and will provide such policies in an accessible format upon request

When procuring goods, services or facilities, the Centre will incorporate accessibility criteria and features, unless it is not feasible (practicable). If not practicable, the centre shall provide an explanation, upon request.

## 7. Barrier Identification Methodologies

The following barrier identification methodologies are used to create the list of barriers to be addressed:

- AODA Customer Service Standards
- AODA Integrated Accessibility Standards
- Suggestions and comments from staff, visitors, patients and the public regarding the way the centre provides goods and services to people with disabilities can be made by:
  - In writing attention to: GBACHC Accessibility Coordinator
  - By email to: [kkillens@gbchc.com](mailto:kkillens@gbchc.com)
  - By phone: 519-238-1556 ext 276
  - In person: GBACHC Accessibility Coordinator

- Or by using other methods as agreed upon between the individual and the centre.
- The participation of people with disabilities in the development and review of its annual Accessibility Plan.
- Awareness of the current Building Code and improvements for accessibility will be implemented during any reconstruction where feasible.

### **List of Barriers To Consider**

- Physical
- Hearing
- Speech
- Vision
- Deaf-Blind
- Intellectual
- Mental Health
- Language

### **Assistive Devices and Supports**

As part of the Centre's Accessibility Plan, it is important for the public to know that there are various assistive devices and supports that are encouraged while visiting the centre. These include:

- Assistive devices such as wheelchairs, crutches and canes and oxygen tanks
- Support persons
- Service animals such as guide, hearing or special skills animals

Policies outlining the use of such devices and supports are available upon request to the Accessibility Coordinator and on the Centre website – [www.gbachc.ca](http://www.gbachc.ca). Contact information is listed at the end of this document.

## **8. Review and Monitoring Process**

The Accessibility Coordinator or delegate will work with the JHSC Committee and management to:

- Review and revise the annual Accessibility Plan
- Respond to issues that require attention and review progress
- Review, revise and implement Accessibility policies and procedures

## **9. Communication of the Plan**

The GBACHC Accessibility Plan will be made available on the GBACHC website ([www.gbachc.ca](http://www.gbachc.ca)) and copies will be made from the Administrative office. On request, the report will be made available in alternate formats.

## 10. Work Plan

| Barrier                             | Objective  | Means to Remove/Prevent   | Performance Criteria                                | Responsibility   |
|-------------------------------------|--|---|---|--|
| Employment Practices                |  | Add Equal Opportunity statement to job postings and career section of GBACHC website                              | Completed-2017                                      | HR Manager/Accessibility Coordinator/IT                  |
| Parking                             |  | Addition of handicap/limited mobility parking spaces and signage – both sites                                     | Completed   | Health Promotion/Maintenance                             |
| Access to GBACHC Goods and Services |  | Installation of electronic wheelchair accessible doors at both sites<br>Install electronic door at staff entrance | Completed<br><br>Funding dependant – ongoing review | Health Promotion/Maintenance                             |
| Assistive Devices                   | Ensure Access to assistive devices on site if needed | Wheelchairs kept in front foyer for public use  | Complete – 2011                                     | Accessibility Coordinator/Director Primary Care Services |
| Communication                       |  | Accessibility Plan posted to website  | Completed-2009                                      | IT/Accessibility Coordinator                             |
| Customer Service                    |  | Training of all staff, students and volunteers in order to be compliant with AODA customer service standard       | Completed - 2009                                    | Accessibility Coordinator                                |
|                                     |  | Development and Approval of policies as related to AODA customer service  | Completed - 2009                                    | Accessibility Coordinator                                |

|  |  |  |   |         |
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|  |  | standard requirements  |   |         |
| GBACHC Website updates                                   |  | Prepare for fully accessible website; run compliancy test    | Review of current website to determine steps to ensure that it will be compliant with WCAG 2.0 Level AA | By 2021 |
| Aide visually impaired persons with elevator operation   |  | Voice annunciation for passenger elevator                    |   |         |
| Way finding  |  | Improve way finding for persons with disabilities            | Additional signage; include braille on signage  |         |
| Improve service Desk                                     |  | Create wheelchair accessible service desk                    |   |         |
| Improve access to building for staff/volunteers/students |  | Staff entrance wide enough for wheelchair; is not electronic | Install electronic door at staff entrance   |         |

## Integrated Accessibility Standards Compliance Plan

| Year        | IASR Requirement   | Responsibility  | Status                             |
|-------------|--|---|------------------------------------|
| 2017 - 2021 | Implementation of the Integrated Accessibility Standards Regulation (Ont. Reg. 191-11)- January 2021 Information and Communication Standard<br>*Accessible websites and web content  | IT/Director Support Services  |                                    |
| 2015 -2016  | Implementation of the IASR (Ont. Reg. 191-11) – January 2016 Design of Public Spaces Standards<br>• No renovations or new build planned  |   | Complete                           |
| 2014 - 2015 | Implementation of the IASR (Ont. Reg. 191-11) – January 2015 Information and Communication Standard<br>• Accessible formats and communication supports – the Centre will provide accessible formats and communication supports as quickly as possible and at no additional cost when a person with a disability asks for them          | All staff, volunteers of GBACHC   | Complete                           |
| 2013 - 2014 | Implementation of the IASR (Ont. Reg. 191-11) – January 2014<br>Training: All CHC staff, students and volunteers are required to complete Accessibility training upon hire/volunteering<br>Accessible feedback process: Staff, visitors, patients and the public are encouraged to provide feedback by mail, email, phone or in person | Accessibility Coord.<br><br>Accessibility Coord.<br><br>IT/ Director SS | January 2014 Requirements complete |

|             |  |                                   |                                    |
|-------------|--|-----------------------------------|------------------------------------|
|             | <p>New websites and web content:<br/>Upon creation of a new GBACHC website, the Centre will ensure software that supports WCAG 2.0 requirements are met</p> <p>Accessible employment practices:<br/>Stated in all job postings/ interview set up that recruitment and hiring processes will be modified to accommodate disabilities, if requested.</p> | HR/Accessibility                  |                                    |
| 2012 - 2013 | <p>Implementation of the IASR (Ont. Reg. 191-11) – January 2013</p> <ul style="list-style-type: none"> <li>• Accessibility Policies and Plans</li> <li>• Accessible procurement, including kiosks</li> </ul>   | Accessibility<br>Coord/Finance/ED | January 2013 requirements complete |