



# Accessibility Plan Compliance, Maintenance, & Improvement

## General Requirements

### Establishment of Accessibility Policies

The requirement to develop, implement, and maintain policies governing how NLCHC achieves accessibility has been met through “Quality Client Experience Policy 105: Providing Customer Service to People with Disabilities.” This policy contains NLCHC’s statement of commitment to meet the accessibility needs of persons with disabilities.

Our “Accessible Customer Service” tri-fold brochure contains a section outlining documentation available upon request. This brochure is available at all sites, available on NLCHC’s website, and is part of the Meet and Greet package of information provided to all primary care clients. If this documentation is requested to be provided in an accessible format, NLCHC will work with the requesting person to determine which accessible format is required and will do its best to provide the information in a timely manner.

### Accessibility Plans

NLCHC’s multi-year Accessibility Plan began in 2011. The Plan has been regularly updated, ensuring NLCHC’s compliance to meeting the requirements of the AODA. The NLCHC has registered its compliance with the Accessibility Directorate of Ontario. The Plan is posted on NLCHC’s website and is listed as a document available upon request.

The format of the Plan has changed from identifying what NLCHC would do for each specific regulation within the compliance dates, to what is now in place as all requirements have been met. The Plan will be reviewed at least once every five years to ensure continued compliance and to update it with any changes to how NLCHC prevents and removes barriers for all who access its services.

### Training

All staff, students, and volunteers receive training on the requirements of the accessibility standards referred to in the AODA and the Human Rights Code as it pertains to persons with disabilities. This training is provided through NLCHC’s orientation process when the staff, student, or volunteer begins their relationship with NLCHC. All training is recorded in NLCHC’s staff training database and/or volunteer files. All staff are required to review policies on an annual basis. Changes to policies, as they arise, are brought forward for review at staff and volunteer meetings. NLCHC policies are reviewed by Management and the Board of Directors on a three-year rotating schedule.

## **Part II – Information & Communication Standards**

### **Feedback**

The NLCHC's Quality Client Experience Policy 101: Feedback outlines multiple ways feedback can be provided and how NLCHC will use and/or respond to such feedback. Quality Client Experience Policy 103: Client Rights and Responsibilities includes the right for a client to make a complaint.

Training regarding feedback is provided to staff, students, and volunteers during their initial orientation, while the "how to provide feedback" discussion for clients happens during the Meet & Greet process. How to provide feedback information is provided in the "Accessible Customer Service" tri-fold brochure, on posters in all waiting rooms, and on our website. Annual client and program participant surveys include accessibility questions and provide another source of feedback for the Centre.

### **Accessible Formats & Communication Supports**

The commitment to support all NLCHC clients and program participants is stated repeatedly in current policies and is an integral part of the CHC model of care. Health care providers consult with clients every visit and will assist when a need for an accessible format or communication supports is identified. All staff and volunteers are trained to respond to and/or report all needs arising from program participants to ensure full participation. Any costs resulting from NLCHC using alternate forms of communication are the responsibility of NLCHC and are not transferred to the client or program participant. NLCHC's "Accessible Customer Service" tri-fold brochure discusses communication and NLCHC's commitment to ensure communication happens in any manner that best suits a person's needs.

### **Accessible Websites & Web Content**

Recent updates to NLCHC's website include recognizable options for alternate formats of communication. A written statement from the website designer confirms compliance to World Wide Web Consortium Web Content Accessibility Guidelines (WCAG) 2.0 at Level AA.

## **Part III – Employment Standards**

### **Recruitment**

Availability of accommodation for applicants with disabilities is included in job postings and during initial contact with any applicant. The opportunity for discussion of needs for suitable accommodations happens during initial and subsequent communication with a job applicant. Reading and understanding NLCHC's Human Resources policies, which includes policy on "Workplace Accommodation on the Basis of Disability," is part of Orientation and are reviewed annually by staff. The confirmation of the annual review of policies includes the question of whether NLCHC needs to be aware of any workplace accommodations due to disability and/or if discussion for clarification of any changes in these accommodations are needed.

### **Accessible Formats & Communication Supports for Employees**

Employees are provided the opportunity to report/discuss any needs for workplace accommodations, including accessible formats and communication supports, during orientation, subsequent performance reviews, and through the annual review of policies question noted above.

### **Workplace Emergency Response Information**

During the safety component of staff orientation, all new staff are asked if NLCHC needs to be aware of any possible reason for which a workplace emergency response plan may need to be developed. Subsequent individualized workplace emergency response information is determined when an employee identifies the need for such information.

When a workplace emergency response plan is developed, the plan is shared, with the employee's consent, with others who could be involved in providing the identified assistance. NLCHC staff frequently work at different sites. Individualized workplace emergency response plans would be developed to include the various sites the staff member may be working in. NLCHC's Emergency & Disaster Guidelines are considered in the development of individualized plans.

### **Documented Individual Accommodation Plans**

NLCHC has policy regarding "Workplace Accommodation on the Basis of Disability," which includes a written procedure on how an individual accommodation plan for any staff needing an accommodation would be developed. This policy includes written procedures outlining the duties and responsibilities of both NLCHC and the employee to address requests for accommodations and the development of the subsequent accommodation plan. All accommodation plans are specific to the person for whom it is being developed.

NLCHC can obtain expert opinion or advice where needed and the costs for any required medical information or documentation would be paid for by NLCHC.

A staff member is entitled to bring a support person to attend discussions pertaining to the development of an accommodation plan, and such person would be bound to the same confidentiality disclosure restrictions as NLCHC and the staff member. All requests for accommodation as well as any supporting documentation provided in support of a modified work plan will be held in complete confidence and only shared with those parties involved with the accommodation, with the prior full consent of the staff member.

Permanent workplace accommodations will be reviewed not less than annually. Temporary modified work plans will be reviewed not less than weekly. Regular reviews and open dialogue with staff provide the opportunity to share information on what accommodations can be supported by NLCHC and which cannot, including the reasons why any accommodation may not be able to be supported. All information would be provided in a format that takes into account the staff member's needs due to disability.

### **Return to Work Process**

NLCHC has policy regarding "Early and Safe Return to Work" for staff who have been absent from work due to a disability and require disability-related accommodations in order to return to work. NLCHC is responsible for taking and maintaining the minutes of meetings, documenting the discussions; including accomplishments, set-backs, barriers, adjustments, timetables, etc. The return to work process does not replace or override any other return to work process created by or under any other statute.

### **Performance Management**

NLCHC has policy regarding performance management and under its procedures states we will 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.

### **Career Development and Advancement**

NLCHC has policy regarding staff training and development which references the need to take into account the accessibility needs of its staff with disabilities as well as any individual accommodations plans when providing opportunities for staff to obtain NLCHC mandatory training. For non-mandatory training, individual staff generally make their own arrangements to attend. If requested, the NLCHC will support and advocate on behalf of its staff to ensure any accessibility needs are accommodated, enabling the staff member to attend and participate in the training.

Advancement within NLCHC includes discussion with the staff member involved. This discussion provides the opportunity to review any existing accommodations, or to identify any changes or new accommodations needed, and how such accommodations would transfer to the staff member's new position.

### **Redeployment**

NLCHC staff may be seconded to work for another agency. When secondment occurs, the written agreement includes the requirement to respect all aspects of the AODA on behalf of the seconded staff member.

## **Part IV – Transportation Standards (not applicable to NLCHC)**

### **Part IV.1 – Design of Public Spaces Standard (Accessibility Standards for the Built Environment)**

#### **Exterior Paths of Travel**

NLCHC is responsible for the building and grounds of its Forest site. NLCHC shall ensure that any exterior paths of travel that they construct or redevelop and intend to maintain meet the requirements of this standard.

#### **Accessible Parking – Off-street Parking**

NLCHC is responsible for the off-street parking lot of its Forest site. NLCHC shall ensure that when constructing new or redeveloping off-street parking facilities that they intend to maintain, the off-street parking facilities meet the requirements of this standard.

#### **Obtaining Services**

NLCHC will consider the requirements set out regarding newly constructed service counters, fixed queuing guides, and newly constructed or redeveloped waiting areas – regardless of whether services being obtained happen in buildings or out-of-doors.

## **Maintenance of Accessible Elements**

NLCHC's ensure preventative and emergency maintenance of its accessible elements in public spaces, which include:

- Amenities: Examples include drinking fountains, benches, and garbage receptacles.
- Cross Slope: Example includes the accessibility ramp to the lower level of the Forest site.
- Running Slope: Example includes the sloped pavement to the ambulance entrance of the Forest site.
- Off-street Parking Facilities: Example includes exterior parking lot outside back entrance of the Forest site.

External Landscape and Snow Removal services are contracted to maintain access routes. Conditions of these areas are observed by staff, ambulance drivers, delivery persons, and during monthly site inspections. All reported issues would be dealt with when reported. Signage and line painting are maintained by NLCHC as needed.

Closures are announced on local radio stations and on NLCHC's website. Disruptions are announced via signage. The Forest site has four entrances, all accessible, which can be used if one is not available. The Forest site has exterior access to both levels to accommodate times when the elevator is not in use. Other garbage receptacles and chairs for resting are available inside the building.

## **Part IV.2 – Customer Service Standards**

### **Establishment of Policies**

NLCHC's Quality Client Experience Policy 105 "Providing Customer Service to People with Disabilities" covers the topics of communication, use of service animals, support persons, notice of temporary disruption, training for staff and volunteers, feedback, and modifications to policies.

### **Use of Service Animals and Support Persons**

Service animals are welcome in NLCHC sites, with the exception of areas where food is being prepared and where open clinical procedures requiring heightened infection control procedures are occurring. When necessary, accommodations will be arranged to meet both the needs of the client or program participant accompanied by a service animal and the staff right to a safe workplace.

NLCHC is committed to welcoming people with disabilities who are accompanied by a support person. Most services and programs offered by NLCH are free of charge for clients and participants, including an accompanying support person. When a service or program has a cost-recovery fee, the support person will not be required to pay the fee.

### **Training for Staff, etc.**

See General Requirements, Training, noted above.

### **Feedback Process Required**

See Part II – Information & Communication Standards, Feedback, noted above.

### **Format of Documents**

NLCHC will provide documents or information from a document to a person with a disability in an accessible format, in a timely manner, and at no cost different than regular costs charged to other persons. NLCHC staff will consult with the person making the request in determining the suitability of an accessible format or communication support.