

Holland Bloorview

Kids Rehabilitation Hospital

Multi-Year Accessibility Plan

2017-2018 Update

2018-2021 Plan

Reported December 2017

An alternate format of this Multi-Year Accessibility Plan is available upon request

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About Holland Bloorview Kids Rehabilitation Hospital

Holland Bloorview Kids Rehabilitation Hospital creates a world of possibility by supporting children and youth living with disability, medical complexity, illness and injury. Holland Bloorview is a top 40 Canadian research hospital that is fully affiliated with the University of Toronto and serves 7,500 families annually. Providing both inpatient and outpatient services, Holland Bloorview is renowned for its expertise in partnering with clients and families to provide exceptional care. Holland Bloorview is the only organization to ever achieve 100 per cent in two successive quality surveys by Accreditation Canada.

Founded in 1899, Holland Bloorview is located in Toronto and serves children and youth from across Ontario and Canada. The hospital sees over 1,000 unique diagnoses annually, including brain injury, cerebral palsy and developmental delay. A holistic approach is taken to assist young people in achieving their goals. This includes physical and cognitive development as well as life skills such as employment readiness, transitioning to adult services and friendship. Children and youth also have access to programming in music, arts, fitness, science and technology.

Holland Bloorview and its volunteers, students and staff have won numerous awards for quality and care, research and innovation, client and family centred care, education and training, and environmental practices. Employment-related awards include: Greater Toronto's Top Employers, Canada's Top Employers for Young People and Canada's Most Admired Corporate Cultures.

Holland Bloorview-led innovations, research and evidence-informed care impacts the lives of children and youth around the globe. Holland Bloorview is guided by a goal to lead and model social change by eliminating stigma aimed at kids and youth living with disability. The vision of Holland Bloorview is to create the most meaningful and healthy futures for all children, youth and families.

Holland Bloorview's Commitment to Accessibility

Accessibility is a key priority for Holland Bloorview. Given the nature of the clients we serve, accessibility is foremost in our built environment, planning, program development and services. In addition, Holland Bloorview works closely with other community providers to help increase accessibility for our clients outside of Holland Bloorview's programming. For example, our participation and inclusion programs exist to facilitate active participation by kids with disabilities in recreational activities. We work with community partners and organizations across Ontario to make their activities more accessible. We also provide accessible or adapted equipment to facilitate participation for children with disabilities.

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Our commitment to accessibility is an ongoing focus for Holland Bloorview Kids Rehabilitation Hospital, and we will continue to monitor the external innovations related to accessibility that may be relevant for Holland Bloorview.

Accessibility Planning Advisory Committee

As a hospital and a publicly-funded facility in Ontario, Holland Bloorview Kids Rehabilitation Hospital complies with the Accessibility for Ontarians with Disabilities Act (AODA), 2005. As an organization whose primary mandate is to create a world of possibility for children with disability, Holland Bloorview embraces our mandate and leadership role in ensuring accessibility for everyone. The purpose of the AODA is to develop, implement and enforce standards for accessibility in Ontario related to goods, services, facilities, employment, accommodation and buildings by 2025¹. As a designated public sector organization, Holland Bloorview has two obligations under this Act:

1. Develop an annual accessibility plan, make it available to the public, and follow through on the implementation of the plan.
2. Comply with the Accessibility Standards for Customer Service and the Integrated Accessibility Standards Regulation (IASR) and the Human Rights Code.

For the purposes of Holland Bloorview's accessibility planning, Holland Bloorview uses the Ontario Human Rights Code definition of "disability", which is also the definition used in the development of the AODA:

- 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
- a condition of mental impairment or a developmental disability
- a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language
- a mental disorder, or
- an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997 ("handicap")

¹ Access Ontario. A Guide to the Accessibility for Ontarians with Disabilities Act, http://www.mcass.gov.on.ca/en/mcass/programs/accessibility/understanding_accessibility/ao_da.aspx

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In addition, Holland Bloorview references the AODA's definition of a "barrier," which is anything that stops a person with a disability from fully taking part in society because of that disability. Some barriers include:

- physical barriers, for example a step at the entrance to a store;
- architectural barriers, for example no elevators in a building of more than one floor;
- information or communications barriers, for example a publication that is not available in large print;
- attitudinal barriers, for example assuming people with a disability can't perform a certain task when in fact they can;
- technological barriers such as traffic lights that change too quickly before a person with a disability has time to get through the intersection; and
- barriers created by policies or practices, for instance not offering different ways to complete a test as part of job hiring

To guide Holland Bloorview in the development of its accessibility plan, Holland Bloorview created an Accessibility Planning Advisory Committee (APAC) in 2009. In 2015, the APAC became part of Holland Bloorview's Equity, Diversity and Inclusion committee (EDI).

As a sub-group of the EDI committee, the APAC continues to:

- ensure Holland Bloorview meets its obligations under the AODA to develop a Multi-Year Accessibility Plan;
- provide advice on what the plan should include;
- review Holland Bloorview's annual progress on the plan; and
- help identify annual priorities within the plan
- inform new opportunities to advance accessibility at Holland Bloorview

The APAC reports to the Equity, Diversity and Inclusion committee and is accountable to the senior management team for approval of Holland Bloorview's Multi-Year Accessibility Plan on an annual basis.

2017-2018 Membership

Lydia Hanson, Communications and Public Engagement

Bobby Hancock, Building Services

Nancy Killey, Organization Development and Learning

Joanna Miedzik, Volunteer Resources and Reception

Lindsay MacDonald, Human Resources

Joanne Azulay, Human Resources

Christine Chow, Organization Development and Learning

Lorraine Thomas, Snoezelen and Client and Family Integrated Care

Alison Hughes, Holland Bloorview Foundation

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Multi-Year Accessibility Plan

2009-2017 Accessibility Planning Activities

The focus of the Accessibility Planning Advisory committee from its inception in 2009 through 2014 has been to implement and to ensure compliance with policies, practices and training requirements related to the Accessibility Standards for Customer Service and the Integrated Accessibility Standards and the Human Rights Code for employees, volunteers and all others who provide goods, services or facilities on our behalf.

We have developed an accessibility policy and related procedures that govern how we achieve accessibility through meeting the requirements in the Accessibility Standards for Customer Service, Integrated Accessibility Standards Regulation and the Human Rights Code. We implemented and maintained a Multi-Year Accessibility Plan that supports the removal of barriers to our built environment, accessing our services, transportation, employment and information and communications. We have provided accessible format features on our website to achieve Website Content Accessibility guidelines (WCAG) 2.0 Level A compliance. We make accessible formats for the accessibility plan, policies, feedback and issues resolution available upon request.

Holland Bloorview has a health literacy review process for our communication materials to ensure they are relevant, clear and easily understood. Our health literacy committee review and recommends changes to written materials. The result is a document that meets health literacy standards and has our health literacy stamp of approval.

We have reviewed and developed policy and processes to specifically address standards related to:

- workplace emergency response information
- workplace accommodation for applicants and employees
- accessible vehicles (as relevant to Holland Bloorview)

The APAC reviewed and provided feedback to the Accessibility Directorate on the built environment standard related to public spaces and recreation trails. We have provided consultation and tours of our building related to our built environment and its accessible design and features.

Holland Bloorview has continued to provide representation to the Transportation Standards Development Review Committee as requested by the Minister of Economic Development, Employment and Infrastructure. Sarah Keenan has been our representative to inform revisions to the Transportation Standards. A very engaged group of youth and families has met after each meeting of the minister's committee and reviewed all recommendations with a critical eye and provided valuable feedback. This work is ongoing.

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2017-2018 Accessibility Planning Activities

In our new No Boundaries organization strategic plan, we have made a commitment to model equity, diversity and inclusion within all organization practices with the impact that we will become a model employer of people with a wide range of disabilities. An Inclusive Employer initiative has been launched with full participation of the Accessibility Planning Advisory committee. A review of leading practices, interviews with employers and employment services and focus groups of our employees with disabilities have been held. A report and recommendations to inform an organization plan are in progress.

We are changing the signage for all of our single access washrooms to be inclusive for all genders. As part of this initiative we are in the process of updating our accessibility signage to reflect Dynamic Symbol of Access, which we have also integrated into our parking lot signage. We have also created clearer signage for our accessible change tables.

Holland Bloorview facilitated a session with our youth to provide input on pending federal government legislation related to accessibility. A video was produced that served as our input into this legislative review process.

We ensured a high level of accessibility for our Dear Everybody anti-stigma campaign including testing the www.deareverybody.ca site and on line resources with users who use accessibility tools. This included high-contrast option and the ability to smoothly navigate the site using only the keyboard.

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**Training - Accessibility Standards for Customer Service, Integrated
Accessibility Standard Regulation and the Human Rights Code**

Focus area: Accessibility Standards for Customer Service, IASR and Human Rights Code – policies practices and procedures

Commitment: ongoing

Planned actions: Continue to review any new policies, practices and procedures to ensure they reflect the Accessibility Standards for Customer Service such as issues resolution, the IASR and Human Rights Code and ensure updated training is provided.

Implementation timeframe: Ongoing

**Focus area: Accessibility Standards for Customer Service, Integrated
Accessibility Standards Regulation and the Human Rights Code – training plan**

Commitment: ongoing

Planned actions: Continue to assign and track training for all new employees related to customer service, the IASR and the Human Rights Code using the organization's cloud based e-learning system.

Continue to assign and track training for all new volunteers related to customer service, the IASR and the Human Rights Code using an e-learning system.

Continue to provide annual AODA and accessibility training for the Board of Trustees.

Review any new training materials in partnership with EDIC to update and enhance our accessibility and Human Rights code training for staff and volunteers.

Implementation timeframe: Ongoing

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Employment -Workplace Emergency Response Information

Commitment: implemented January 1, 2014–Ongoing

Planned actions: Continue to ensure that emergency procedures made available to the public are available in an accessible format upon request.

Continue to develop and communicate individualized emergency response plans for employees.

Implementation timeframe: ongoing

Employment - Workplace Accommodation

Commitment: implemented January 1, 2014 – ongoing

Planned actions: An Inclusive Employer initiative has been launched with full participation of the Accessibility Planning Advisory committee. A review of leading practices, interviews with employers and employment services and focus groups of our employees with disabilities have been held. A report and recommendations to inform an organization plan are in progress that will shape our policies and practices related to workplace accommodation procedures, documentation and communication for applicants and employees related to recruitment, assessment, selection, notification, informing, communication, accommodation plans, return to work, performance management, career development and redeployment.

Implementation timeframe: October 2017 - Ongoing

Transportation

Focus area: Accessible vehicles

Commitment: implemented January 1, 2014–ongoing

Planned actions: Continue to ensure current patient transportation vehicles meet the accessibility standards.

Continue to review any contracts for taxi services to ensure availability of accessible transportation.

Implementation timeframe: ongoing

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Focus Area: Transportation Standards Development

Commitment: ongoing from February 2016

Planned actions: Continue to provide representation from Holland Bloorview to the Transportation Standards Development Review Committee and provide feedback from clients and families to inform any proposed changes to the standards.

Implementation timeframe: February 3, 2016 to end of committee duties

Information and Communications

Focus Area: Standards for new websites and web content

Commitment: ongoing

Planned actions: We will build on our learnings and develop a strategy and action plan to meet the accessibility requirements for our redeveloped corporate website in the coming year.

Implementation timeframe: January 1, 2018 - December 31, 2018

Issues Resolution Process

Issues resolution process

In addition to the specific work and priorities developed by the APAC, and outlined in this plan, there are a number of existing mechanisms and processes by which accessibility issues can be identified and addressed.

Upon request the organization will provide or arrange for the provision of accessible formats for feedback or issues resolution and communication supports for persons with disabilities.

Issues resolution and feedback mechanisms for all issues including accessibility include:

- If clients and families have questions, concerns, or feedback, we encourage them to speak with a member of their Holland Bloorview team right away. If they do not feel comfortable or feel the situation requires further attention, they can contact Client and Family Relations in writing, by phone or by simply dropping in to the Family Resource Centre. Client and Family Relations will listen to the issues at hand in a safe and confidential setting, as well as plan next steps for issue resolution. Families and clients can bring their concerns forward to

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Kimberley Siu-Chong, Client and Family Relations Facilitator, Room: 1E250 or 416-425-6220, extension 6084 or email feedback@hollandbloorview.ca.

- We have partnered with the National Research Corporation of Canada (NRCC) to introduce a new feedback survey for clients and families.
- Youth Advisory Committee – Youth can bring forward their concerns to the committee or its chair. The committee will bring forward any concerns to Holland Bloorview, and will work with Holland Bloorview to address the concern, where appropriate.
- Built environment and physical plant concerns are submitted to building services through a Meditech order. Building services will review the request, and address the concern as appropriate.
- Holland Bloorview has a Joint Occupational Health and Safety Committee (JOHSC) that identifies and addresses health and safety concerns in the workplace. Concerns can be brought forward by staff or management to any member of the JOHSC.
- Annual workplace inspections take place throughout the year in all areas of the building. This is an opportunity to identify issues and for staff to bring forward their concerns.
- Each new hire at Holland Bloorview undergoes an assessment with an occupational health nurse. This is an opportunity for the new employee to identify accommodation needs for emergency response, raise any concerns or special needs that they may have that can be addressed by Holland Bloorview.
- Occupational health and safety offers accommodations for employees who need special accommodations to do their job on an ongoing basis, upon request or following a short or long-term disability leave. A central fund is available for adaptations if the accommodation is deemed medically necessary as shown through medical documentation.

Inquiries

For more information, please contact:

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