



# Multi-Year Accessibility Plan

Available in an alternate format upon request.



## INTRODUCTION

As we approach the twentieth anniversary of the Accessibility for Ontarians with Disabilities Act (AODA) in 2025, we will soon reach the timeline outlined in the Act to provide a fully accessible Ontario by 2025. At the North Shore Health Network we are proud of the progress we have made through previous accessibility plans, and are committed continue building on those successes. Our new Multi-Year Accessibility Plan covers a two-year period, and will serve as a bridge to the 2025 date set in the AODA to ensure we do everything possible to meet the needs of the patients, residents, clients, workers, providers, volunteers and community we serve.

NSHN continues to make improvements across all sites to remove barriers in our existing facilities. NSHN is committed to providing people with visible or non-visible disabilities full access to the same services, in the same place and in similar ways as all others receive. We will ensure we meet our vision of one team providing equitable, high quality, integrated rural health and wellness services for everyone.

## BACKGROUND

The Ontario government's goal is a fully accessible Ontario. In 2001, the Ontarians with Disabilities Act (ODA) was passed. This was followed in 2005 by the Accessibility for Ontarians with Disabilities Act (AODA). Recognizing the history of discrimination against persons with disabilities in Ontario, the purpose of the AODA is to benefit all Ontarians by:

- developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodation, employment, structures and premises on or before January 1, 2025; and
- providing for the involvement of persons with disabilities, of the Government of Ontario and of representatives of industries and of various sectors of the economy in the development of accessibility standards. 2005, c. 11, s. 1.

<https://www.ontario.ca/laws/regulation/110191#BK157>

## CONTEXT

The NSHN renewed Strategic Plan (2024-2026) outlines three strategic directions: clarify, stabilize and updated corporate values – compassion, accountability, respect, equity & sustainability [NSHN C.A.R.E.S].

Strategic directions to advance equity, diversity, inclusion and accessibility by addressing systemic racism, discrimination and inequities seen in the health care system, contributes to the creation of a culture of belonging for everyone, and is reflective of the communities we serve. This two-year accessibility plan will play a key role in helping to guide the hospital in this strategic direction.

This plan has been informed by the revised strategic planning process – through consultation with a number of stakeholders – including workers, providers, patients, residents, clients, Patient & Family Advisory Committee, family members and community representatives with disabilities, as well as those that work with agencies supporting people with disabilities.

## COMMITMENT

The North Shore Health Network (NSHN) is committed to providing care and services to our patients, residents and clients and families in a way that respects dignity and independence and considers different needs and abilities. Identifying and removing barriers is an important element of excellent customer service, and ensures that the organization meets the accessibility requirements under the *Accessibility for Ontarians with Disabilities Act, 2005*.

NSHN will:

- continually improve access to NSHN facilities, policies, programs, practices, and services
- encourage the participation of individuals with disabilities in the development of the plan
- ensure policies and practices are consistent with the principles of accessibility and incorporate accessibility design, criteria or features into procurement and acquisition practices, where possible
- promote a culture where all people are treated in a way that allows them to maintain their dignity and independence
- meet the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility
- provide information related to this plan in accessible formats upon request

This multi-year accessibility plan is a roadmap for NSHN's compliance with the Act. The plan outlines the organization's strategies and steps we've taken, and will take in the future, to ensure that our patients, residents, clients, families, workers, providers, volunteers and community members can access care and services.

## OBJECTIVES FOR 2023-2024

The areas of focus and key deliverables for the two-year plan are as follows:

### 1. Customer Service Accessibility Training:

- Update and refresh all accessibility education and training offered.
- Review existing policies and standard operating procedures.
- Deepen collaboration with the community and with persons with disabilities to inform our decisions.

### 2. Employment:

- Deepen collaboration with external partners.
- Update external job postings to include statements of inclusivity aligned with the EDI (equity, diversity and inclusion) strategy.
- Track requests for accommodation during the recruitment process to ensure we are offering successful solutions to remove barriers to employment.
- Continuously update and improve corporate Emergency Management Plans and Personal Emergency Plans (as required).
- Improve the corporate Code Green emergency protocol to ensure that all evacuation plans consider persons with disabilities.

### 3. Information & Communication:

- Standardize public documents in collaboration with the Document Management Committee.
- Improve readability and usefulness of NSHN-created content through clear language.
- Ensure that all NSHN digital platforms – including the main website – prioritize AODA compliance.

- Ensure persons with disabilities are not excluded from visibility when creating promotional materials for the corporation.

**4. Built Environment:**

- **Renovations:** ensure accessibility is a key consideration in the planning/design of renovations of existing facilities.
- **Accessible Spaces:** review suggestions and act on prioritized project requests to improve accessibility throughout all facilities.
- **Parking / Sidewalks:** Review and enhance accessibility features of sidewalks and parking.
- **Wayfinding:** Ensure all signage is easy to read / interpret, taking accessibility into consideration.
- **Consultation:** Deepen the consultation with persons with disabilities. Ensure integration of accessibility expertise into all parts of the design phase.

**FEEDBACK AND BARRIER IDENTIFICATION APPROACH**

NSHN has an accessibility feedback form on our main website [[www.nshn.care/accessibility](http://www.nshn.care/accessibility)]. Feedback from patients, residents, clients, family members and visitors is reviewed by Senior Leadership and accessibility issues and concerns are shared with the AODA Compliance Team for follow-up. In addition to the feedback form, there are many other ways to share feedback, including by phone, email, or by a scheduled appointment with a Senior Leadership Team member, if appropriate. As needed, every attempt will be made to book interpretation services. Concerns will be directed to the appropriate person and/or department. Workers, providers and volunteers are also encouraged to provide feedback on accessibility issues by emailing [accessibility@nshn.care](mailto:accessibility@nshn.care). This feedback is used for planning and prioritizing accessibility projects.

A “barrier” is anything that prevents a person with a disability from fully participating in all aspects of society because of a disability. This includes physical, architectural, informational, attitudinal, technological or a policy or practice.

Examples of Barriers:

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| <b>Physical:</b> Door knob that cannot be operated by a person with limited upper body mobility and strength.                                     | <b>Architectural:</b> A hallway or door that is too narrow for a wheelchair or scooter. | <b>Informational:</b> Typeface too small to be read by a person with low vision.              |
| <b>Communicational:</b> A person who talks loudly when addressing someone who is deaf or hard of hearing.   | <b>Attitudinal:</b> A receptionist who ignores a visitor in a wheelchair.               | <b>Technological:</b> A paper tray on a laser printer that requires two strong hands to open. |
| <b>Policy / Procedure:</b> A practice of announcing important messages over an intercom that people with hearing impairments cannot hear clearly. |   |   |

**REVIEW AND MONITORING OF PLAN**

To ensure the Plan is closely monitored and measured against its deliverables, updates will be provided at meetings of the Accessibility Advisory Committee. Updates will also be provided to Senior Leadership, as required.

**WE CARE WHAT YOU THINK!**

Do you have thoughts or feedback on what has been accomplished so far? Or ideas on how plans or projects could be improved? We welcome your feedback. Please contact us with your questions and ideas at [accessibilitycommittee@nshn.care](mailto:accessibilitycommittee@nshn.care).

This publication is available online at: [www.nshn.care](http://www.nshn.care)



**ACTION PLAN**

| REGULATION  | REQUIREMENTS  | ACTIVITY / ACTIONS  | COMPLIANCE SCHEDULE | STATUS    | LEAD |
|---|---|---|---------------------|-----------|------|
| <b>O. Reg. 191/11: Integrated Accessibility Standards – General</b> |   |   |                     |           |      |
| <b>PART I - GENERAL</b>   |   |   |                     |           |      |
| <b>3. Accessibility Policies</b>                                    | (1) develop, implement and maintain policies governing how the organization achieves or will achieve accessibility through meeting its requirements referred to in this Regulation. O. Reg. 191/11, s. 3 (1).                     | NSHN’s accessibility policy is posted online at: <a href="http://www.nshn.care/accessibility">www.nshn.care/accessibility</a> . Updated.  | February 2010       | COMPLIANT | CRCO |
|   | (2) include a statement of organizational commitment to meet the accessibility needs of persons with disabilities in a timely manner in their policies. O. Reg. 191/11, s. 3 (2).   | NSHN’s accessibility policy updated to include commitment statement to meet all accessibility needs in a timely manner.   | December 2023       | COMPLIANT | CRCO |
|   | (3)(a) prepare one or more documents describing the policies it developed under subsection (1); and   | Accessibility policies are posted online on the corporate website – policies updated.   | January 2016        | COMPLIANT | CRCO |
|   | (3)(b) make the documents publicly available and, on request, provide them in an accessible format. O. Reg. 165/16, s. 3 (1).   | Contact information posted to request accessible formatting.  | November 2023       | COMPLIANT | CRCO |
| <b>4. Accessibility Plans – Multi-Year</b>                          | (1)(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;                    | Posted online at: <a href="http://www.nshn.care/accessibility">www.nshn.care/accessibility</a> Updated.   | January 2016        | COMPLIANT | CRCO |
|   | (1)(b) post the accessibility plan on their website, if any, and provide the plan in an accessible format upon request; and   | Statement in plan to provide in accessible format upon request.   | January 2016        | COMPLIANT |      |
|   | (1)(c) review and update the accessibility plan at least once every five years. O. Reg. 191/11, s. 4 (1).   | Plan reviewed and updated.  | December 2023       | COMPLIANT | CRCO |
|   | (2) 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. O. Reg. 191/11, s. 4 (2). | Reviewed in collaboration with Strategic Plan Steering Committee (inclusive and diverse committee) for the recent updates as a result of organizational leadership change and to align with strategic priorities. | November 2023       | COMPLIANT | SLT  |

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|  | (3)(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   |  | December 2023 | COMPLIANT               |  |
|  | (3)(b) post the status report on their website, if any, and provide the report in an accessible format upon request. O. Reg. 191/11, s. 4 (3); O. Reg. 413/12, s. 3 (1).   | Status report posted on the website.   | December 2023 | COMPLIANT               | CRCO                                   |
| <b>5. Procuring or Acquiring Goods, Services or Facilities</b> | (1) incorporate accessibility design, criteria and features when procuring or acquiring goods, services or facilities, except where it is not practicable to do so. O. Reg. 191/11, s. 5 (1); O. Reg. 413/12, s. 4 (1).  | Ongoing. Materials Management to develop a formal policy & procedure to reflect current practice.  | December 2023 | COMPLIANT / IN PROGRESS | CRCO                                   |
|  | (2) If the 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. O. Reg. 191/11, s. 5 (2); O. Reg. 413/12, s. 4 (2).  |  |               |                         |  |
| <b>6. Self-Service Kiosks</b>                                  | (2) have regard to the accessibility for persons with disabilities when designing, procuring or acquiring self-service kiosks. O. Reg. 191/11, s. 6 (2).<br><br>(5) In this section, “kiosk” means an interactive electronic terminal, including a point-of-sale device, intended for public use that allows users to access one or more services or products or both. O. Reg. 191/11, s. 6 (5).   | Information Systems is aware that accessibility features should be incorporated when designing, procuring or acquiring self-serve kiosks intended for people to access services, products or goods. *NSHN does not currently have any self-serve kiosks. | January 2016  | COMPLIANT               | IT Manager                             |
| <b>7. Training</b>   | (1) ensure that training is provided on the requirements of the accessibility standards referred to in this Regulation and on the <i>Human Rights Code</i> as it pertains to persons with disabilities to,<br><br>(a) all persons who are an employee of, or a volunteer with, the organization;<br><br>(b) all persons who participate in developing the organization’s policies; and<br><br>(c) all other persons who provide goods, services or facilities on behalf of the organization. O. Reg. 191/11, s. 7 (1); O. Reg. 165/16, s. 5 (1). | NSHN has accessibility training modules that are available on the corporate Learning Management System (LMS). This system allows us to track staff who have completed the training.  | January 2016  | COMPLIANT               | Human Resources & Surge Administrators |
|  | (2) The training on the requirements of the accessibility standards and on the <i>Human Rights Code</i> referred to in subsection (1) shall be appropriate to the duties of the employees, volunteers and other persons. O. Reg. 191/11, s. 7 (2).   | In keeping with our Mission, Vision & Values – NSHN is committed to providing a work environment that is free from discrimination, systemic discrimination, harassment, and where the dignity and value of every   | January 2016  | COMPLIANT               | Human Resources & Surge Administrators |

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|  |  | individual is respected. This is reflected through our policies and practices that adhere to the tenets of the Ontario Human Rights Code.  |              |           |  |
|  | (3) Every person referred to in subsection (1) shall be trained as soon as practicable. O. Reg. 191/11, s. 7 (3).  | Every new employee, volunteer and student receives orientation which includes accessibility training. Existing employees have access to the accessibility e-learning modules available readily on the corporate Learning Management System.              | January 2016 | COMPLIANT | Human Resources & Surge Administrators |
|  | (4) provide training in respect of any changes to the policies described in section 3 on an ongoing basis. O. Reg. 191/11, s. 7 (4).   | Ongoing training will reflect any changes to accessibility policies, should there be changes.  | January 2016 | COMPLIANT | Human Resources & Surge Administrators |
|  | (5) 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. O. Reg. 191/11, s. 7 (5). | NSHN tracks every new worker volunteer or student who attends in-person orientation sessions, and the corporate LMS also tracks who completes training. Some departments have a learning objectives checklist to demonstrate the completion of training. | January 2016 | COMPLIANT | Human Resources & Surge Administrators |

**PART II - INFORMATION AND COMMUNICATIONS STANDARDS**

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| <b>9. Definitions and exceptions</b> | <p>(1) In this Part, “communications” means the interaction between two or more persons or entities, or any combination of them, where information is provided, sent or received; (“communications”); “conversion ready” means an electronic or digital format that facilitates conversion into an accessible format; (“prêt à être converti”); “information” includes data, facts and knowledge that exists in any format, including text, audio, digital or images, and that conveys meaning. (“information”) O. Reg. 191/11, s. 9 (1).</p> <p>(2) The information and communications standards do not apply to the following:</p> <ol style="list-style-type: none"> <li>1. Products and product labels, except as specifically provided by this Part.</li> <li>2. Unconvertible information or communications.</li> </ol> <p>Information that the obligated organization does not control directly or indirectly through a contractual relationship, except as required under sections 15 and 18. O. Reg. 191/11, s. 9 (2).</p> <p>(3) If determined that information or communications are unconvertible, the organization shall provide the person requesting the information or communication with,</p> <ol style="list-style-type: none"> <li>a) an explanation as to why the information or communications are unconvertible; and</li> <li>b) a summary of the unconvertible information or communications. O. Reg. 191/11, s. 9 (3).</li> </ol> <p>(4) For the purposes of this Part, information or communications are unconvertible if,</p> <ol style="list-style-type: none"> <li>a) it is not technically feasible to convert the information or communications; or</li> </ol> <p>the technology to convert the information or communications is not readily available. O. Reg. 191/11, s. 9 (4).</p> |
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| <b>11. Feedback</b>  | (1) processes for receiving and responding to feedback shall ensure they are accessible to persons with disabilities by providing or arranging for the provision of accessible formats and communications supports, upon request. O. Reg. 191/11, s. 11 (1).   | A contact is listed with phone number and email details on the website. This staff person will help facilitate the provision of accessible formats and communications supports upon request, where possible.  | January 2016 | COMPLIANT | Communications                                       |
|  | (2) The organization shall notify the public about the availability of accessible formats and communications supports with respect to the feedback process. O. Reg. 165/16, s. 7.  | Information has been placed on NSHN's corporate website, providing information on how to request accessible formats and communication supports.   | January 2016 | COMPLIANT | Communications                                       |
| <b>12. Accessible formats and communication supports</b>           | (1) Except as otherwise provided, upon request provide or arrange for the provision of accessible formats and communication supports for persons with disabilities, <ul style="list-style-type: none"> <li>a) in a timely manner that takes into account the person's accessibility needs due to disability; and</li> <li>b) at a cost that is no more than the regular cost charged to other persons. O. Reg. 191/11, s. 12 (1).</li> </ul> | NSHN is committed to arranging accessible formats, other ways of publishing information besides regular print, for patients, families and visitors. This includes people who are blind or have low vision, have an intellectual or other cognitive disability, cannot hold publications or turn pages because of a physical disability, or have difficulties accessing information on the internet. | January 2016 | COMPLIANT | Communications                                       |
|  | (2) The obligated organization shall consult with the person making the request in determining the suitability of an accessible format or communication support. O. Reg. 191/11, s. 12 (2).  | NSHN will consult with each person making a request for an accessible format, and is committed to working with individuals to ensure that their communication needs are met.  | January 2016 | COMPLIANT | Communications                                       |
|  | (3) Every obligated organization shall notify the public about the availability of accessible formats and communication supports. O. Reg. 191/11, s. 12 (3).   | Information is posted at <a href="http://www.nshn.care/accessibility">www.nshn.care/accessibility</a> to provide details on accessing alternate formats. Requests for an accessible format or communication support can be received by staff in person, by phone or by email.   | January 2016 | COMPLIANT | Communications                                       |
| <b>13. Emergency procedure, plans or public safety information</b> | (1) In addition to its obligations under section 12, if an obligated organization prepares emergency procedures, plans or public safety information and makes the information available to the public, the obligated organization shall provide the information in an accessible format or with appropriate communication supports, as soon as practicable, upon request. O. Reg. 191/11, s. 13 (1).   | Information is available online at <a href="http://www.nshn.care">www.nshn.care</a> and is available in an accessible format upon request.  | January 2016 | COMPLIANT | Communications /<br>Emergency Preparedness Committee |



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| <p><b>14. Accessible websites and web content</b></p> | <p>(2) 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. O. Reg. 191/11, s. 14 (2).</p> <p>(4) Designated public sector organizations and large organizations for their internet websites shall meet the requirements of this section in accordance with the following schedule:</p> <ol style="list-style-type: none"> <li>1. By January 1, 2014, new internet websites and web content on those sites must conform with WCAG 2.0 Level A.</li> <li>2. By January 1, 2021, all internet websites and web content must conform with WCAG 2.0 Level AA, other than, <ol style="list-style-type: none"> <li>a. success criteria 1.2.4 Captions (Live), and</li> <li>b. success criteria 1.2.5 Audio Descriptions (Pre-recorded). O. Reg. 191/11, s. 14 (4).</li> </ol> </li> </ol> <p>(5) 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. O. Reg. 191/11, s. 14 (5).</p> <p>(6) In determining whether meeting the requirements of this section is not practicable, organizations referenced in subsections (1) and (2) may consider, among other things,</p> <ol style="list-style-type: none"> <li>a) the availability of commercial software or tools or both; and</li> <li>b) significant impact on an implementation timeline that is planned or</li> <li>c) initiated before January 1, 2012. O. Reg. 191/11, s. 14 (6)</li> </ol> | <p>The WCAG 2.0 Level AA recommendations have been applied to our corporate website for existing and new content.</p> | <p>January 2021</p> | <p>COMPLIANT</p> | <p>Communications / IT</p> |
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| <b>15. Educational and training resources and materials, etc.</b> | <i>Not applicable to NSHN.</i>   |  |              |           |                 |
| <b>16. Training to educators</b>                                  | <i>Not applicable to NSHN.</i>   |  |              |           |                 |
| <b>17. Producers of educational or training material</b>          | <i>Not applicable to NSHN.</i>   |  |              |           |                 |
| <b>18. Libraries of educational and training institutions</b>     | <i>Not applicable to NSHN.</i>   |  |              |           |                 |
| <b>19. Public libraries</b>                                       | <i>Not applicable to NSHN.</i>   |  |              |           |                 |
| <b>PART III - EMPLOYMENT STANDARDS</b>                            |  |  |              |           |                 |
| <b>22. Recruitment, general</b>                                   | Every employer shall notify its employees and the public about the availability of accommodation for applicants with disabilities in its recruitment processes. O. Reg. 191/11, s. 22.   | NSHN has updated job postings online and in paper format to include information about accommodation for applicants with disabilities during the recruitment process.<br><br><i>“In order to ensure equal opportunities during the recruitment and selection process, North Shore Health Network provides accommodations for applicants with disabilities, upon request.”</i> | January 2014 | COMPLIANT | Human Resources |
| <b>23. Recruitment, assessment or selection process</b>           | (1) 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. O. Reg. 191/11, s. 23 (1). | Human Resources will work with Leadership to ensure that job applicants receive the accommodations that they may require.  | January 2014 | COMPLIANT | Human Resources |
|   | (2) If a selected applicant requests an accommodation, the employer shall consult with the applicant and provide or arrange for the provision of a suitable accommodation in a manner that takes into account the applicant’s accessibility needs due to disability. O. Reg. 191/11, s. 23 (2).      | When an applicant is selected for an interview, the individual will be notified by Human Resources that accommodations are available.  | January 2014 | COMPLIANT | Human Resources |
| <b>24. Notice to successful applicants</b>                        | Every employer shall, when making offers of employment, notify the successful applicant of its policies for accommodating employees with disabilities. O. Reg. 191/11, s. 24.  | Human Resources ensures that mention is made that NSHN has a   | January 2014 | COMPLIANT | Human Resources |

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|  |   | commitment to accommodation and an accessibility policy.  |              |           |                                       |
| <b>25. Informing employees of supports</b>                             | (1) 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. O. Reg. 191/11, s. 25 (1).  | Employees are informed of policies during Orientation. All employees have access to the organization’s Intranet (Policy & Procedures). Additional information will be shared by corporate email.  | January 2016 | COMPLIANT | Human Resources                       |
|  | (2) Employers shall provide the information required under this section to new employees as soon as practicable after they begin their employment. O. Reg. 191/11, s. 25 (2).   |   |              |           |                                       |
|  | (3) 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. O. Reg. 191/11, s. 25 (3).  | Corporate email, the orientation program and communication boards will be used widely to communicate any updated information regarding changes to policies – including the provision of job accommodations.   | January 2016 | COMPLIANT | Human Resources                       |
| <b>26. Accessible formats and communication supports for employees</b> | (1) 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,<br><br>a) information that is needed in order to perform the employee’s job; and<br>b) information that is generally available to employees in the workplace.<br>O. Reg. 191/11, s. 26 (1). | As part of NSHN’s employment health review for all new employees which falls under Occupational Health & Safety, information will be provided regarding accessible formats and communications supports if required by any workers.  | January 2019 | COMPLIANT | Human Resources / Occupational Health |
|  | (2) The employer shall consult with the employee making the request in determining the suitability of an accessible format or communication support. O. Reg. 191/11, s. 26 (2).   | Managers will work with workers, and Human Resources to ensure that each worker is supported and has the resources that they require.   | January 2016 | COMPLIANT | Human Resources                       |
| <b>27. Workplace emergency response information</b>                    | (1) 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 employer is aware of the need for accommodation due to the employee’s disability. O. Reg. 191/11, s. 27 (1).  | Ongoing – as new staff start and it is recognized that they have a disability, plans are developed as part of their health review. This is also completed if a new disability occurs during the time of employment when Occupational Health and Safety is made aware of the disability. | January 2016 | COMPLIANT | Human Resources / Occupational Health |

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|  | <p>(2) 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. O. Reg. 191/11, s. 27 (2).</p>  | <p>Ongoing – this is completed at the time the plan is developed.</p>   | <p>January 2016</p> | <p>COMPLIANT</p> | <p>Human Resources / Occupational Health</p> |
|  | <p>(3) 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. O. Reg. 191/11, s. 27 (3).</p>   | <p>Ongoing – will be completed at the time that Occupational Health and Safety finds out about the disability.</p>          | <p>January 2016</p> | <p>COMPLIANT</p> | <p>Human Resources / Occupational Health</p> |
|  | <p>(4) Every employer shall review the individualized workplace emergency response information,</p> <ul style="list-style-type: none"> <li>a) when the employee moves to a different location in the organization;</li> <li>b) when the employee’s overall accommodations needs or plans are reviewed; and</li> <li>c) when the employer reviews its general emergency response policies. O. Reg. 191/11, s. 27 (4).</li> </ul> | <p>If Occupational Health and Safety is aware of the workers location change then the plan will be updated as required.</p> | <p>January 2016</p> | <p>COMPLIANT</p> | <p>Human Resources / Occupational Health</p> |

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| <b>28. Documented individual accommodation plans</b> | <p>(1) Employers shall develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities. O. Reg. 191/11, s. 28 (1).</p> <p>(2) The process for the development of documented individual accommodation plans shall include the following elements:</p> <ol style="list-style-type: none"> <li>1) The manner in which an employee requesting accommodation can participate in the development of the individual accommodation plan.</li> <li>2) The means by which the employee is assessed on an individual basis.</li> <li>3) The manner in which the employer can request an evaluation by an outside medical or other 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.</li> <li>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.</li> <li>5) The steps taken to protect the privacy of the employee’s personal information.</li> <li>6) The frequency with which the individual accommodation plan will be reviewed and updated and the manner in which it will be done.</li> <li>7) If an individual accommodation plan is denied, the manner in which the reasons for the denial will be provided to the employee.</li> <li>8) The means of providing the individual accommodation plan in a format that takes into account the employee’s accessibility needs due to disability. O. Reg. 191/11, s. 28 (2).</li> </ol> | <p>Human Resources has a written process that outlines the steps to be taken in order to develop tailored accommodation plans for those staff with disabilities.<br/>Human Resources</p>  | January 2016 | COMPLIANT | Human Resources |
|  | <p>(3) Individual accommodation plans shall,</p> <ol style="list-style-type: none"> <li>a) if requested, include any information regarding accessible formats and communications supports provided, as described in section 26;</li> <li>b) if required, include individualized workplace emergency response information, as described in section 27; and</li> </ol>  | <p>NSHN has a detailed process for developing individual accommodation plans which includes information about accessible formats and supports. NSHN is committed to working with staff to ensure that they have the supports they require to successfully complete their tasks.</p> | January 2016 | COMPLIANT | Human Resources |

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|   | c) identify any other accommodation that is to be provided. O. Reg. 191/11, s. 28 (3).   |   |              |           |                                       |
| <b>29. Return to work process</b>             | (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. O. Reg. 191/11, s. 29 (1).<br><br>(2) The return to work process shall,<br><br>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<br>b) use documented individual accommodation plans, as described in section 28, as part of the process. O. Reg. 191/11, s. 29 (2) | The return-to-work process is documented for those staff who have been absent from work due to a disability, and who may require accommodations related to this disability. | January 2016 | COMPLIANT | Human Resources / Occupational Health |
| <b>30. Performance management</b>             | (1) 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. O. Reg. 191/11, s. 30 (1).  | Performance management is tailored to the needs of the employee with accommodation needs.   | January 2016 | COMPLIANT | Human Resources                       |
| <b>31. Career development and advancement</b> | (1) 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. O. Reg. 191/11, s. 31 (1).   | Career development and advancement opportunities will take into account the accessibility needs of the employee in order to ensure success.                                 | January 2014 | COMPLIANT | Human Resources                       |
| <b>32. Redeployment</b>                       | (1) 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. O. Reg. 191/11, s. 32 (1).   | Redeployment does factor into account the accessibility needs of the employee.  | January 2014 | COMPLIANT | Human Resources                       |

**PART IV - TRANSPORTATION STANDARDS**

In 2021, focused on the mandate of a healthcare facility and continued delivery of the highest quality care, NSHN initiated negotiations to transition the transportation services of the Handi-Transit back to the Town of Blind River. Through resolution dated August 9, 2021, Blind River Council has directed the CAO to discuss with bus providers the management and day-to-day operations of the Handi-Transit to ensure the level of service is maintained or enhanced. The changeover of services took place in the Fall / Winter of 2021.

**PART IV.1 – ACCESSIBILITY STANDARDS FOR THE BUILT ENVIRONMENT**

In the event of preventive and/or emergency maintenance to accessible elements of the hospital, the public, staff, students and volunteers will be informed through the following channels:

- Corporate website at: [www.nshn.care](http://www.nshn.care)
- Written notices with information posted at each area
- Email notices
- Digital Screens

For any questions and/or feedback, the contact information will be included.

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| <b>80.2 Application</b> | (1) Except as otherwise specified, this Part applies to public spaces that are newly constructed or redeveloped on and after the dates set out in the schedule in section 80.5 and that are covered by this Part. O. Reg. 413/12, s. 6. | No newly constructed spaces to report on. If members of the public have a question or concern, please contact <a href="mailto:webinfo@nshn.care">webinfo@nshn.care</a> or 705-356-2265. | January 2017 | COMPLIANT | VP Environmental Services |
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