



**Queensway  
Carleton  
Hospital**

**ACCESSIBILITY PLAN 2023-28**

### MESSAGE FROM THE PRESIDENT AND CHIEF EXECUTIVE OFFICER

The Queensway Carleton Hospital (QCH) is committed to offering a healthcare environment that assures individuals with disabilities equal access to hospital information, programs and services.

Making our information, programs, and services accessible to all patients, visitors and staff is our legal responsibility and our ethical obligation as healthcare professionals. Our goal is to ensure we comply with all required legislation, and where possible, ensure we exceed those requirements.

For many years, the Queensway Carleton Hospital has been working to become a more accessible hospital by identifying, removing, and preventing barriers that interfere with access to goods, services and opportunities for patients, visitors, employees, physicians and volunteers.

This multi-year plan provides a high-level overview of our strategy to continue to meet and exceed the standards in the regulation. It reflects the continued commitment to build a culture of accessibility for members of this community, taking into consideration the various types of visible and non-visible disabilities.

QCH has an Accessibility Committee in place to support us in complying with the Accessibility for Ontarians with Disabilities Act (AODA), established by the Government of Ontario in 2005. This working group promotes accessibility through education, the identification and elimination of barriers and review of the hospital's Accessibility Plan and policies annually. The corporate Accessibility Plan is posted on QCH's public website.

We welcome your input to find new and better ways to support accessibility thereby enabling us to provide equal access to quality patient and family-centred care for the people of Ottawa and our region.

Dr. Andrew Falconer  
President and Chief Executive Officer

### OVERVIEW OF PROGRAMS AND SERVICES

Located in fast-growing west Ottawa, Queensway Carleton Hospital has built its reputation as a leading acute care hospital by seeing the person in each of the nearly 500,000 people who turn to it for care each year. QCH's agility and collaborative culture enable it to respond quickly to the most pressing healthcare challenges facing its vibrant and growing communities through advanced programs that reinvent models of patient care. QCH has been named the #1 hospital in Ottawa by Newsweek magazine in 2021 and as a top employer in Canada by Forbes magazine.

Queensway Carleton Hospital, West Ottawa's only full-service hospital, offers a diversity of medical and surgical programs and services. With a team of over 2,700 health professionals, the 355-bed Queensway Carleton Hospital is the secondary referral centre for the Ottawa Valley.

QCH acknowledges we are on the traditional and unceded lands of the Anishinabe Algonquin Nation.

#### Our Cornerstone Programs

- Acute Rehabilitation
- Childbirth
- Critical Care
- Emergency
- Geriatric
- Medicine
- Mental Health
- Surgery

#### Mission

To provide high-quality, compassionate and coordinated care for the people and communities we serve.

#### Vision

Trusted as one of Canada's most caring and innovative health partners, fostering vibrant, healthy communities.

#### Values

Collaboration – Accountability – Innovation – Respect

## ACCESSIBILITY PLAN 2023-28

### ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES

QCH is committed to the principles of the *Accessibility for Ontarians with Disabilities Act, 2005* (AODA) and strives to ensure that people of all abilities can participate fully in everyday life. The purpose of the act is to make Ontario accessible for people with disabilities by 2025 through the development of standards and enforcement mechanisms.

Our plan shows how we will play our role in making Ontario an accessible province for all Ontarians. The plan is reviewed and updated at least once every 5 years.

We train every person as soon as practicable after being hired and provide training in respect of any changes to the policies.

We maintain records of the training provided including the dates on which the training was provided and the number of individuals to whom it was provided.

### ACCESSIBILITY COMMITTEE

The Accessibility Committee is responsible for the preparation, implementation and review of QCH's multi-year Accessibility Plan. The committee identifies and helps evaluate potential hazards or barriers to accessibility and supports hospital managers. It also raises concerns; shares knowledge and training, and makes recommendations to the Senior Leadership Team.

The Accessibility Committee will prepare its Plan by following nine steps:

1. Consult with Accessibility Committee members (Terms of reference).
2. Affirm commitment to accessibility planning.
3. Review and report on successes and recent projects involving the identification, removal and prevention of barriers faced by people with disabilities in the organization.
4. Identify (by list or category) barriers that could be removed over the coming years.
5. Establish priorities and develop strategies to remove and prevent barriers.
6. Establish tracking and follow-up measures (with timelines) to monitor progress.
7. Draft the Accessibility Plan.
8. Obtain Senior Leadership approval on the Accessibility Plan.
9. Publish and inform the public and employees on the Accessibility Plan.

### Membership

A newly formed committee was put in place in November 2022. The committee is comprised of the following members:

- Executive Lead – VP Human Resources and Organizational Effectiveness
- Director - Communications
- Director – Human Resources
- Director – Planning, Facilities, and Protection Services
- Director – Quality, Patient Safety, and Risk Management
- Director – Information Technology

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- Director – Culture and Performance
- Supervisor – Security
- Safety Coordinator – Occupational Health and Safety
- Equity, Diversity and Inclusion Specialist (*position is currently vacant*)
- Patient and Family Advisory Committee Member
- Executive Assistant to VP HR and Organizational Effectiveness

### ACCESSIBILITY ACHIEVEMENTS

Over the years, QCH undertook the following basic steps to improve accessibility for all and remove barriers:

- Meet the implementation requirements of the Integrated Accessibility Standards Regulation.
- Establish accessibility policies for employees with disabilities and ensure that everyone knows which services are offered to people with disabilities.
- Foster the creation of a barrier-free workplace as part of capital planning and construction of new facilities.
- Offer information in different formats (e.g., large print.).
- Apply corrective measures to remove all barriers in the facility.
- Educate staff on the promotion of a barrier-free hospital, the issues faced by people with disabilities, the services that are available to them and ways to help.
- Address issues faced by people with disabilities in emergency measures planning in the event of a disaster.

### BARRIERS TO ACCESSIBILITY

To prevent and remove barriers to accessibility, QCH relies on different outlets to identify existing and possible barriers:

1. **Consultations with the Accessibility Committee members:** Members of the Accessibility Committee are encouraged to add items to the list of barriers as soon as they become aware of a problem.
2. **Information gathered through the Complaint Management procedure:** This process encourages patients, families and visitors to express their concerns with care and services. Relevant policy and procedures are in place.
3. **Occupational Health and Safety inspections:** Members of the Occupational Health and Safety Committee carry out tours of the hospital units to verify conditions and ensure a safe workplace. Follow-up with the Accessibility Committee takes place if accessibility risks or barriers are identified.
4. **Consultation with clients with disabilities:** Addition of a patient partner to the Accessibility Committee in 2022.

### STATEMENT OF COMMITMENT

QCH is committed to ensuring equal access and participation for all people, regardless of their abilities. We are committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in inclusion. We are committed to meeting the needs of people who face accessibility barriers by identifying, removing and preventing these barriers and by meeting requirements of the Accessibility for Ontarians with Disabilities Act (AODA).

Through this Accessibility Plan, QCH is committed to:

- Continually improve access to facilities, policies, programs, practices and services for people with disabilities, patients and their families, staff, healthcare practitioners, volunteers and community members.
- Foster participation among people with disabilities in the development and review of its accessibility plans.
- Ensure that QCH by-laws and policies are consistent with the principles of accessibility.
- Ensure the delivery of quality services to all people with disabilities, patients, their families and community members.

### POLICIES

QCH has updated its policy on AODA Accessible Standards for Customer Service which integrates all AODA Accessibility Standards. This policy was approved by the Accessibility Committee on March 20, 2023. It will be approved at the Senior Leadership meeting of April 11<sup>th</sup>, 2023.

QCH provides training on this policy as part of the general orientation. We will roll-out the new training in May 2023. Our new module incorporates all elements of the Ontario Human Rights Commission “Working Together: The Code and AODA”, the five-part e-learning series.

QCH will continue to establish policies, practices and procedures on providing services to people with disabilities. Where possible, these will be consistent with the core principles of independence, dignity, integration and equality of opportunity.

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### WORK PLAN 2022-23

The work plan presented below aims to inform and spread the responsibility of Integrated Accessibility Standards Regulation compliance across the entire organization and ensure the coordination and monitoring of the implementation process. The Accessibility Committee met on November 21, 2022, January 23, 2023 and March 20, 2023.

The work plan is based on the five applicable accessibility standards:

- General
- Information and Communications
- Employment
- Customer Service
- Built Environment

#### Standard: General

Action	Responsibility	Status / Completion Date
Review and update Terms of Reference for Accessibility Committee	Accessibility Committee	December 15, 2022 Reviewed Annually
Create and implement an integrated policy on Accessibility	Accessibility Committee	Completed March 31, 2023 Final approval at SLT on April 11, 2023
Review accessibility policy that shows a commitment to becoming accessible	Accessibility Committee	Reviewed every two years Next cycle March 2025
Review and update QCH's multi-year accessibility plan describing the measures that the hospital intends to undertake to prevent and remove barriers to accessibility. This plan is in an accessible format upon request.	Accessibility Committee	New plan 2023-28 completed by March 31, 2023.  Reviewed annually Updated every 5 years

#### Standard: Information and Communications

Action	Responsibility	Status / Completion Date
Ensure internal communication templates are accessible (i.e. memos, posters, etc.)	Communications and all relevant staff	Completed – Spring 2022 Revised every two years

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Action	Responsibility	Status / Completion Date
Ensure policies and procedures are accessible. We provide support to those that request assistance.	Communications and Quality	Process updated by March 2023 Revision every two years
Develop procedure for responding to requests for documents in alternate formats.	Communications	Completed Spring 2022 Reviewed every two years
Provide on-line training on the creation of accessible documents	Continuous Performance Improvement Team	Planned for Fall 2023
Select existing forms to be converted to large print. Patient education materials have been updated to larger font size. The Meditech patient portal is AODA compliant.	Communications	Completed by March 2023 Revised every two years
Post a notice on website and on print documents, that information is available in alternate formats on request.	Communications	March 31, 2023 Reviewed every two years
Increase the participation of persons with disabilities when creating QCH and/or program specific promotional opportunities.	Communications	Member of PFAC is member of Accessibility Committee. QCH is looking to recruit persons with disabilities.
Make external website and content compliant with the Web Content Accessibility Guidelines (WCAG) 2.0	Communications	Completed Spring 2022 Revised every 2 years.
Make intranet and content compliant with the Web Content Accessibility Guidelines (WCAG) 2.0	Communications / IT	Plan in place for 2023 - 26

### Standard: Employment

Action	Responsibility	Status / Completion Date
Develop partnerships with community organizations who support persons with disabilities in job searches.	Human Resources	Working with community college. Plan for 2023-25
Increase knowledge of leaders regarding the hiring of persons with disabilities.	Human Resources	Training to be provided in June 2023 to QCH leaders



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Action	Responsibility	Status / Completion Date
Encourage staff with disabilities to request accommodation when needed	Occupational Health and Safety	Accommodation and Return to Work Programs in place Program reviewed in 2023. Review every two years.
Documented Individual Accommodation Plans (IAP) Process	Occupational Health and Safety	Process covers all elements of section 28(2). Process documented by January 2023. Reviewed every two years.
Ensure the availability of accommodations in the recruitment, selection and hiring processes	Human Resources	Job postings and career site meet standards Reviewed every two years
As part of the IAP above, QCH provides individualized workplace emergency response information to employees with disabilities and persons designated to provide assistance.	Human Resources / Facilities Management	To-date, we do not have any employees requiring IAP support. We are enhancing our Emergencies Measures policies, practices and training. The revised Abilities Management Policy references individualized emergency response. Spring and Fall 2023

### Standard: Customer Service

Action	Responsibility	Status / Completion Date
Provide Customer Service training to staff and volunteers.	Human Resources	Customer service training is part of General orientation
Our new module incorporates all elements of the Ontario Human Rights Commission “Working Together: The Code and AODA”, the five part e-learning series.		To be offered every two (2) years.  New training to be provided beginning in May 2023 to all new hires
Provide overall AODA training including Human Rights New training program validated by JOHSC.	Human Resources	AODA training provided to all employees as part of general orientation. To expand elements starting May 2023.

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### Standard: Built Environment

Action	Responsibility	Status / Completion Date
Review accessibility features / design of all campuses	Facilities management	Accessibility standards and norms were considered and respected as part of all capital redevelopment.
Ensure accessibility is a key consideration in the planning/design of renovations of existing facilities	Facilities management	Accessibility standards and norms were considered and respected as part of the redevelopment project
Ensure accessibility is taken into consideration when reviewing and developing signage	Communications Facilities management	Policy is in place. Updated every three years
Ensure sidewalks (or lack thereof) and surface parking are accessible	Facilities management	Accessibility standards and norms were considered and respected as part of all capital redevelopment project

## CONCLUSION

QCH is committed to foster an environment of trust in which everyone feels valued, respected and supported.

If you have any thoughts or feedback on our accomplishments or improvements to make QCH more accessible, please reach out to us at:

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