

Eliminating Barriers: MOUNT SINAI HOSPITAL 2011- 2012 Accessibility Plan

Accessibility Plan Table of Contents

	PAGE
1. Aim and Objectives of the Plan	3
2. Description of Mount Sinai Hospital	4
3. The Accessibility for Ontarians with Disabilities Planning Committee	5
4. Our Commitment to Accessibility Planning	6
5. Barrier Identification Methodologies	7
6. 2011-2012 Barrier Removal Initiatives	11
7. Review and Monitoring Process	13
8. Communication of the Plan	13
Appendix 1: Accessibility Committee: Terms of Reference and Membership Revised September 22, 2011	

1. Aim and Objectives of the Plan

This plan is intended to continue to move Mount Sinai Hospital toward its vision of accessibility. This vision represents the ideal, with each annual plan outlining realistic initiatives to be achieved in the 12-month period covered.

Specifically, Mount Sinai Hospital will provide the opportunity for all patients and their family members, staff, potential staff, health-care practitioners, volunteers and members of the community to identify their needs related to disabilities and that those needs are accommodated in a manner that supports the dignity of the individual. This will be reflected in the Hospital by:

- People with disabilities being able to enter the Hospital and reach their destinations without encountering barriers.
- People with disabilities receiving the services they require without encountering barriers.
- People with disabilities working without encountering barriers.
- Accessibility being a thread that is woven throughout all policies and practices.
- Accessibility being accepted as everyone's responsibility.

This plan describes:

- Measures that Mount Sinai Hospital will take during the next 12 months to identify, remove and prevent barriers to people with disabilities, who live, work or use the Hospital, including patients and their family members, staff, potential staff, health-care practitioners, volunteers and members of the community.
- How Mount Sinai Hospital will make the plan available to the public.

Definition of a Barrier:

For the purposes of this document, the term barrier refers to anything that prevents a person with a disability from fully participating in all aspects of society, including physical barriers, architectural barriers, information or communication barriers, attitudinal barriers, technological barriers, and policy or practice obstacles.

2. Description of Mount Sinai Hospital

Mount Sinai Hospital is a 464 bed patient care and academic health sciences centre fully affiliated with the University of Toronto. The main site is located at 600 University Avenue.

Mount Sinai Hospital has the following satellite sites:

- 1) Ontario Power Generation Building at 700 University Avenue (floor 3 and part of floor 8);
- 2) Joseph and Wolf Lebovic building at 60 Murray Street;
- 3) 522 University Avenue;
- 4) Toronto Centre for Phenogenomics;
- 5) ACTT;
- 6) Wellness Centre Scarborough at 3833 Midland Avenue;
- 7) 250 Dundas Street West;
- 8) 200 Elm Street;
- 9) 260 Spadina Avenue.

The statistics for the year ending March 31, 2011 are available through the Mount Sinai Hospital Annual Report on the Mount Sinai Hospital website.

3. The Accessibility for Ontarians with Disabilities Planning Committee

Mount Sinai Hospital formally constituted the Accessibility Working Group in May 2003. The group was reconstituted and renamed in November 2006. The Committee is formally authorized to provide a forum to meet Mount Sinai Hospital's mandate as set out in the Accessibility for Ontarians with Disabilities Act, 2005. This includes:

1. Identifying, removing and preventing barriers to people with disabilities who live or work at, or use the Hospital including patients and their family members, health-care practitioners, volunteers and members of the community.
2. Creating an annual work plan identifying measures that Mount Sinai Hospital will take during the 12-month period to identify, remove and prevent barriers.
3. Ensuring that the work plan is available to the public.
4. Ensuring that the work plan is completed as per annual goals.
5. Respond to emerging accessibility concerns identified through various mechanisms including other committees as well as patient, employee, visitor concerns.
6. Monitoring changes to the legislation and adjusting the work of the committee appropriately as standards are developed.

Chair:

The Hospital's Senior Management group has appointed Sharon Currie, Director of Rehabilitation, as the Chair for the Accessibility for Ontarians with Disabilities Planning Committee (contact information at the end of the report). Terms of Reference for the Committee, which is directly accountable to Senior Management, are attached in Appendix 1.

Authority/Reporting Relationship:

The Committee is accountable to the Senior Vice-President, Corporate Affairs and Operations

Members of the Accessibility Committee:

Inter-professional members are drawn from across the hospital from a variety of both patient-care and common/public areas where accessibility issues may be identified. It is required that persons with disabilities be represented on the committee. The membership list is attached to the Terms of Reference, Appendix 1.

4. Mount Sinai Hospital's Commitment to Accessibility Planning

Mount Sinai Hospital is committed to:

- The continual improvement of access to facilities, policies, programs, practices and services for patients and their family members, staff, health-care practitioners, volunteers and members of the community;
- The participation of people with disabilities in the development and review of its annual accessibility plans;
- Ensuring hospital by-laws and policies are consistent with the principles of accessibility; and;
- The continued operation of the Accessibility for Ontarians with Disabilities Planning Committee.

5. Barrier Identification Methodologies 2011-2012

The Accessibility Committee used the following barrier identification methodologies for 2011 - 2012:

Methodology	Description	Status
Concerns expressed to Patient Relations	Issues relating to accessibility were identified through the Patient Relations office.	All complaints were forwarded to the Accessibility Committee for review and appropriate action.
Issues identified through Risk Management Office	Issues relating to accessibility were identified through incident reports.	All issues were forwarded to the Accessibility Committee for review and appropriate action.
Review of issues through Diversity and Human Rights Office	Sources of information include: MSH review specifically related to harassment, and Made in Sinai Health Equity Competencies - a community consultation, and complaints.	Recommendations and information from these initiatives are forwarded to the Committee for review and inclusion as appropriate.
Accessibility Committee	Participation of representatives from a variety of areas. Review	Ongoing

	of barrier elimination initiatives. Request for more information where appropriate.	
Information desks	Feedback received from both staff and volunteers who work at various information desks.	Concerns brought to the Committee for consideration.
Security	Feedback received from patients, visitors and staff to security and forwarded to the Committee.	Concerns brought to the Committee for consideration.
Community /staff consultation	Creation of voice mail hotline and email address: Access@mtsinai.on.ca.	Concerns received through these two sources.
Legislation changes	Legislation is monitored to ensure Hospital compliance.	Changes are regularly occurring to Mount Sinai Hospital processes as legislation changes.
Review of construction projects	Construction projects reviewed by member of Committee with knowledge of accessibility.	Concerns identified through new construction projects.
Employee Rehabilitation Program and Occupational Health Department	Issues related to staff and accessibility identified by Employee Rehabilitation personnel.	Concerns identified through interventions with employees.

Employee Applicant Consultation	Issues related to accommodation for applicants applying for employment at Mount Sinai Hospital collected through the voice mail line designate for such concerns.	Concerns managed through Work Force Planning and brought to the Committee as appropriate.
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Barriers were identified using the above process. These were gathered and considered by the Committee. Decisions regarding barrier removal initiatives were made using a list of criteria. The criteria (in no specific order) are:

- Legislation requirements
- Patient/staff/visitor safety and risk
- Number of complaints about that issue
- Cost
- Patient/Visitor/Staff satisfaction
- Best Practice/Innovation

Barriers and means to prevent barriers were identified as being in one of nine categories:

1. Attitudinal
2. Physical
3. Architectural
4. Informational
5. Communication
6. Technological and
7. Policies and practices

8. Employment
9. Employment accommodation inquiries

The Committee identified the barriers which will be removed or addressed over a 12 month period. The Integrated Accessibility Standards Regulation is now in effect and the workplan includes plans to begin the process of compliance with the mandatory requirements as detailed in the regulation. Of note, the Hospital continues with a major capital redevelopment project entitled "Renew Sinai". Where possible, removal of barriers will be incorporated into building redevelopment as opposed to high-cost renovations or retro-fitting. To that end, the Hospital has consulted significantly with experts in the area of accessibility. Issues will be regularly re-assessed to ensure the appropriate balance is achieved.

The Committee put forth a proposal to contract consultants to review all architectural plans and review existing sites and new plans for all types of barriers. This proposal was accepted and this process is ongoing.

6. Barrier Removal Initiatives

**Mount Sinai Hospital
ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES
Work Plan September 2011 -2012**

Category of barrier	Identified barrier	Means to prevent/remove barrier	Indicator of success
Physical/architectural	<p>Follow up for 2010-2011 activities in process:</p> <ul style="list-style-type: none"> • Entrances to hospital • Accessible washrooms • Change rooms in Mammography not accessible 	<ul style="list-style-type: none"> • Continue to improve access to main lobby area through both entrances. This also includes completion of the curb cut at Murray Street. • Continue with inventory and changes to washrooms within Hospital to ensure accessibility. • Continue with improvements to increase access 	<ul style="list-style-type: none"> • Accessible entrances • Maximized number and inventory of accessible washrooms. • Accessible change rooms

	<p><u>New Item - 2011-2012</u></p> <ul style="list-style-type: none"> Floor - Level 1, 60 Murray Street - uneven and an accessibility concern. 	<p>including accessible change space</p> <ul style="list-style-type: none"> Replace flooring. 	<ul style="list-style-type: none"> NewFloor level 1 - 60 Murray Street
Attitudinal	<ul style="list-style-type: none"> Results of survey to ambulatory clinics reveals that there is a lack of consistent knowledge regarding creating an accessible environment for ambulatory patients. 	<ul style="list-style-type: none"> Administrative Assistant staff working for clinics will receive a newly developed training program which will include training on how to create an accessible environment. 	<ul style="list-style-type: none"> Standard of knowledge regarding creation of accessible environment for patients with disability coming to ambulatory clinics.

Legislation- Integrated Accessibility Standard	A five year plan will be developed and posted. The purpose of this plan is to detail how Mount Sinai Hospital will meet the mandatory requirements of the Integrated Accessibility Standard.
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7. Review and Monitoring Process

The Accessibility Committee will meet a minimum of five times during the year to review and monitor progress in identifying, reviewing and removing barriers. The Committee will implement an ongoing strategy to engage and ensure accountability of staff in disseminating and implementing initiatives.

8. Communication of the Plan

The 2011-2016 Accessibility Work Plan will be posted on the Mount Sinai Hospital internal and external websites. Hard copies will be available upon request. The link to this document is available via the Mount Sinai Hospital intranet and the Mount Sinai Hospital website using the accessibility icon on the Mount Sinai Hospital page. In addition, Mount Sinai Hospital is taking a leadership role by serving as an expert resource to other facilities.

Upon request, the Plan will also be available in large print, which can be accessed by selecting the change font option on the on-line document as well as audiotape.

After posting the Plan on the Mount Sinai Hospital website, Communications and Marketing will develop an internal communication plan for an announcement reiterating our commitment to a barrier-free environment and informing staff about how to send their concerns regarding barriers to the Committee.

Additions may be made to the Plan as the Accessibility Committee receives and responds to new and emerging information. If you are aware of a barrier, physical, technical, communication, attitudinal or other, please contact:

Sharon Currie

Chair, Accessibility Committee

Mount Sinai Hospital

416-586-4800 ext. 8332

scurrie@mtsinai.on.ca Access@mtsinai.on.ca ext. 7286

APPENDIX 1

Terms of Reference

Committee Name:

Accessibility for Ontarians with Disabilities Planning Committee

Purpose:

The committee exists to provide a forum to meet Mount Sinai Hospital's mandate as set out in the Accessibility for Ontarians with Disabilities Act, 2005. This includes

1. Identify, remove and prevent barriers to people with disabilities who live, work or use the Hospital including all staff, hospital patients, volunteers, students, foundation staff, researchers, physicians and contractors; and to members of the public.
2. Create an annual work plan identifying measures that Mount Sinai Hospital will endeavour to implement during the 12 month period to identify, remove and prevent barriers.
3. Ensure that the work plan is available to the public.
4. Respond to emerging accessibility concerns identified through various mechanisms such as other committees as well as staff, hospital patients, volunteers, students, foundation staff, researchers, physicians and contractors; and to members of the public.
5. Monitor changes to the legislation and adjust work of the committee appropriately as standards are developed.

Authority/Reporting Relationship:

- Jodi Butts Senior Vice-President Corporate Affairs and Operations
- Information sharing will occur with the Environmental Committee

Composition:

- Senior Vice President, Corporate Affairs and Operations
- Director of Rehabilitation
- Director of Occupational Health, Wellness and Safety
- Representative from Informatics
- Occupational Therapy Professional Practice Leader
- Patient Relations Facilitator
- Manager of Dentistry or delegate
- Director of Volunteer Services/Interpreter Services
- Representative from Building Services
- Diversity and Human Rights Advisor
- Risk Manager - Ad Hoc
- Manager, Telephone Communications
- Representative from Human Resources
- Nursing representative
- Director of Health Records and Registration
- Director of Community Development and Integration
- Representative from Communications and Marketing
- Security representative
- Social Work representative
- Director of Library
- Member of the Organizational Development Department
- Member from Re-development
- Member of the community who has a disability
- Member from Audiology

Meeting Frequency

The committee will meet 8 to 10 times per year

Responsibilities of Members:

1. Review the agenda and previous minutes, and come prepared to participate
2. Bring forward any relevant outstanding issues to the chair
3. Critically review circulation materials
4. Participate in the fulfillment of the committee's objectives
5. Assume responsibilities of the Chair when requested
6. Disseminate information to appropriate forums

Meeting Schedule:

Meetings will be booked a month in advance

Reviewed and Approved – September 22, 2011