

ANNUAL ACCESSIBILITY STATUS REPORT

For the
Espanola Regional Hospital & Health Centre
Espanola, Ontario
2022



espanola

regional hospital and health centre

hôpital régional et centre de santé

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EXECUTIVE SUMMARY

The purpose of the Ontarians with Disabilities Act, 2001 (ODA) is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province. To this end, the ODA requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

Espanola Regional Hospital & Health Centre is committed to treating all people in a way that allows them to maintain their dignity and independence. We believe in integration and equal opportunity. We are committed to meeting the needs of people with disabilities in a timely manner, and will do so by preventing and removing barriers to accessibility and meeting accessibility requirements under the Accessibility for Ontarians with Disabilities Act.

The 5 year Multi-Plan that has been prepared at the Espanola Regional Hospital & Health Centre. The plan describes:

- (1) the measures that the Espanola Regional Hospital & Health Centre has taken in the past, and
- (2) the measures that the Espanola Regional Hospital & Health Centre will take during the next 5 years (2019-2024) to identify, remove and prevent barriers to people with disabilities who live, work in or use the facilities and services of the Espanola Regional Hospital & Health Centre, including patients and their family members, staff, health care practitioners, volunteers and members of the community.

This Annual Accessibility Status Report will outline the status of actions items of the 2019/2024 Multi-Year Accessibility Plan.

OBJECTIVES

This purpose of this report is to:

- (1) Provide an update on the progress of those accessibility issues identified in our 2019-2024 Multi-Year Plan
- (2) Describe accessibility issues identified since the creation of the 2019-2024 Multi-Year Plan for which improvements have already been made
- (3) Describe accessibility issues identified since the creation of the 2019-2024 Multi-Year Plan for which improvements are underway or planned for the coming calendar year
- (4) Meet the requirements set out under subsection 4(3)(a) of the *Integrated Accessibility Standards Regulation (IASR)*

This report will be made available to the public via the ERHHC website and in accessible formats upon request.

DESCRIPTION of the ESPANOLA REGIONAL HOSPITAL & HEALTH CENTRE

VISION

Caring for the Health of our Community.

MISSION

Your partners for better health and wellness.

OUR VALUES

- Patients First
- Integrity
- Compassion
- Respecting Diversity
- Contributions of All

The Espanola Regional Hospital & Health Centre is located 80 km west of Sudbury on the Trans-Canada highway.

The Hospital serves population of about 13,500 people, with a catchment area that includes the Town of Espanola, villages of Whitefish Falls and Willisville, and Townships of Nairn & Hyman, Sables-Spanish Rivers and Baldwin.

Forest products are the dominant industry in the area with Eacom Timber Corporation operating a sawmill in Nairn Centre and Domtar Inc. operating a pulp and paper mill in Espanola.

The relocation of the Espanola Regional Hospital & Health Centre in 1988 represents the last component in a complex to provide a continuum of care for the residents of Espanola. The complex consists of a 30-unit apartment building designed for independent living, Senior's Drop-In Centre, 19 assisted living beds, a 62-bed long-term care unit, a 15-bed acute care facility, a 24-hour Emergency Department and Family Health Team. Even though all these components are physically joined and use common support facilities, the independent apartments, and the Senior's Drop-In Centre, are owned by the Town of Espanola Non-Profit Housing Corporation and managed by the Espanola Regional Hospital & Health Centre.

Hospital Commitment to Accessibility Planning

The Espanola Regional Hospital & Health Centre is committed to:

- (1) 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;
- (2) The participation of people with disabilities, the Patient Advisory Committee and the Joint Health and Safety Committee in the development and review of the accessibility plan; and,
- (3) Ensuring Hospital by-laws and policies are consistent with the principles of accessibility.

Barrier-Identification Methodologies

The following barrier-identification methodologies were utilized:

Methodology	Description	Status
Departmental Scans of each department by the Departmental Manager	Each manager was asked to perform an environmental scan of their department to assist with identifying any barriers that exist in relation to accessibility.	On-going - at each committee meeting, barriers that exist are discussed as well as barriers that have been removed.
JHSC Monthly Inspections	Every month this committee completes a facility wide inspection which includes observing/identifying barrier that exist. If a barrier is identified it is brought to the CQI Manager and Senior Manager for further review.	Ongoing every month
Patient Advisory Council	Members of the PAC; including people with disabilities were consulted to gather their input and perspective;	Patient Advisory Council members were invited to review annually and provide input.

Status Of Action Items

Barrier	Objective	Means to remove /improve	Resources	Timing	Responsibility	Status
Access to Main Entrance Bathroom	Improve access to these washrooms	An automatic door will be installed on this washroom .	Maintenance to install	To be completed by December 31, 2020	A. Renaud	Complete
Access to the Acute Care department	Improve access to this department for those that are in wheelchairs, use an assistive device or have mobility issues.	Lower the doorbell at this entrance so that persons with accessibility issues can reach it.	In house maintenance dept.	To be completed by November 2019	A. Renaud	Complete
Access to the public washroom in the Emerg. Depart. Access to the main hallway from the service corridor.	Improve access to this washroom for those in wheelchairs, use an assistive device or have mobility issues. Improve access to the main hall for all service workers that work with heavy loads/carts.	An automatic door will be installed on this washroom. An automatic door will be installed on this door.	Contracted out by maintenance depart. Contacted out by maintenance depart.	To be completed by December 31, 2020 To be completed by December 2020.	A .Renaud A.Renaud	Complete
Staff knowledge	Improve staff knowledge and awareness.	Assign Accessibility Training to all staff through our LMS.	LMS- Course in Surge Learning	To be completed by December 31, 2024	P.Mitroff/M. Desjardins	Complete

Annual Review and Monitoring Process

The Joint Health and Safety Committee (JHSC) will discuss and review the Accessibility Plan on an annual basis to review progress. The JHSC inspects the entire facility on a monthly basis which includes identifying accessibility concerns. If concerns are identified the committee will bring these forward to the CQI manager for further review with the appropriate Senior Manager and Departmental Manager.

The Patient Advisory Committee, including people with disabilities will discuss and review the Accessibility Plan on an annual basis to review progress. In addition, accessibility is discussed ad hoc at the monthly Patient Advisory Committee meetings.

Communication of the Status Report

The Annual Status Report will be made available to the public via the ERHHC website and in accessible formats upon request.

For more information

For more information on this status report or accessibility plan, please contact Suzanne Thompson, CQI Manager, at:

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Act and Regulations

Accessibility for Ontarians with Disabilities Act, 2005
Ontario Regulation 191/11
Ontario Regulation 429/07