



Joseph Brant Hospital Accessibility Plan

Multi-Year Accessibility Plan (MYAP)

Five year period from January 1, 2021

Last updated December 2022

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Burlington Land Acknowledgement

Burlington as we know it today is rich in history and modern traditions of many First Nations and the Métis. From the Anishinabek to the Haudenosaunee, and the Métis – our lands spanning from Lake Ontario to the Niagara Escarpment are steeped in Indigenous history.

The territory is mutually covered by the Dish with One Spoon Wampum Belt Covenant, an agreement between the Iroquois Confederacy, the Ojibway, and other allied Nations to peacefully share and care for the resources around the Great Lakes.

We would like to acknowledge that the land on which we gather is part of the Treaty Lands and Territory of the Mississaugas of the Credit.

1.0 Executive Summary

In June 2005, the Ontario government passed the Accessibility for Ontarians with Disabilities Act (AODA). The purpose of this enhanced Act is to implement and enforce standards of accessibility for all Ontarians. Joseph Brant's Accessibility Policy is consistent with the AODA, 2005 and the Integrated Accessibility Standards (IASR), Ontario Regulation 191/11.

Joseph Brant Hospital is committed to quality patient care for all. We provide a wide range of inpatient, outpatient and outreach services efficiently and in partnership with others. In fulfilling our mission, we strive at all times to provide equitable access and in a manner that respectful manner.

We are committed to ensuring all people have the same opportunity to access our services; in the same place and using similar means as all those in the community we serve.

2.0 Objectives

Every day, we are proud of our hospital's continued efforts to provide exceptional care to our patients and their families. JBH is committed to preventing, identifying and removing barriers that impede the ability of all people to access care and services. This includes patients, families, staff, physicians, volunteers, learners and members of our community. We are enhancing our hospital's structures and processes, to ensure we continue to meet the evolving needs of our patients.

3.0 Description of Hospital

JBH's team of over 194 physicians, 2,032 employees and 250+volunteers provide services to Burlington and surrounding area. Joseph Brant Hospital offers a wide range of patient programs including Medicine, Surgery, Emergency, Critical Care, Maternal and Child, Mental Health and Rehabilitation/Complex Continuing Care.

We offer a wide range of ambulatory care clinics and services, including cancer (oncology), diagnostic imaging, laboratory services, General internal medicine rapid assessment clinic, heart function clinic, fracture clinic, gestational diabetes clinic, communication clinic, hand & upper extremity clinic. During the 2021/22 fiscal year, the hospital had 13,741 Inpatient admissions, 50,731 Emergency visits. Our diagnostic imaging department performed 9,138 MRI Exams and 21,492 CT Scans. The ambulatory clinics performed 92,335 outpatient visits and scheduled 38,910 virtual care visits.

Located in the Hamilton Niagara Haldimand Burlington Brant (HNHBB) Region, Joseph Brant Hospital collaborates with other health service providers as we participate and support many key regional programs.

In 2017, the Hospital, Foundation, Government of Ontario and the City of Burlington partnered together to open a new seven-story Patient Tower, the hospital's first major redevelopment in 40 years. In 2018, extensive renovations were completed in the North Tower. Accessible design features were incorporated in all elements of the redevelopment construction.

When the world was faced with COVID-19 Pandemic in March 2020, JBH responded by designing, procuring and implementing the first Pandemic Response Unit (PRU) in Canada. The structure was constructed in two weeks, designed as a barrier-free facility. This included power doors, ramps, barrier free washrooms and shower facilities.

JBH Locations

Hospital - 1245 Lakeshore Rd. Burlington ON

Corporate Administration Offices -1221 Lakeshore Rd., Burlington ON

Brant Centre Community Health Clinic – 1182 Northshore Blvd., Burlington ON

Wellness House – 2160 Itabashi Way, Burlington ON.

4.0 Strategic Plan

Our [Strategic Plan](#) has been a truly collaborative endeavour involving our entire hospital team. Strong physician participation was a key focus in creating our strategic plan together with a broad based staff and community engagement playing an essential role in its development.

Building off our achievements over the past five years, Joseph Brant Hospital's Strategic Plan speaks to our continuous improvement journey to become a leading practice, community teaching hospital.

[Joseph Brant Hospital Strategic Plan 2017-2022](#)
[Together Building Our Future - One Step At A Time](#)

Mission Statement:

We are committed to exemplary health care. We are focused on clinical excellence, quality and patient safety. We have a passion for service.

At JBH we:

- Provide quality services to our community through a wide range of inpatient and outpatient programs focused on acute and chronic care
- Are a health care partner in delivering regional integrated services
- Develop innovative programs and services to meet the unique needs of our patients
- Provide a safe, supportive environment focused on healing, prevention and wellness
- Offer learning opportunities in a community hospital setting.

Vision: Compassionate Care. Exemplary Service. Every Time.

- Our Vision reflects our desire to provide leading practice health care in a modern, well-equipped facility
- Our health care provision will deliver a positive service experience
- Our patients will receive great care and superior service at every opportunity.

Values: CARE + Commitment:

Joseph Brant Hospital's mission is to provide quality patient care. One of the ways we do this is by living our organizational values: Compassion. Accountability. Respect. Excellence & Service. We believe good decisions reflect:

- Provincial and federal legislation
- Accepted principles of bioethics and business ethics, and professional codes of ethics
- The trust placed in JBH by our community.

Accreditation: Joseph Brant Hospital Receives Exemplary Status (2019)

The hospital must go through an Accreditation process every four years. This is very important for many healthcare organizations, as it is a way to demonstrate that we are following the highest standards and best practices in the delivery of care to our patients. It instills confidence from our community that we commit to a level of excellence in our approach to quality, safety and the patient experience.

In 2019, Joseph Brant Hospital (JBH) received Accreditation with Exemplary Standing by Accreditation Canada. Accreditation upholds our commitment to provide exemplary health care, through clinical excellence, quality and patient safety.

Diversity, Equity & Inclusion

Joseph Brant Hospital believes that every health care organization has an on going responsibility to improve diversity, equity, and inclusion efforts to better serve patients, families and employees.

We are committed to listening, learning and understanding to ensure every person can work and receive care safely, openly and honestly.

Diversity, Equity and Inclusion Action Table

The Diversity and Inclusion Action Table was formed in 2020. The purpose of the Action Table is to develop an annual Diversity and Inclusion Action Plan with prioritized activities aligned to the Diversity and Inclusion Framework.

The Action Table draws on the personal experiences and engagement of our employees, physicians, volunteers, leadership, patients and community.

5.0 Accessibility Committee Multi-Disciplinary Team

Name	Title	Program	
Peter Osgood	Chair – Director	Corporate Administration	Redevelopment, Facilities and Biomedical Engineering
Justine Boyd	Manager	Human Resources	Labour Relations
Nicole Rye	Consultant	Human Resources	Learning
Vacant	Specialist	Human Resources	Employee Health Services
Adriane Beaudry	Manager	Human Resources	Volunteer Services
Janelle Eade	Manager	Corporate Administration	Corporate Communications
Marco Mugheddu	Manager	Information Technology	IT and Switchboard
Cheryl Ramburn	Specialist	Patient Relations	Patient Experience
Erin Thrasher	Specialist	Clinical	Quality Improvement
Dana MacKay	Educator	Professional Practice	Ambulatory care & Oncology
Hazel Bowles	Occupational Health	Clinical	Allied Health
Jennifer Peter	Social Worker	Clinical	Allied Health
Jennifer Michetti	Manager	Clinical	Allied Health
Sonya Mohammadi	Manager	Corporate Administration	Health Information & Privacy
Lynn Clark	Advisor	Patient Family Advisor Committee	Member of Public
Vacant	Advisor	Member of Community	Member of Public
Laura Stock	Administrative Support	Corporate Administration	Redevelopment, Facilities and Biomedical Engineering

6.0 Barrier Identification Methodology and Prioritization

These barriers can be categorized as follows:

- Built Environment- Physical / Architectural Information / Communication
- Employment - Attitude
- Technology
- Customer Service / Policies and Practice

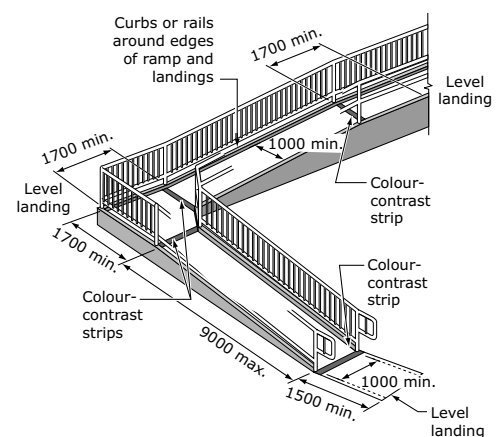
Barrier Prioritization

Process used in assisting the prioritization of each identifiable barrier includes:

- Review of legislated requirements
- Perform Site audit using known standards to identify deficiencies
- Frequency of stakeholder feedback
- Assessment of the population affected by the barrier(s)
- Practicality of a solution to be implemented
- Available resources/capacity assessment (cost/construction/phasing/timing)
- Risk assessment posed by barrier
- Coordination with capital or renovation projects
- Communication at JBH's Space Planning Committee

Accessibility Audit: Wellness House	
Date:	
Room Number:	
Room Name:	
Audit Question	Compliant (Yes or No)
Ramps	
General Requirements	
Minimum width of 900mm (35 1/2") between handrails	
Maximum gradient / slope of 1 in 12 and minimum of 1 in 19	
Have a level area of at least 1670mm (65 3/4") by 1670mm (65 3/4") at the top and bottom, and where a door is located in a ramp,	
- the level area extends 600mm (23 1/2") beyond the latchside, when door opens onto the ramp, or	
- extends 300mm beyond the latchside, when the door opens away from the ramp	
Have a level area of at least 1670mm (65 3/4") long and same width as the ramp at,	
- intervals of not more than 9m (29'-6 3/4") along its length, and	
- where there is a change of 90° or more in the direction of the ramp	
Have a slip-resistant and colour contrast or a distinctive visual pattern to demarcate the,	
- leading edge of a landing	
- beginning and end of a ramp	
- at locations where the ramp slope changes	

Figure 33
Ramps and landings
(See Clauses 5.5.4 and 8.2.7.)



a) Intermediate landings with a sharp turn

7.0 Current Identified Barriers and Multi Year Accessibility Plan

List of key or commonly found barriers and what type they are.

Type of Barrier: Built Environment

Description	Action	Strategy	Timeline 2022-25
North and South Tower			
Exterior Accessible Routes	Identification and protection	Provide high contrast markers on equipment and accessories located in the accessible route including proper edge protection	2023-2024
Access to Designated Accessible Parking Space	Clear widths and delineation	Relocation and modification of barriers and access paths	2023-2024
Accessible Recreational Trails	Identification and protection	Provide required identification and technical requirements outlined in IASR	2024-2025
Interior and Exterior Exit Stairs	Identification and protection	Provide proper handrails and tactile surface indicators (mainly in the North Tower and Parking Garage)	2022-2023
Accessible Washroom	Provide in areas that are deficient (Portions of North Tower that has not been Redeveloped)	Renovate existing to comply to current standards	2024-2025
Brant Centre			
Multi-Occupant Washrooms with an Accessible Stalls	Provide updated fixtures and accessories	Renovate existing washrooms to accommodate a proper barrier-free stall and clear space requirements	2023-2024
Universal Washroom	Provide an accessible washroom for the facility	Renovate existing single occupant washrooms to meet requirements of a Universal Washroom	2022-2023
Interior Doors	Provide door hardware to increase clear width when door is on open position	Provide offset hinges to increase door width and replace doors with vision panels	2023-2024
Exit Stairs	Identification and protection	Provide proper handrails and tactile surface indicators	2023-2024

Type of Barrier: Built Environment

Description	Action	Strategy	Timeline 2022-25
Exterior Access Route	Identification and protection	Renovate existing access route to meet accessibility requirements for exterior paths	2023-2024
Wellness House			
Multi-Occupant Washrooms with an Accessible Stalls	Provide updated fixtures and accessories	Renovate existing washrooms to accommodate a proper barrier-free stall and clear space requirements	2023-2024
Universal Washroom	Provide an accessible washroom for the facility	Renovate existing single occupant washroom to meet requirements of a Universal Washroom	2022-2023
Interior Doors	Provide door hardware to increase clear width when door is on open position	Provide offset hinges to increase door width and replace doors with vision panels	2023-2024
Accessible Parking Stalls	Identification and protection	Provide required quantity, properly identify and locate accessible parking stalls	2024-2025
Exterior Accessible Route	Identification and protection	Work to be done at the same time as the work for the accessible parking, to provide crosswalks, curb ramp and delineation of passenger loading area	2024-2025
Administration Building (HMFHC)			
Offices and Meeting Rooms	Define the accessible path	Reconfigure room layouts and or fixed furniture to accommodate required clear widths and clear spaces	2023-2024

Type of Barrier: Information/Communication

Description	Action	Strategy	Timeline 2022-25
Translation services Sign language services	Implementation of new interpreter services	Procure and implement new solution required under the regulations act	2022-2023
External website content :	Review and make accessible web content	Procure and build a new JBH external website to meet accessibility regulation standards	2023-2024
Inpatient entertainment and digital Screens: -no ability to add closed captioning or recorded audio -font scale cannot meet regulation standards	Provide an accessible inpatient entertainment and digital screen solution.	Procure and implement digital screen solution that meets regulation standards. Hire an Accessible Media Producer.	2024-2025
Corporate signage, wayfinding and advertising policy required	Amend or write new policies.	Write corporate signage, way finding and advertising Policies and Procedures to incorporate accessibility regulations.	2022-2023
Information posted at entrances is not accessible.	Make information available in audio format.	Procure and implement audio recordings at entrances.	2024-2025
Town Hall videos cannot offer closed captioning	Investigate alternative settings to allow for closed captioning.	Procure solution and implement to meet accessibility regulations.	2023-2024
Review status of accessibility Hospital-owned software apps	Review functionality of hospital-owned software apps in meeting accessibility regulations.	Procure and implement add-ons to meet accessibility regulations.	2023-2025
Implement Review of all hospital-lead Procurement to meet accessibility requirements	Review procurement mandates for accessibility requirements.	Amend hospital procurement standards as required.	2023-2024

Type of Barrier: Information/Communication

Description	Action	Strategy	Timeline 2022-25
Emergency Preparedness Plan for individuals with Accommodation	Publish the emergency disaster plan to the website for access.	Create and publish to web, a plan which can be used or customized for accommodation requirements. Develop a Policy for Emergency Response Planning for Individuals with Accommodation.	2023-2024
Implement Review of hospital informational – based resources (including Patient Education materials and hospital-issued communication) in print, digital, visual formats, meeting Accessibility requirements	Audit hospital- owned informational-based resources to determine need or relevance in meeting accessibility regulations	Revise, redesign, and convert materials into an accessible digital format. Hire an Accessibility officer with the skill to make external documents accessible as requested.	2023-2025
Hospital-owned documents (including PDFs) are not accessible.	Procure a vendor to tag external documents with a notification that JBH is working to remedy the accessibility requirements.	Build into culture and business practice to build accessible documents.	2023-2024

Type of Barrier: Employment

Description	Action	Strategy	Timeline 2022-25
<u>Cultural</u>			
Org. cultural issues	Standardized messaging, interpersonal communication through an accessible lens	More engagement with Diversity, Equity and Inclusion Committee have a dedicated resource	2023-25
<u>Cognitive</u>			
Consideration for Accessibility are not incorporated into plans, approach and implementation of strategy, and organizational communication Language	Embed in standard practice	Include as part strategy to roll out as part of any new employment	2024-25

Type of Barrier: Technology

Description	Action	Strategy	Timeline 2022-25
In person registration	Mobile Application to allow virtual booking	Implement Convey app	Spring 2022
Screen readers	Update Web attachments to meet current Accessibility Standards	Accessible web update	2022-2023 OR 2023-2024?
Closed caption TV	Investigate ability to utilize close captioning	include closed caption technology with next generation of patient entertainment system	2024-25
Use of Pocket talkers roll out hospital wide	Formalize the current process	Corporate strategy to distribute on demand along with operating instructions	2023-24
Implement a notification system of disruption of service, due to mechanical malfunctions or weather related closures	Implement user of web and social media to push /post notices in real-time	Include in web site update and create disruption notice page	2024-25

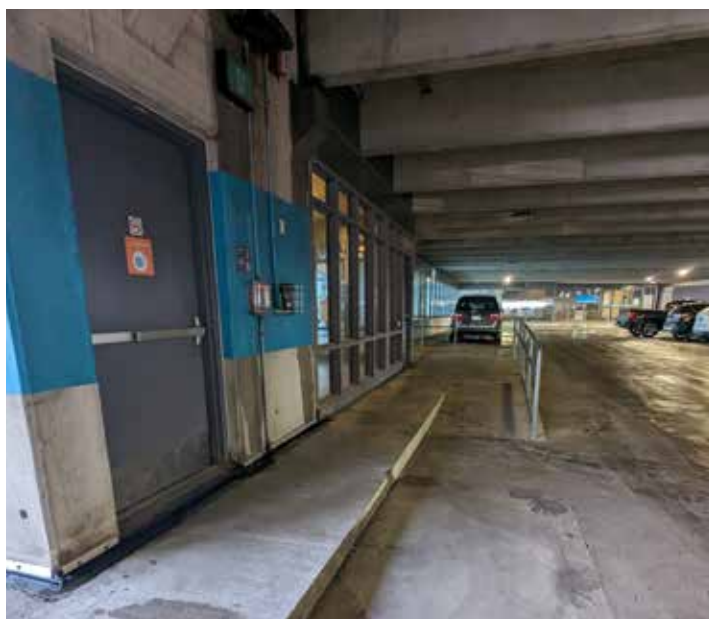
Type of Barrier: Customer Service

Description	Action	Strategy	Timeline 2022-25
Source permanent funding for projects	Secure leadership approval for dedicated funding	Include in Capital Request Committee for funding allotment	2023-24
Make barrier removals a priority as part of corporate strategy	Investigate the approach and organizational support	Include in all future changes or moves	2022-23
Update Customer Service Policy and Procedure	Underway		2022-23
Update Service and personal support Animal Policy and procedure In person registration	Underway		2022-23

8.0 Barrier Removal Initiatives Completed

This section describes the barriers that have been identified and completed:

Type of Barrier	Description	Action Plan
Built Environment	Additional curb ramps in parking garage	Provided additional curb ramps at Level 2 – 4 of the parking garage
Employment		
Information/communication	Underway	
Technology	Procured and implementation the interpreter solution from VOYCE	JBH has procured and implemented an interpreter services solution. The solution adheres to S12 (1) pg.6 of the Accessibility for Ontarians with Disabilities Act and meets the needs of the hearing impaired by connecting them to interpreter services of over 240 languages and dialects using an easy to use app driven solution on iPads provided by the hospital as well as phone as another option of choice. Proper procedures and information have been distributed to all departments and is accessible via the intranet. The external web site also has information regarding the service.



Annual Review and Monitoring Process

The Accessibility Committee meets bi-weekly to review the progress of work occurring. It is the responsibility of the committee to ensure initiatives/ projects move ahead according to schedule. Members of the committee are responsible to educate the organization and community of its mandates and promote its activities.

The chair provides Quarterly Reports the Director Operation Committee who in turn report to the Senior Leadership team (SLT). The committee must provide the SLT with an annual update which is then published on line and posted with the ministry directorate.

Communication of the Plan

- JBH's Accessibility Plan is available to the community and staff on the JBH website www.josephbranthospital.ca
- Comments and feedback can be submitted via the JBH website to Patient Relations
- Information regarding accessibility at JBH is also included in the JBH Inpatient Handbook.

Education Plan

- JBH provides mandatory learning for all new hires. Staff are required to complete education on Accessible Customer Service and introduction to the AODA and IASR through an online module and test. Additional education is provided to employees with direct involvement in Communications, Transportation, Redevelopment, and Information Technology as required to fulfill their duties in accordance with AODA and IASR.
- Accessibility education is a component of JBH's annual mandatory learning modules in order to meet compliance with the Accessibility Standards for Customer Service OFT ref. 492/07

Accessible Training Plan Online Learning Platform

- JLearn is our learning platform for all employee online learning and training records. It is intuitive, easy to navigate, and provides a user-friendly experience
- Access JLearn on a personal computer or mobile device 24/7.
- The All-Staff job aid below can be used to support you through the log in process, as well as how to view, and complete learning assignments. It also provides information about how to reset your password if you've forgotten it along the way.

Emergency Code Response Plans

The Emergency Preparedness Response Plans for JBH are published on the JBH Intranet as well as in a hardcopy manual, available to each area, and command center. The **Emergency Colour Code List** provides staff with a quick summary of the hospital's codes.

- Manage patients and hospital activities during times of emergency or disaster.
- Initiate the response and recovery phases when and by whom through designation of roles and functions.
- Code terminology is used to identify an emergency or disaster situation that instigates an immediate response to mitigate potential losses including life or harm to individuals, property, facility or environment. It is meant to be an internal staff communication vehicle that minimizes public alarm.

Emergency and disaster codes are only used internally or when communicating with other hospitals. The codes used are the same as those established by the Ontario Hospital Association. Any communication to external agencies in an emergency disaster is through plain language that clearly describes the emergency or disaster situation.

The hospital participates annually with the Burlington Fire Department to practice a Mock Code Red and Mock Code Green (Evacuation) drill in order to maintain.



Sharing your feedback

Your feedback is important to us. If you have questions about any committee at Joseph Brant Hospital, please email directly, Emails are monitored on a daily basis. Joseph Brant Hospital has committed to streamlining the feedback process for Customers.

To meet that commitment we have dedicated a specific email address:

accessibility@josephbranthospital.ca

If you are a patient and would like to share a related experience, please contact the [Patient Experience Office](#)