
# MINISTRY OF MINISTRY OF HEALTH AND LONG-TERM CARE

## 2012-2013

## Annual Accessibility Plan

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# Introduction

Each year, the Ontario Public Service (OPS) sets a course to prevent, identify and remove barriers for persons with disabilities. Every ministry participates through the preparation of its annual accessibility plan, as required under the Ontarians with Disabilities Act, 2001 (ODA).

The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is Ontario's roadmap to become accessible by 2025. It includes accessibility standards in:

- customer service
- information and communications
- employment
- transportation
- built environment

This year the accessibility plans must also address the Integrated Accessibility Regulation (IASR) under the AODA, enacted June 2011. The IASR required the OPS to develop a multi-year accessibility plan (MYAP) to prevent and remove barriers for persons with disabilities. It published the OPS MYAP on January 1, 2012. This included a statement of commitment for the OPS to demonstrate leadership for accessibility on January 1, 2012:

> The OPS endeavours to demonstrate leadership for accessibility in Ontario. Our goal is to ensure accessibility for our employees and the public we serve in our services, products and facilities.

Building on the OPS Statement of Commitment, the OPS Multi-Year Accessibility Plan, and the Ministry's 2011-2012 former accessibility plan, the new 2012-13 accessibility plan will continue moving the Ministry of Health and Long-Term Care and the OPS to the goal of demonstrating leadership in becoming an accessible province for all Ontarians.

This plan outlines the specific steps the government is taking to improve opportunities for persons with disabilities.

To view every ministry's Accessibility Plan, visit Ontario.ca.

# Section One: Report on Measures to Identify, Remove and Prevent Barriers in 2011-2012

The Government of Ontario is working to achieve the most accessible province by 2025.

Since 2001, the OPS has been complying with the obligations of the ODA and prepared an annual accessibility plan, which it has made available to the public through the Government of Ontario's public website.

During the last ten years, the Ministry of Health and Long-Term Care has been a leader in accessibility. Some of its memorable achievements include:

- The ministry's Long-Term Care Homes Act, 2007 and regulation govern the operation of long-term care homes, which provide care and services to adults who are no longer able to live in the community because they require 24-hour on-site nursing care or personal support. The following are examples of what long-term care homes must provide to ensure accessibility for their residents:
    - Homes must be equipped with resident-staff communication and response systems that can be easily seen, accessed, and used by residents, staff, and visitors at all times;
    - Mobility devices, including wheelchairs, walkers and canes, must be available at all times to residents who need them on a short-term basis;
    - Strategies must be developed and implemented to meet the communication needs of residents with compromised communication and verbalization skills, or residents with cognitive impairment;
    - All required information must be posted in the long-term care home in an easily accessible location; this information must be communicated to residents who cannot read the information; additionally some of the required information must be posted in print with a font size of at least 16;
    - There must be a written plan of care for each resident which is based on interdisciplinary assessment of the resident's needs.

- The Assistive Devices Program improved their service delivery by adding an after-hours voice-mailbox for clients inquiring about their applications for assistive devices. Clients who call Monday to Friday before 8:30am or after 5:00pm, or on weekends and holidays, may select an option to leave a message, which will be returned within one business day. Toll-free TTY service is also available.

- The Consent and Capacity Board, which holds hearings and makes decisions on the needs of people with a mental health disability or are incapable of consenting to treatment, provides American Sign Language (ASL) and la Langue des Signes Québécoise (LSQ) interpretation and video-conferencing options for people with disabilities who are required to attend hearings. Many applications to the Board involve a review of a person who has been committed to a psychiatric facility, or a review of a person's capacity to consent to treatment.

- The Long-Term Care Home Design Manual promotes innovative design standards in long-term care homes, which help service providers create positive environments that consider the diverse physical, psychological, social and cultural needs of all long-term care home residents. The goal is to support well-coordinated, interdisciplinary care for residents who have diverse needs, provided in an environment that is as comfortable as possible.

- Regulation 552 of the Health Insurance Act was amended to expand the definition of a dependent, in certain situations, to include adult children who are dependent because of a mental or physical disability, for the purposes of OHIP coverage.

- People with disabilities who are unable to attend an OHIP office in person to renew their health card may have one mailed to them, once their physician submits an Exemption Request form certifying that they are unable to attend an OHIP office.

- The ministry developed American Sign Language (ASL) videos for the West Nile virus, flu and pandemic campaigns, and made them available on the ministry's public website; the flu television commercial was close-captioned for people who are hearing impaired; and flu shot fact sheets were translated into 24 languages to ensure their accessibility to Ontario's diverse ethnic population.

- Regulation 562 under the Health Protection and Promotion Act was amended to permit a service dog for a person with any medical condition, to be present in the public area of food service premises. Previously, only a service dog for the blind was permitted in food service premises. The ministry also developed a new policy to allow guide-dogs-in-training to enter OHIP offices with their able-bodied trainers.

In 2011-2012, the government continued to comply with the Accessibility Standards for Customer Service regulation. As well, it had begun applying initiatives to meet compliance of some of the requirements of the Integrated Accessibility Standards Regulation (IASR) in the areas of employment, information and communications, transportation and procurement. The government continues to implement initiatives to enhance accessibility in other areas such as the built environment.

The following is a summary of the accessibility initiatives the Ministry of Health and Long-Term Care implemented last year, as a result of the 2011-2012 Accessibility Plan.

## Reporting on 2011-2012 AODA obligations

## Customer Service

MOHLTC remained committed to ensuring that people with disabilities were able to obtain accessible goods and services with the same quality and timeliness that others receive. The ministry continued to maintain compliance with the requirements of the Accessibility Standards for Customer Service, and the applicable sections of the Integrated Accessibility Standards Regulation. In 2011-2012, the ministry filed its customer service accessibility compliance report, and made the following advancements in the areas of Accessible Customer Service:

- All new staff were required to complete mandatory accessible customer service training within three months of hire. Ministry orientation materials have been updated to ensure all new staff are made aware of their obligations under the AODA.
- Training records, confirming that appropriate staff have completed their training obligations, are maintained within each office.
- Clients and staff had several options available to provide feedback on the accessibility of the ministry's customer service, including via telephone, fax, email, and through the Contact Us form on the ministry's website. A process is in place to ensure that all feedback collected is reviewed and analysed to identify potential gaps in customer service, and appropriate actions are taken.
- The ministry posted service disruption notices in work locations that underwent maintenance repairs or improvements, and provided information on where alternate service was available during the length of the disruption.

## Information and Communications

- The ministry reviewed the accessibility of its public websites that had undergone significant changes in 2011-2012. Any websites and web-based applications that did not conform to the World Wide Web Consortium (W3C) Web Content Accessibility Guidelines (WCAG) 2.0, Level AA requirements outlined in the IASR, were flagged for remediation or redevelopment. Ministry web coordinators are continuing to work on accessibility improvements to all public websites.
- All staff have been advised of the requirement to ensure that any information they produce for public distribution must be made available in an accessible format. Tools and guides were promoted on the ministry's intranet, and featured in an article in the ministry's internal newsletter.
- Ministry web coordinators were trained on HiSoftware Compliance Sheriff, an accessibility assessment tool that checks the accessibility of websites, using W3C Web Content Accessibility Guidelines to identify problem areas.

## Employment

- Staff who prepared the ministry's Continuity of Operations Plan were provided with tools and resources to ensure that accessibility was integrated into the annual plan.
- Managers were advised to work with their employees with disabilities to develop customized workplace emergency response plans; staff were encouraged to help colleagues with disabilities safely evacuate the building.
- The ministry has worked to improve the accessibility of application forms for the Physician Re-Entry program. The purpose of the Re-Entry program is to increase flexibility in the medical training system to allow practising physicians in Canada to switch specialties (e.g. family medicine to psychiatry) by re-entering postgraduate medical training.
- Development has begun on a web-based administrative tool, fully accessible to all users, which would help recent graduates of a nursing program find employment.

## Procurement

- Guidelines for implementing the procurement provisions under the ODA and AODA-IASR have been included as a part of the ministry's procurement training process.
- Staff were advised of the tools and resources available to help them ensure accessibility from beginning to end. Accessible procurement contract language was included in competitive documents to remind staff of the requirement in the planning stage.
- All procurement bids submitted by potential vendors were evaluated using accessibility criteria, such as demonstrated experience.

## Other

- The Health Equity Impact Assessment (HEIA) tool was promoted at various events across the health sector to support the identification and removal of potential barriers to accessibility. At the May 28th HEIA Forum, attended by nearly 300 health sector planners and professionals, an updated version of the tool was launched (HEIA 2.0), to include public-health-specific content. This made the tool more accessible to a wider audience; for example, the Centre for Addiction and Mental Health now uses the HEIA tool in their corporate strategic planning processes.
- Since the HEIA website was launched in March 2011, and updated in July 2012, the website has been viewed by over 15,000 visitors, with the largest number of visits during promotional events in 2012. Training will be provided on an ongoing basis.
- The ministry adopted the OPS statement of commitment -- to ensure accessibility for our employees and the public we serve in our services, products and facilities -- as well as other documented policies on accessibility.

# Section Two: Measures Planned for 2012-2013

## Our Statement of Commitment:

The OPS endeavours to demonstrate leadership for accessibility in Ontario. Our goal is to ensure accessibility for our employees and the public we serve in our services, products and facilities.

This year, the Ministry of Health and Long-Term Care accessibility plan focuses on various areas. In order to demonstrate leadership in accessibility, our ministry is planning to undertake the activities described below. At a minimum, these initiatives will support compliance with the existing Accessibility Standards for Customer Service and Integrated Accessibility Standards (IASR) under the AODA and other areas.

- Employment
- Information & Communications
- Built Environment
- Procurement
- Accessibility Training

## Customer Service

The Ministry of Health and Long-Term Care is committed to ensuring that people with disabilities receive accessible goods and services from us. This means they will receive goods and services with the same high quality and timeliness as others.

- The ministry will continue to be in compliance with the Customer Service Standard, and will provide updates to staff with relevant information as needed.
- Staff will continue communicating with people who have disabilities in a way that takes their disability into account, as outlined in the OPS Accessible Customer Service Policy, which the ministry has adopted.
- Public feedback on the accessibility of ministry goods and services will be analyzed throughout the year to identify areas for improvement; issues will be resolved in a timely manner.
- The ministry will continue to implement the service disruption protocol by posting signs to advise the public where alternate service may be obtained, while repairs to existing service locations are completed.

- Staff will be reminded to use the Human Resources and Skills Development Canada Guide to Planning Inclusive Meetings, whenever organizing a public event which may include attendees with disabilities.

## Information and Communications

The Ministry of Health and Long-Term Care is committed to making government information and communications accessible to people with disabilities. The information we provide, and how we communicate it, are key to delivering our programs and services to the public.

- The ministry's web coordinators are finalizing a plan to review the information on all ministry intranet and internet sites for accessibility.
- Staff will be encouraged to incorporate accessibility considerations into the preparation of new communications materials to ensure that information is accessible to everyone.
- The ministry will continue to make staff aware of the tools and resources available through the Accessibility@Source program to help them prepare their documents in an accessible format.

## Employment

The Ministry of Health and Long-Term Care is committed to fair and accessible employment practices that attract and retain talented employees with disabilities. People with disabilities who are OPS employees know they can participate fully and meaningfully in services and employment.

- The ministry will continue to build on staff awareness of employment practices, and continue to provide training opportunities to staff to ensure improved accessibility for persons with disabilities.
- Managers will implement the direction they have received from HROntario with regard to accommodating employees with disabilities.
- As required, individual accommodation plans will be documented by managers to ensure the full participation of all employees in the workplace.
- Job applicants with disabilities will continue to be notified of the availability of accommodation during the recruitment, assessment and selection processes; suitable accommodation, which takes into account the applicant's disability, will be provided after consultation with the applicant.
- The ministry will continue to follow the OPS Employment Accommodation and Return to Work Operating Policy to help employees return to work after having been absent due to a disability.

- An employee's accessibility needs will be taken into account when assessing their performance management, career development and advancement, as well as redeployment opportunities.

## Built Environment

The Ministry of Health and Long-Term Care is committed to greater accessibility in, out of, and around the buildings we use.

- The ministry will continue to follow the guide to Standards for Barrier-Free Design of Ontario Government Facilities at new and existing office locations.

## Procurement

The Ministry of Health and Long-Term Care is committed to integrating accessibility considerations into our procurement processes. We ask potential suppliers to tell us about the accessible options they offer. We include accessibility considerations in our evaluation criteria.

- The ministry will continue working with contractors to ensure the goods and services they may be providing are fully accessible. Training will be provided on an ongoing basis throughout the year.
- Potential vendors will continue to be asked to provide accessible options in their proposals. Accessibility considerations will continue to be part of the evaluation criteria to determine the successful vendors.

## Accessibility Training

- The ministry will continue working with staff to ensure that the goods and services they are providing to the public are fully accessible. Customer service training will be provided on an ongoing basis throughout the year.
- The ministry will advise staff to complete the Centre for Leadership and Learning training on the requirements of the IASR accessibility standards, and on the Human Rights Code as it pertains to persons with disabilities. Training will be provided on an ongoing basis as required.

## Other

- Support the broader OPS public facing multi-year accessibility plan to 2025, which outlines the vision and plans for removing and preventing barriers to accessibility.

# Section Three: Review of Acts, Regulations and Policies

In support of our commitment to improve accessibility for people with disabilities, the Ministry of Health and Long-Term Care will continue to review government initiatives, including legislation and policies, to identify and remove barriers.

## Acts and Regulations Reviewed in 2011-2012

The Ministry of Health and Long-Term Care is committed to ensuring that our Acts and regulations are reviewed for potential accessibility barriers. A process is in place within the ministry to ensure that any new legislation or regulations, as well as amendments to existing legislation and regulations, are reviewed for accessibility using the OPS Inclusion Lens.

- Legal staff used the training they received on how to use the OPS Inclusion Lens to review laws and to remove barriers to accessibility.

## Acts and Regulations to Be Reviewed in 2012-2013

The OPS Diversity Office and the Ministry of the Attorney General have developed a coordinated approach to continue with the review of government legislation for accessibility barriers. In this next phase, high-impact statutes that meet the following criteria will be reviewed:

a. Statutes that affect persons with disabilities directly;
b. Statutes that provide for the delivery of widely applicable services or programs;
c. Statutes that provide benefits or protections;
d. Statutes that affect a democratic or civic right or duty.

This phase of the review will be completed by the end of 2014. The government has decided to review these statutes because it is anticipated that changes in these areas will have the highest impact on those Ontarians who have accessibility needs. We will continue to report on the review in our annual accessibility plan.

- In support of the Premier's commitment to review all Ontario laws for accessibility barriers, the ministry will work with the Ministry of Attorney General to develop a plan to review targeted high-impact statutes that affect persons with disabilities directly, by the end of 2014.

## Identifying, Removing and Preventing Barriers with the OPS Inclusion Lens

In 2011, the Ontario Public Service (OPS) launched the OPS Inclusion Lens. The OPS Inclusion Lens is an analytical tool that helps staff incorporate elements of inclusion into their work through an enhanced understanding of diversity and accessibility. The Inclusion Lens can be used when initiating a project or reviewing policies, programs, legislation, guidelines and procedures. The OPS Inclusion Lens can assist in identifying, removing and preventing barriers to accessibility and other dimensions of diversity.

In 2011-2012, the Ministry of Health and Long-Term Care encouraged staff to complete training on how to apply the concepts of the Inclusion Lens tool developed by the OPS Diversity Office. The purpose of this tool is to ensure the principles of accessibility are applied in the development of new, or revision of existing, legislation, ministry policies or programs. Staff who completed the course reported that the tool has been invaluable.

In the future, the ministry will:

- make staff aware of the tools and resources available to help them understand and apply the OPS Inclusion Lens when developing new policies or programs;
- continue to encourage staff to use the OPS Inclusion Lens to review acts, regulations, policies, programs, practices and services;
- encourage staff to include in their annual learning plans the OPS Inclusion Lens e-course, available through the Centre for Leadership and Learning; and to complete the training by December 31, 2013.

# Glossary of Terms/Acronyms

AODA – Accessibility for Ontarians with Disabilities Act, 2005

HEIA – Health Equity Impact Assessment

IASR – Integrated Accessibility Standards Regulation

MYAP – Multi-Year Accessibility Plan

MOHLTC – Ministry of Health and Long-Term Care

OPS – Ontario Public Service

ODA – Ontarians with Disabilities Act, 2001

WCAG - Web Content Accessibility Guidelines

# For More Information

Questions or comments about the Ministry of Health and Long-Term Care accessibility plan are always welcome.

Please phone:

General inquiry number: 416-326-1234

General inquiry TTY number: 416-327-4282

1-800 number: 1-866-532-3161 (Toll Free in Ontario only)

TTY 1-800 number: 1-800-387-5559

E-mail: infoline.moh@ontario.ca

Ministry website address: http://www.health.gov.on.ca

Visit the **Ministry of Community and Social Services Accessibility Ontario** web portal. The site promotes accessibility and provides information and resources on how to make Ontario an accessible province for everyone.

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