DOROTHY LEY HOSPICE

Multi-year Accessibility Plan 2020-2025

Statement of Philosophy:

Dorothy Ley Hospice strongly supports an integrated approach to palliative care based on the right of the individual's choice in determining how to address one's unique needs and desires for support. Services extend to the individual, the entire family and to those who have suffered a loss. Staff and volunteers work as an integrated team along with community health care professionals and service providers.

Statement of Commitment:

Dorothy Ley Hospice is committed to enhancing the quality of life to those served in a barrier free environment. The Hospice has passed policies to endorse this commitment. The Hospice has also established a board committee, the Community Engagement Committee (CEC), to provide advice, guidance and expertise to the Board and to the senior staff of the Hospice on issues affecting our community. This committee will be evolved to be a client/family advisory committee and will continue the mandate of providing advice and guidance on programs and services offered by the DLH. This committee will be responsible for ensuring access and equity for the DLH community.

In furtherance of its commitment to accessibility, Dorothy Ley Hospice has adopted the principles of accessibility (dignity, independence, integration, and equal opportunity) and has trained its staff in the customer service standard of the Accessibility for Ontarians with Disabilities Act, 2005. The CEC conducted a physical audit of the residence with advice as to modifications which need to be put in place in 2015. A regular audit every two years is conducted by our health and safety committee to identify barriers to access and to recommend modifications.

The Hospice is continuously examining barriers or potential barriers to its clients, families, staff, volunteers or visitors in our community programs as well as in our residence. Policy development and training on polices is on-going. Customer feedback is solicited, recorded and studied and changes implemented where feasible. The Hospice recognizes that providing environments that are free of barriers is an on-going process.

Compliance with Standards:

The Hospice is striving to meet or exceed the standards of the Ontario Human Rights Code, the Accessibility for Ontarians with Disabilities Act, CARF Accreditation Standards and all legislation regarding equal treatment for all people. The residence is in compliance with all applicable building codes.

DOROTHY LEY HOSPICE

Multi-year Accessibility Plan 2020-2025

Section One: Past Achievements to remove and prevent barriers

Architectural

The building of the residential hospice was completed in 2009 and the first residents were admitted in 2009. The resident rooms are on the main floor of the two story structure. The construction of the building including a barrier free approach to the extent that was possible.

The corridors are wide and well-marked. Contrasting paint has been used to delineate various areas. There are no stairs for residents. Entrance doors to the building are covered and have wheelchair access. Living room and dining room are open and readily negotiable for residents and staff/volunteers. The building is in compliance with the Ontario Building Code, fire regulations and codes and the City of Toronto building codes. Meeting rooms, conference rooms, staff offices and storage areas are on the lower level and are accessible by a stairway and an elevator.

Customer Service

Dorothy Ley Hospice has policies, procedures and practices in place to provide assistance to people with disabilities. Service animals have been utilized within the residential Hospice. Policy development continues as new issues arise. Staff in the community programs are also aware of clients with disabilities and make every effort to include such clients in their relevant programs.

Employment

Dorothy Ley Hospice is committed to the principles found in the Ontario Human Rights Code and provides an employment environment for staff and volunteers without regard to gender, marital status, and place of birth, disability or any other prohibited ground. Staff is assigned in the residence based on their job classification (RN, RPN, and PSW) and the needs of the patient. The residence has qualified staff on site at all times. Appropriately trained and qualified staff conducts community programs across our community. The hospice also offers accommodations during the recruitment and hiring process to ensure equal access for all. For employees identified as having a disability a plan is developed to support any accommodations that may be necessary.

Environmental

The Hospice is a two story building with residents on the main level and administration and meeting rooms on the lower level. The main floor of the building is quiet, well-lit and readily accessible with soft lighting and a calming effect. Each resident has a private room with an accessible washroom. The kitchen is open and adjacent to the dining area. However, it is sufficiently removed from the patient rooms so as not to create undue background noise. Everyone entering the building sign in at the front desk for security purposes.



Multi-year Accessibility Plan 2020-2025

Limited parking is at the front of the building with more parking nearby. Currently, parking in front of the residence is free. There are two handicap parking spots.



Multi-year Accessibility Plan 2020-2025

Transportation

There is public bus service from both Toronto and Mississauga close to the Hospice. There are also exchange stations for Wheeltrans from Toronto and TransHelp from Mississauga. There is also a parking lot in front of the Hospice with designated accessible spots and extra parking within walking distance of the Hospice.

Training

All staff and volunteers of Dorothy Ley have received customer service training and all are well aware of the varying needs and human rights of persons with disabilities. Every effort is made to accommodate community clients' needs, rights, and abilities.

Everyone at Dorothy Ley Hospice works to make the end-of-life experience as positive as possible for the patient and their families. In keeping with this caring philosophy, staff and volunteers are acutely aware of the individual needs and rights of residents and clients. The prevailing attitude is one of "can do" and every effort is made to accommodate individual needs, and human rights in keeping with personal dignity, independence and integration. Care is taken to ensure that members of our community have equal opportunities to access Dorothy Ley services. DLH will provide additional accommodations for clients, visitors, staff and volunteers as needed with individualized plans.

DOROTHY LEY HOSPICE

Multi-year Accessibility Plan 2020-2025

DEFINITON OF A BARRIER (AODA, 2005)

Barrier means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

A. Methodology applied to identifying barriers

Barriers will be identified though:

- Review of policies and procedures
- Feedback from: Persons served, families, volunteers, visitors and staff.
- Audit of physical space of residence
- Exit surveys of staff
- Intake interviews with persons served
- Incident Reports

B. Classification of barriers

Barriers at Dorothy Ley Hospice shall be classified as:

- 1. Customer Service
 - a. Policies and procedures
 - b. Attitudes
 - c. Employee training
- 2. Information/Communication
 - a. Signage
 - b. Telephone
 - c. Website
- 3. Environmental/Architectural
- 4. Employment
- 5. Transportation

DOROTHY LEY HOSPICE

Multi-year Accessibility Plan 2020-2025

C. Barriers to be included in plan:

Barriers will be listed for inclusion in the Plan based upon:

- Barriers identified by persons served, staff/volunteers and other stakeholders
- Legislative requirements
- Accreditation standards
- Risk management analysis
- Best practices
- Innovation

D. Barriers requiring action:

Barriers which require action shall be ranked in accordance with the following criteria:

- Required by legislation
- Risk posed by barrier
- Impact of barrier on residents, clients, staff, volunteers, visitors
- Resources required

Multi-year Accessibility Plan 2020-2025

Section Two: Strategies and Actions

1. Customer Service

Customer Service	The Dorothy Ley Hospice is committed to providing accessible customer service to people with disabilities. This means that we will provide services to people with disabilities with the same high quality and timeliness as services to all other individuals. The Dorothy Ley Hospice continues to provide volunteers and employees with accessible customer service training, and ensure that all policies that are created or reviewed are updated in such a manner as to endure dignity, independence, integration and equal opportunity in mind.						
Requirement Area	Action / Task	AODA Compliance Required by:	Most Responsible Person	Review Date	Notes / Follow up Required		
Customer Service Training	All staff and volunteers must have completed the customer service training through the AODA	Jan.1 2012	Executive Director	Ongoing with new staff and volunteers	Anniversary performance evaluations		
	File an Accessibility Compliance Report	Dec 31, 2010, 2013, and 2015, 2019	TBD	Dec 2021	Completed for 2015 next submission date January 2019		
	Provide accessible transportation services	July 1, 2011	Community Manager	Feb 2022	Partnership with Etobicoke Services for Seniors for Transportation support		
	Provide accessible emergency and public safety information	Jan 1, 2012	Health & Safety Committee	Ongoing	Completed		
	Provide staff with disabilities emergency information	Jan 1, 2012	Health & Safety Committee	Ongoing	Completed		
	Create accessibility policies and a multi-year plan	Jan 1, 2014		Annual review	Completed		
	Buy goods, services or facilities that are accessible to people with disabilities	Jan 1, 2014	Health & Safety Committee	Ongoing	Ongoing		
	Include accessibility features when purchasing or designing self-service kiosks	Jan 1, 2014	N/A	N/A	N/A at this time		
	Train your staff on Ontario's accessibility laws	Jan 1, 2015	HR Working Group	Ongoing	Ongoing Annual training on AODA		

Last Reviewed: February 2022 7 | P a g e



Multi-year Accessibility Plan 2020-2025

2. Information and Communications

Information and	Dorothy Ley Hospice is committed to making our information and communication					
Communications	accessible to individuals with disabilities.					
Requirement Area	Action / Task	AODA Complian ce Required by:	Most Responsible Person	Review Date	Notes / Follow up Required	
Make feedback accessible	Create a public feedback process Review the process for accessing communication supports where necessary		ED	December 2021	Completed	
Make Financial and MSAA/Funding information accessible to public	Ensure that the MSAA Agreement is available online, Ensure that we include our funding information in all materials per our contractual agreements		ED	Dec 2021	Completed	
Make emergency information accessible to public	Emergency procedures and plans are available in accessible formats or with appropriate communications supports as required	Jan 1, 2012	Human Resources Committee		Completed	
Make website accessible	Website is easily accessed, translation is available		Executive Director	May 2021	Website updated May 2021 and includes accessibility features	
	Must meet Web Content Accessibility Guidelines (WCAG) 2.0 Level A	Jan 1, 2014	Webmaster, Communications Officer	Dec 2021	Completed May 2021	
Make accessibility policy accessible to the public	Have copies on site and online	Jan 1, 2010	Executive Director	Annual review	Completed	
Make your public information accessible when asked		Jan 1, 2014			Ongoing	



Multi-year Accessibility Plan 2020-2025

3. Environmental / Architectural

Environmental/ Architectural					
Requirement Area	Action / Task	AODA Compliance Required by:	Most Responsible Person	Review Date	Notes / Follow up Required
Parking – Spots too Narrow	Re-layout parking with spots having a minimum width of 15ft		Operations Coordinator		Not feasible; will diligently monitor current spots for compliance. Two accessible parking spots available
Front Outer Door Access- Doors difficult to navigate in wheelchair	Lower auto door openers and free door from jamming				Completed
Dining Room – Obstacles in connecting walkway	Set policy to remove chairs and keep clear other obstacles from hallways and other connecting walkways				Completed
Dining room tables are accessible	Current dining tables not accessible		Operations coordinator	June 2023	To be completed pending raising funds to purchase new dining tables
Activity Room – Sink set too far back for wheelchair access	Move sink forward, set out from counter		Operations Coordinator		Cost Prohibitive: Utilize upper level washrooms
Shower Room – Fire alarm has no strobe for hearing impaired	Install strobe fire alarms in shower room		Completed		Fire department has conducted an inspection, made recommendations which have been implemented
Residence/Family Kitchen- Towel dispenser not wheelchair accessible	Lower towel dispenser and install new sink		Operations Coordinator	November 3, 2015, revised date Dec, 31, 2019	Completed
Residence/Family Washroom- No sidebar for wheelchair access	Install appropriate sidebars		Operations Coordinator	November 3, 2015	Completed

Last Reviewed: February 2022 9 | P a g e



Multi-year Accessibility Plan 2020-2025

Front Reception/ Hospitality- Not wheelchair accessible	Need to install a section with a lower counter		Cost Prohibitive: Can access adjacent open space of front desk
Main Stairway to Lower Level- Stairs not easily visible for visually impaired	Install system to show contrast on each step		Cost Prohibitive: Use elevator, hold Meetings on main level.
Move the hand rails to the appropriate spot in the residence washrooms	Hand rails not in proper location	erations ordinator	Completed Dec 2021
Add an accessible washroom on lower level accessible by elevator	Part of the hospice 2 bed expansion project as this a new standard that is required for all new builds and renovations	idential care aager	To be completed by June 2023



Multi-year Accessibility Plan 2020-2025



Multi-year Accessibility Plan 2020-2025

Lower Level Doors- All doors are too heavy to open	Check door opening pressure and adjust to appropriate level			Cost Prohibitive: Hold meetings on main level.
Main Floor washroom doors not automated for accessibility	Need push paddle automation	Operations Coordinator	December 1, 2015	Approx. cost \$2000 for two doors. Ballard Foundation to provide funding.
Locker Room Washroom- Not wheelchair accessible	Need to install additional grab bars	Operations Coordinator	Omit	Locker Room Staff Only; use main level washrooms
Lower Level Access- Not wheelchair accessible for fire evacuation	Need to retrofit or install method other than elevator to evacuate individuals using a wheelchair		Complete	Education sessions have been conducted; a standby transfer care will be stored for assistance for those with mobility issues
Residential Care Suites- No strobe lights to warn hearing impaired of fire or other emergency	Ensure strobe lights are installed and/or working		Dec 31, 2019	Under review due to cost: Regular fire drill are conducted Evacuation plans have been prepared.
Outdoor Signage- No prominent signage to assist in locating DLH	Develop and install appropriate signage			Completed
Customer Service Training- All staff and volunteers are to have completed training through the AODA	Training has been completed and is ongoing for all new staff and volunteers		Ongoing	Training has been completed and is ongoing for all new staff and volunteers



Multi-year Accessibility Plan 2020-2025

4. Employment

Employment	Insert Comments				
Requirement Area	Action / Task	AODA Compliance Required by:	Most Responsible Person	Review Date	Follow up Required
Make your	Make how you hire,	Jan 1,	HR Working		Completed and
employment	retain and provide	2015	Group		ongoing
practices accessible	career development				
	opportunities accessible				
	Document your	Jan 1,	HR Working		Completed and
	processes for	2015	Group		ongoing
	developing individual				
	accommodation plans				
	and return-to-work				
	plans				