

# **Progress Report: WRHA Implementation of the Accessibility for Manitobans Act**

## **March 2019**

Report prepared by the Accessibility Planning Committee. Please contact Jennifer Dunsford, Regional Director, WRHA Ethics and Accessibility for further information at [accessibility@wrha.mb.ca](mailto:accessibility@wrha.mb.ca).

The Customer Service Standard of the Accessibility for Manitobans Act (AMA) took effect November 1, 2017. A principle of the act addresses Equality, stating, "Persons should have barrier-free access to those things that will give them equality of opportunity and outcome." This report examines progress on the commitments made in the WRHA's Accessibility Plan over the past year.

### **BARRIER REMOVAL AND PREVENTION IMPLEMENTATION ACTION PLAN**

The WRHA's action plan to address identified barriers (<http://www.wrha.mb.ca/accessibility/files/accessibility-plan.pdf>) began with goals for every site and program across the WRHA.

The actions are informed by the WRHA Barriers Survey, feedback from clients, residents, patients, families, and from staff and WRHA engagement volunteers.

### **ATTITUDINAL BARRIERS: OCCUR WHEN PEOPLE THINK AND ACT BASED ON FALSE ASSUMPTIONS**

#### **ACTION**

#### **1. Develop AMA training module for the Learning Management System (LMS).**

In progress: The Customer Service Training was developed with videos purchased from the Society for Manitobans with Disabilities and the module was launched on the LMS September 8, 2017.

As of December 27, 2018, 16,341 of 25,117 active WRHA staff (65.1%) had completed the training. In addition, others not captured by the LMS reporting tool have completed the training, including:

- employees who have not connected their SAP and LMS accounts
- people who are currently on leave
- people who are not paid through the SAP system (e.g. physicians, contractors, researchers, and some employees)
- people trained in a group setting whose completion has not yet been uploaded to SAP

This is an increase over 2017, but remains far from the 100% required by the Act. Org Chiefs were reminded in October to run reports on completions, and to follow up with any who had not done the training. This resulted in an increase of about 200 staff. All staff will continue to be encouraged to complete the training as soon as possible.

**2. Create an overarching policy addressing the required elements of the AMA's Customer Service Standard.**

Complete: This policy was developed and approved by the Policy Committee November 17, 2017 and posted in early 2018.

**3. Create an Accessibility hub of resources on the WRHA Accessibility Site.**

Complete: The "hub" – called Accessibility Tools – was launched on Insite in September 2017 (<http://home.wrha.mb.ca/accessibility/index.php>). The site contains links to the LMS, as well as alternate formats for the training for those without LMS access. It also contains a number of tools, links and best practices that can be used to improve accessibility for sites and programs. Several new resources were added to the site throughout the year.

**4. Develop a process for the Accessibility Committee to identify track, and review actions regarding accessibility complaints received through the Client Relations Office and RL6, a risk management software program.**

Complete: The Client Relations Officer sits on the Accessibility Planning Committee and has committed to bringing forward any accessibility-related complaint.

**5. Support sites' and programs' accessibility committees established to further identify and implement concrete and achievable barrier prevention and removal actions**

Ongoing: Accessibility Coordinator and the Accessibility Planning Committee (APC) remain available to support sites and programs as needed.

**6. Explore adding language to all employee job descriptions outlining expectations that support compliance with the AMA.**

Planned: This will likely be required under the next AMA standard, Accessible Employment. It is expected that the Employment Standard will be enacted early in 2019.

**INFORMATION & COMMUNICATION BARRIERS: OCCUR WHEN INFORMATION IS OFFERED IN A FORM THAT WORKS FOR SOME PEOPLE, BUT NOT ALL.**

**ACTIONS**

**7. Develop and provide clear print guidelines for use by all WRHA sites and programs.**

Complete: A link posted on the Accessibility Tools page provides access to a Print Communications Checklist ([http://www.accessibilitymb.ca/pdf/checklist\\_communications.docx](http://www.accessibilitymb.ca/pdf/checklist_communications.docx)).

**8. Ensure all public facing staff are aware of available Language Access services**

Ongoing.

**9. Ensure all public facing staff are aware of available Indigenous Health Patient Services**

Ongoing.

**10. Develop implementation processes and identify costs to provide an encrypted electronic communication option to enable the exchange of personal health information between health care providers and patients who are not able to obtain or provide information using existing WRHA communications means.**

In progress: Manitoba e-Health Services has approved the use of an application for secure instant messaging between clinicians and patients. A pilot test is in progress with patients from the Communications Disorders and Motor Neuron Disease clinics. A working group is also being established to develop a plan for accommodation of patient requests for alternative methods of communication.

## **TECHNOLOGICAL BARRIERS: INFORMATION AND SERVICES THAT ARE PROVIDED USING TECHNOLOGY THAT IS NOT ACCESSIBLE.**

### **ACTIONS**

#### **11. Develop a plan to prepare WRHA site and program websites to meet Web Content Accessibility Guidelines 2.0, Level AA**

In progress: The WRHA and Communications Department are in the process of a full redevelopment of the WRHA website ([www.wrha.mb.ca](http://www.wrha.mb.ca)) to meet Web Content Accessibility Guidelines 2.0, Level AA. Due to unforeseen changes to the approved platform, the original completion date of December 2018 has been changed to spring 2019.

## **SYSTEMIC BARRIERS: POLICIES OR PROCEDURES THAT GIVE UNEQUAL ACCESS OR EXCLUDE PEOPLE.**

### **ACTIONS**

#### **12. Develop an event planning accessibility checklist for use by all WRHA sites and programs.**

Complete: The Disabilities Issues Office has a number of resources posted including guidelines for holding an accessible event. A link posted on the Accessibility Tools page provides access to Event Planning Checklists ([http://www.accessibilitymb.ca/pdf/checklist\\_event\\_planning.docx](http://www.accessibilitymb.ca/pdf/checklist_event_planning.docx) and [http://www.findmyspark.ca/sites/default/files/resource\\_files/accessible\\_events\\_booklet\\_eng.pdf](http://www.findmyspark.ca/sites/default/files/resource_files/accessible_events_booklet_eng.pdf)).

## **PHYSICAL AND ARCHITECTURAL BARRIERS: WHEN THE ENVIRONMENT PRESENTS CHALLENGES THAT MAKE IT DIFFICULT FOR SOME PEOPLE TO GET INTO A PLACE**

## ACTIONS

**13. Introduce processes to ensure there are sufficient wheelchairs and staxi chairs readily available at entrances throughout the day**

Ongoing. As noted in the highlights section below, St. Boniface Hospital and Riverview Health Centre have added volunteer transport wheelchairs at Main Entrances. Other sites are working on this.

**14. Explore the feasibility of creating discharge loading zone pick up spots or increasing time limits for discharge loading spots**

Complete: Sites have been encouraged to ensure that their security patrols and parking authorities provide sufficient leeway at loading zones.

**15. Finalize processes for the provision of employee ergonomic assessments, recommendations and purchases of specialized equipment related to accommodation requests and maintain data related to these requests.**

In progress: This will also be part of the Accessible Employment Standard so will be addressed specifically in the work of the APC going forward.

Occupational and Environmental Safety and Health have also been working on this.

## Moving Forward

Of note, the province published an [Independent Report on the Effectiveness of the Implementation of The Accessibility for Manitobans Act](#), which set out some opportunities and suggestions for improvement. While these were mainly directed to government, some will need to be anticipated as they do relate to WRHA processes, including a call for improved accountability for compliance among large organizations. This review will help inform the WRHA's Accessibility work going forward.

## **Accessibility Achievement Highlights for 2018**

The following is a list of accessibility achievements reported by members of the Accessibility Planning Committee or staff at the site/program. Each site determines its accessibility priorities based on factors such as patient/family feedback, other projects happening simultaneously (where accessibility considerations can be incorporated), budget, and staff suggestions.

While there is much work still to be done, the achievements highlighted here demonstrate the region's ongoing work and commitment to ensuring everyone has access to WRHA services, sites and programs.

Site leadership is encouraged to maintain the priority on accessibility, and ensure their committees are supported in identifying and mitigating access barriers, and evaluating and maintaining the solutions implemented to resolving them.

### **ST. BONIFACE HOSPITAL**

- Parking
  - o Increased number of handicapped stalls in our inventory. Number of stalls is greater than minimum required by City of Winnipeg Bylaw.
  - o Lowered our parking meter heights so easier to access for users in wheelchairs.
  - o Two new pay stations in the central hospital area that have lower pin pads for customers.
  - o Added automatic doors in the Parkade.
- Access to language interpretation services
  - o Women & Child Health Program have worked with WRHA Language Access to improve our ability to serve our patients who do not speak English. We now have individual unit authorization codes for MCIS Language Solutions (an external Canadian company) to provide timely access to interpretive services. We have access to 200 languages in 2 minutes or less over the phone. Use of this service via speaker phone will allow quick and easy access to support improved communication. This went live November 12, 2018.
- Coronary Care Unit opened in 2016 had its main unit desk built lower to support people in wheelchairs with the ability to see and communicate with staff.

- Pay Phones in Main Hospital now include free calling to Handi Transit to accommodate their customers/patients
- EHealth installed descriptive audio software on a laptop for a medical resident with visual impairment to support the use of clinical applications
- Waiting rooms across the site have bariatric chairs for patients and visitors
- Nuclear Medicine added a wheel chair accessible bathroom in the area during renovations so patients did not have to go to a different floor.

#### LANGUAGE ACCESS INTERPRETER SERVICES and FRENCH LANGUAGE SERVICES:

- Language Access has provided the services of qualified trained interpreters (spoken, non-Indigenous languages) for over 156,000 health and social services encounters since its inception in 2007. Language Access services are available 24/7 in-person, over-the-phone, or via MBTelehealth and are:
  - Critical in reducing barriers between service providers and patients/clients that do not share a common language;
  - Coordinated through a centralized dispatch for all language constituencies (Indigenous languages, official languages, Deaf/Deaf-Blind, Immigrant/Refugee languages);
  - Provided at no cost to health funded services in Winnipeg including fee-for-service physicians;
  - Accessed on a cost-recovery basis by all other Manitoba regional health authorities, government departments (provincial and federal) as well as other organizations (e.g. MB Prosecutions, MB Child & Family Services, etc.).
- Language Access currently has a team of 99 trained, professional interpreters (casual employees) who perform their role in accordance with the Code of Ethics & Standards of Practice for Interpreters. Interpreter services are available in-person in 31 languages and over-the-phone (provided by an external contracted provider) in over 200 languages, 24/7/365.
- French Language Services has initiated a campaign to promote their Accessibility to Language program, to remove language barriers to patients' and families' understanding of their health needs, diagnosis or care plan.
  - From 2013 to 2018, French Language Services facilitated the translation of 1,292 documents from English to French for a total of 823,026 words. All new client/patient and public information is regularly translated as per policy (education materials, pre- and post-

op surgical information, surveys, pamphlets, brochures, advertising, videos, etc.) in order to make it accessible to Francophones.

## COMMUNITY HEALTH SERVICES

- Provision of accessible office and meeting space and use of ACCESS Centre facilities to Support Services for Seniors and other community groups free of charge.
- The Community sector is deliberately linking more closely with community organizations and groups through information sharing and welcoming community members to classes and events run by Primary care, mental health and public health. In response to feedback from a client on the Voice of the Client survey, highlighting that there was no accessible parking for the travel clinic, we contacted the City of Winnipeg and now have a parking spot on Hargrave in front of the travel clinic designated as accessible parking.
- In addition:
  - Gender Neutral washroom signs in ACCESS NorWest
  - Public Health: Inkster area Gilbert Park and Weston have Bright Start Programs with Public Health Nurses- outreach and easier access to clients in equity target neighborhoods; integration Primary Care and PPH, supporting young children and parents for a healthier start. Moved Healthy Baby Group to Willow Centre Lounge with increased accessibility for strollers. Weekly clinic hours added to Black Resource Centre. Tried a morning coffee with new moms, outreach to the Weston and Tyndall communities, in partnership with Inkster Parent Child Coalition.
  - Community Mental Health Team implemented July 2018: 79 referrals to date of publication, collaboration and integration of resources from My Health Team, WRHA community, NorWest Co-op, and WRHA Mental Health Program to best serve our population with Mental Health needs
  - Community Volunteer Income Tax Program: implemented for those with low income; collaboration between Canada Revenue Agency and community organizations to support free basic tax return services for community members
  - Livin' Better: support for clients with Mental Health; integration with the Wellness Institute to achieve activity and nutrition

## INDIGENOUS HEALTH

- Now print business cards with an accessible font
- Continued focus on cultural safety

## DEER LODGE CENTRE

- Introduction of visually accessible staff nametags (yellow background, large black font)
- Installation of a ceiling hoist in a staff washroom
- Installation of new ramp at the entrance to the south pavilion
- Introduction of a volunteer Ambassador Program to support way finding
- In progress, not completed:
  - Universal bathroom on main floor
  - Provision of Staxi Chairs for visitors

## MENTAL HEALTH PROGRAM

- Rapid Access to Addictions Medicine (RAAM) Clinic at the Crisis Response Centre (CRC) provides low barrier access to addictions medicine services and was developed in partnership with the Addictions foundation of Manitoba (AFM). The RAAM Clinic operates three days/week (specific hours on Tuesdays, Wednesdays and Fridays). The clinic functions on a walk-in basis and individuals do not require a referral or appointment.

## HEALTH SCIENCES CENTRE WINNIPEG (HSC):

- Facilities Management engaged a person with lived experience in assessing the process of attending an appointment, from receiving the notice by mail, to taking public transit to the facility, to navigating through the facility to the department. The experience of witnessing the challenges she encountered was eye opening for the staff involved and has directly informed the planning process for the Ambulatory Clinic Consolidation project currently underway.

## ORGANIZATION & STAFF DEVELOPMENT

- Accessibility issues continue to be included in a half-day workshop about health equity.

## COMMUNICATION DEVICES AND MOTOR NEURON DISEASE CLINIC

- Clinics are participating in a trial of an accessible medium for communication with clients.

#### GRACE GENERAL HOSPITAL

- The new ED is built to the latest accessibility standards consistent with what is expected in a healthcare facility. Examples:
  - Wider corridors with appropriate hand rails
  - Automatic door openers
  - Ramps with appropriate elevations
  - Universal washrooms
  - Toilets at comfort height
- Additionally:
  - Rest seating along the ramp to Dorothy Wood Building
  - Wheelchair ramps off the sidewalks in front of the hospital by old Emergency
  - Rest seating in hallway between elevator and Rehab department

#### SEVEN OAKS GENERAL HOSPITAL

- Completion of new central shower room. The new shower facility is accessible for bariatric chairs, commodes and wheelchairs, as well as shower stretchers that can be wheeled right under the shower hose. The new spacious shower facility has a shower curtain so that ambulatory patients, who are able, can shower on their own in privacy. The doorway is also specially designed so that it can spring open into the hallway and allow staff to enter if a patient were to fall inside or if they have equipment blocking the door from opening inward. The facility also has pull cords to ring for help. Additionally, it has non-slip floors and surfaces that are safe for walkers, canes and wheelchairs.
- We also added volunteer transport wheelchairs at the Main Entrance of the Hospital to provide assistance to patients, families and visitors in need.

#### LONG TERM CARE

- Golden Door Geriatric Centre:
  - Parking Expansion

- Increased the number of visitor parking spaces from 12 to 13. Two spots are designated for persons with a disability thus increasing our handicap parking spots from 8% to 15% of overall parking.
  - Automated Front Entry Door
  - A new automated front door to the home was installed in 2017-2018. This door automatically opens when you approach the home improving access for all entering. To exit the home, a button is pressed and the door will automatically open for exit.
- Riverview Health Centre:
    - Installed Staxi chairs at the Main entrance for use by mobility challenged visitors to the Centre.
    - Alzheimer Centre of Excellence project: keypads for the entrances to the Special Needs units were relocated to a lower level to accommodate anyone in a wheelchair to access.
- Extencicare Tuxedo Villa:
    - Over the past year we have increased our parking spaces for people with disabilities from 1-2 as well as increasing the size of our visitor parking in general which is close to the front door.
    - Our public restrooms are gender neutral and we frequently use an ASL interpreter for a staff member who is hearing impaired.
- Golden West Centennial Lodge
    - Dedicated visitor and staff parking for those with disabilities
    - All washrooms are gender neutral
    - Involving adults with disabilities in meaningful volunteer opportunities
    - Modifying jobs for those with disabilities, including both current employees with accommodations and new hires.
    - Several staff are learning ASL to communicate with volunteers

#### St. Amant Centre

- Development of Accessible Documentation Standards - these are standards that provide direction to all our staff on how documentation and video must be created and formatted so that it is as universally accessible as possible from the outset. It is hoped by adopting these

documentation standards we can anticipate the barriers to accessing documentation and video that many people would experience.