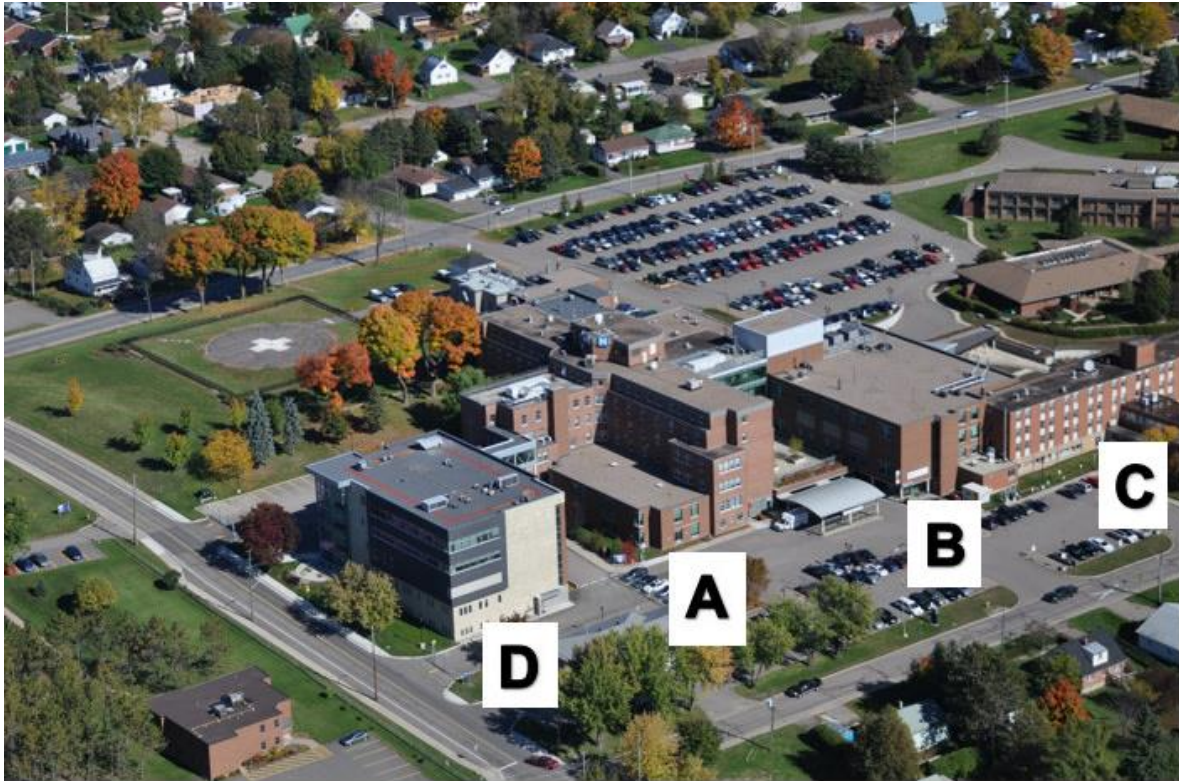


# Multi-Year Accessibility Plan



**An accessible place for persons with disabilities to work, volunteer, and experience compassionate care.**

## Pembroke Regional Hospital Tower Locations



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## Pembroke Regional Hospital Commitment to Accessibility

Pembroke Regional Hospital (PRH) is committed to meeting the accessibility needs of persons with disabilities in a timely manner that respects their dignity and independence. We embrace a broad definition of disability which includes those that may not be visible or apparent. PRH strives to provide patients, caregivers, staff, physicians, volunteers, and members of the community with barrier-free access to its facilities, policies, programs, practices, and services. PRH endeavors to foster attitudes and behaviours that eliminate barriers for persons with disabilities.

### About Pembroke Regional Hospital's Accessibility Plan

The *Accessibility for Ontarians with Disabilities Act (AODA) 2005*, formerly Ontarians with Disabilities Act (ODA), requires public organizations to prepare annual and multi-year plans to improve opportunities for people with disabilities.

In addition, the [Ontario Regulation 191/11: Integrated Accessibility Standards \(IASR\)](#) is a grouping of five standards that the Accessibility for Ontarians with Disabilities Act (AODA) developed.

The IASR includes five standards in the areas of:

- Information and Communication
- Employment
- Transportation
- Design of Public Spaces
- Customer Service

The AODA complements, but does not supersede, the requirements for accessibility and accommodation described under the **Ontario Human Rights Code**.

To fulfill our responsibilities for the AODA and IASR, we have prepared a multi-year accessibility plan that covers a five-year period and outlines our strategy to identify, prevent, and remove accessibility barriers and meet our requirements. The PRH Accessibility Planning Committee is responsible for overseeing the development of this plan in collaboration with multiple internal and external partners, including people with disabilities, from the identification to the removal and prevention of barriers within PRH.

We are committed to providing equitable treatment to people with disabilities with respect to the use and benefit of services, programs, goods, and facilities. We are committed to providing *the right services, in the right place and at the right time*.

We welcome your support and feedback as we strive to make PRH a leader in providing accessible healthcare. Please contact us by email [accessibility@prh.email](mailto:accessibility@prh.email) or by phone (613) 732-2811 ext. 6172 and our team will be pleased to hear from you.

*The Accessibility Planning Committee, Pembroke Regional Hospital*

## Summary of Objectives

The following is a summary of the objectives as recommended by the Accessibility Planning Committee and endorsed by the appropriate departments at PRH.

The areas of focus are as follows:

1. **Information and Communication** focusing on ensuring our internal and external web content conforms to accessibility guidelines, creating a more consistent process to gather real-time feedback for accessibility improvements.
2. **Employment** focusing on removing barriers to recruitment and employment through building community partnerships, focused recruitment, and providing accommodation to individuals as needed.
3. **Customer Service Training** focusing on annual accessibility training for customer service excellence for all employees (including student learners, physicians, volunteers). This also includes partnering with our Equity, Diversity, Inclusion and Anti-Racism (EDIAR) Committee to identify shared learning opportunities and review of all accessibility related policies and procedures.
4. **Design of Public Spaces** taking into consideration the ongoing construction projects and future planning as our hospital continues to grow and expand services, it is a priority to ensure accessibility is considered in the overall project design, including washroom facilities, parking, building access and way finding.

Each objective has specific project target(s), timeline(s) and identification of the departments responsible. To view the plan in its entirety, see Appendix A.

## About Pembroke Regional Hospital

Located approximately 150 kilometers north-west of Ottawa, the Pembroke Regional Hospital delivers a broad range of acute, post-acute, outpatient and diagnostic services to a mixed urban and rural population of approximately 55,000 residents in the City of Pembroke, the Town of Petawawa, and surrounding municipalities.

With the dedicated support of approximately 950 staff members, and an engaged physician community, the Pembroke Regional Hospital provides acute services in emergency and intensive care, medical/surgical care, acute mental health, orthopaedics, and obstetrics. The Hospital has a full range of rehabilitation services, is the designated District Stroke Centre for our region, and provides community-based mental health services throughout Renfrew County. Chemotherapy, dialysis, and a variety of ambulatory care clinics are offered on an outpatient basis through partnerships with regional centres and nearby specialists. The Hospital offers a full range of diagnostic services including computed tomography (CT), magnetic resonance imaging (MRI), nuclear medicine and mammography. Bringing quality care closer to home is one of our guiding principles and this has resulted in significant growth in the

breadth and scope of services that we are able to deliver. Today, the services and technology we have are state-of-the-art.

In addition, we continue to experience growth as a teaching hospital affiliated with the University of Ottawa's Faculty of Medicine, while also providing education experience for a wide range of students in various health disciplines on an ongoing basis.

## **Together We Care – Strategic Plan 2024-2029**

### **Our Mission:**

We are a regional community hospital committed to delivering a wide range of quality health services. Following Catholic tradition, we will meet the physical, emotional, and spiritual needs of all.

### **Our Vision:**

Together, we care for our patients, our community and each other.

### **Our Values:**

- **Compassion** - We believe everyone deserves to be treated with dignity and respect
- **Collaboration** – We believe in the strength of working together as one team
- **Commitment** – We always strive to do better
- **Courage** – We believe that being brave will unlock new opportunities and innovations

### **Strategic Pillars:**

- Care for our people
- Care for our community
- Care with our partners

### **Enablers:**

- An authentic and inclusive culture
- Robust data and digital health capabilities
- Open communication
- Financial and environmental stewardship

## Why Accessible Health Care is Important:

Persons with disabilities represent a diverse and significant portion of the Canadian population. In 2022, approximately **8 million Canadians** (27% of the population aged 15 and older) reported having one or more disabilities, an increase from 22% in 2017 (Statistics Canada, Canadian Survey on Disability, 2022). There are different types of disabilities, and they can range from mild to very severe. Current data indicates that approximately 1 in 4 Ontarians live with a disability—representing roughly 2.6 to 2.8 million people. Also, as the aging population is expected to grow over the next 25 years, it is projected that the number of people living with a disability is expected to grow in our province. The *Accessibility for Ontarians with Disabilities Act (AODA) Annual Report (2024)* identifies continued provincial progress in advancing accessibility through strengthened compliance, integrated planning, and targeted improvements to reinforce Ontario’s commitment to removing barriers and enabling full participation for patients, caregivers, and employees with disabilities across the healthcare system

PRH is using the *Accessibility for Ontarians with Disabilities Act (AODA 2005)* to guide our improvement work.

## Communication, Review and Monitoring of the Plan

The Accessibility Planning Committee is responsible to ensure:

- The multi-year accessibility plan is posted on the external PRH website;
- The plan can be provided in an accessible format upon request;
- A status report is prepared on the progress in implementing the multi-year plan and posted annually on the external PRH website;
- The plan is reviewed and updated at least once every 5 years;
- An accessibility compliance report is filed every 2 years, and the most recent report is posted on the external PRH website.

## Feedback and Barrier Identification Approach

The hospital has an accessibility email [accessibility@prh.email](mailto:accessibility@prh.email) and feedback form on our main website <https://www.pemreghos.org/>. All feedback is welcome; accessibility issues and concerns are brought forward to the Accessibility Planning Committee for follow-up. There are many other ways to share feedback, including by phone, email, or by a scheduled appointment with our Manager of Risk, Patient Relations Delegate & Education. Interpretation services are booked as needed. The concerns are then directed to the appropriate person and/or department to address the issue. Regular accessibility walks and audits through different spaces within the hospital, with a team of patient advisors and Accessibility Committee members, are another way to capture areas for improvement. The feedback from these activities is used for planning and prioritizing accessibility projects.

In addition, the PRH Equity, Diversity, Inclusion and Anti-Racism (EDIAR) Committee ensures the voices of persons with disabilities are brought to all EDIAR discussions. This committee also helps to ensure that all accessibility planning considers the realities and experiences of persons with disabilities from a diverse range of backgrounds, including economic status, gender identity, literacy and language, and race, to name a few. This helps guide the work of the Accessibility Committee.

The Accessibility Committee meets a minimum of two times per year, and all accessibility concerns are raised in this forum.

### **New Projects and Design of Public Spaces**

Planning for new construction or redevelopment of existing spaces considers the requirements as outlined in the Design of Public Spaces Standards (*O.Reg.191/11*). PRH is embarking on new and exciting projects including, but not limited to the planning and the implementation of:

- Development of Schedule 1 Beds for our Acute Mental Health (AMH) Program
- Tower C Ground Floor Redevelopment
- EPIC implementation – electronic health record implementation (MyChart)
- Expanded parking and EV charging stations
- Horse and Buggy hitching post
- Phoenix Centre Building Assessments
- PRH Website – Investigate Options

## APPENDIX A:

### Pembroke Regional Hospital Multi-Year Accessibility Plan (2025-2031)

#### Information and Communication

The Information and Communications Standards of the AODA list rules for organizations to create, provide, and receive information and communications that people with disabilities can access. The standards give all people an equal chance to learn and be active in their communities.

Information and Communication	Description	Strategy	Timeline
<b>Accessible Websites and Web Content</b>	To ensure the PRH website conforms to the most current Web Content Accessibility Guidelines	The Public Affairs and Communications Coordinator will review the website annually and ensure compliance based on most recent Web Content Accessibility Guidelines.	<b>Annual Review</b>
<b>Alignment of Hospital Work Plans to support Accessibility</b>	To ensure the workplans for the Visual Building Improvement Audit Committee, Accessibility Committee and EDIAR Committee are aligned regarding improvement work to reduce duplication of efforts.	These committees will continue to meet annually to review actions related to accessibility and ensure alignment.	<b>Annual Review</b>
<b>Translation Service available to patients</b>	To ensure translation and interpretation services are available 24/7 for staff and physicians to support our patients and their caregivers.	Ensure that PRH can offer a virtual translation and interpretation service that will be available 24/7.  In parallel, continuously exploring enhanced digital options that would support translation and interpretation services.	<b>2031</b>

<b>Digital Experience</b>	To ensure major upcoming projects (electronic health record implementation) prioritize AODA compliance.	With the implementation of the electronic health record – EPIC (MyChart) to ensure there is education and a standard process to follow to support the implementation of accessibility features for individuals who require this.	<b>2026</b>
<b>Accessibility Improvement Ideas and Feedback</b>	To improve our process to capture feedback from multiple stakeholders regarding accessibility issues and areas for improvement.	Investigate options to have all feedback received in one central location for review and action if required.  Current feedback sources include an accessibility email, a feedback form located on the website, telephone, submission of a concern or compliment, an in-person meeting.	<b>2027</b>
<b>Strategic Plan</b>	Ensure language and all pieces in the strategic plan address and consider accessibility both internally and externally.	Ensure representation from the Accessibility Committee Chair in the development of the new strategic plan for PRH.	<b>2029</b>

## Employment

PRH is committed to creating an inclusive, welcoming, and barrier-free work environment that promotes a diverse workforce. We work hard to attract and retain workers with disabilities through an active recruitment process. The PRH HR team looks for ways to connect with candidates and create opportunities to promote the benefits of working at the hospital.

The HR Team ensures that hiring processes eliminate any barriers to people with disabilities, such as inaccessible locations for interviews, providing additional time for interviews, or providing the interview questions in written format.

In collaboration with clinical leadership, we ensure that the hospital’s Emergency Management Plan and the local unit emergency plans consider the unique needs of team members with disabilities. Where applicable, we ensure that any employee with a disability has their own up-to-date personal emergency plan in place.

Key deliverables:

- Collaborate with external partners;
- Update external postings to include statements of inclusivity aligned with the EDI strategy;
- Educate the team of recruiters to promote the benefits of hiring persons with a disability;
- Monitor requests for accommodation during the recruitment process to ensure we are offering successful solutions to remove barriers to employment;
- Audit the Corporate Emergency Management Plan and Personal Emergency Plans to ensure currency;
- Review the Corporate Code Green Plan to ensure that all evacuation plans consider persons with disabilities.

Employment	Description	Strategy	Timeline
<b>Job Postings</b>	Job postings to include statements of inclusivity aligned with the EDIAR strategy.	HR Department will maintain updated job postings.	<b>Ongoing</b>
<b>Recruitment Process</b>	Monitor requests for accommodations during the recruitment process to ensure we	HR Department will monitor requests for accommodations and work with the hiring Manager to implement solutions.	<b>Ongoing</b>

Employment	Description	Strategy	Timeline
	are offering successful solutions to remove barriers to employment.		
<b>Workplace Accommodation Awareness Workshop</b>	Strengthen manager and supervisor understanding of accommodation obligations and best practices.	Short refresher training for leaders on duty to accommodate and individualized accommodation plans.	<b>Ongoing</b>
<b>Staff ID Badges</b>	Ensure meets AODA Accessibility Standards	Investigate options for improved design of Staff ID badges to meet AODA requirements.	<b>2028</b>

## Customer Service

With a workforce of approximately 950 employees, Pembroke Regional Hospital ensures that it is achieving regulatory compliance with the **Accessibility for Ontarians with Disabilities Act, 2005**, (with everyone who interacts on its behalf with the public participating in **mandatory** training in accessible customer service). An online training course is available to all physicians, staff, student learners, patient experience advisors and volunteers.

Customer Service	Description	Strategy	Timeline
<b>Accessibility Training</b>	Online AODA training is completed for all new hires and annually for existing physicians, staff, volunteers and patient advisors.	Annual e-learning required and audit compliance	<b>Annually</b>
<b>Policy &amp; Procedures</b>	Regular review of our existing accessibility policies to ensure AODA compliance. Add new policies as required.	Update policies that are due for revision and streamline existing policies, through our electronic Policy & Procedure System.	<b>Ongoing</b>

Customer Service	Description	Strategy	Timeline
<b>Equipment Availability to Support Accessibility Needs</b>	The hospital maintains a range of accessible equipment to support the diverse needs of patients and visitors. This includes readily available wheelchairs, low lying height adjustable beds, patient lifts, and visual/hearing support devices such as amplifiers and communication boards. All equipment is routinely maintained and strategically located to ensure timely access.	Each year an inventory of available equipment to support accessibility will be reviewed by the committee for feedback and discussion regarding additional items for consideration.	<b>Annually</b>

## Design of Public Spaces

Accessible public spaces make it easier for people with disabilities to move through and use the environment. The requirements of the standard that are within scope for consideration in our multi-year plan include:

- Exterior paths of travel (sidewalks or walkways) and their associated elements, such as ramps, stairs, curb ramps, rest areas, and accessible pedestrian signals
- Accessible off-street and on-street parking spaces
- Obtaining services (service counters, fixed queuing guides, and waiting areas)
- Maintenance planning
- Building new public spaces
- Making planned significant alterations to existing public spaces

Design of Public Spaces	Description	Strategy(ies)	Timeline
<b>Accessibility Walkthroughs</b>	Accessibility walkthroughs will be completed with a	Minimum one walkthrough per year for a different area of the hospital.	<b>Annually</b>

Design of Public Spaces	Description	Strategy(ies)	Timeline
	<p>small group, including representatives from our Patient Family Advisory Council (PFAC), Manager of Risk, Patient Relations Delegate and Education, Manager of Occupational Health and Safety, Director of Plant Services, allied health representative(s) (occupational therapy and/or physiotherapy) to identify areas for improvement.</p>	<p>Recommendations from the walkthrough to improve accessibility will be brought to the committee for discussion and approval for next steps.</p>	
<p><b>Parking</b></p>	<p>Horse and Buggy Designated Parking</p>	<p>Plan and install a new hitching post and signage.</p>	<p><b>2026</b></p>
	<p>Additional Electric Vehicle (EV) Chargers</p>	<p>Review opportunities for the installation of additional EV chargers to accommodate the demand.</p>	<p><b>Ongoing</b></p>
	<p>Continue to audit availability and demand for accessible parking spots.</p>	<p>Review the use of accessible parking spots.</p>	<p><b>Ongoing</b></p>

Design of Public Spaces	Description	Strategy(ies)	Timeline
<b>Accessible Walkways</b>	Investigate options to install an accessible walking path between Bell Street Staff Parking Lot & Tower D public parking Lot	Look into design options and requirements to meet AODA guidelines. Present project plan to committee. for approval.	<b>Ongoing</b>
<b>Cafeteria</b>	Improve accessibility for the cafeteria patio.	Improvements to be made to the patio door entrance and the installation of a new wheelchair accessible ramp.	<b>2026-2027</b>
<b>Accessible Washrooms</b>	Identify washrooms within PRH that require improvement related to accessibility, to meet the needs of the patients, visitors and our employees.	Review the washrooms within the different care areas of the hospital to determine if improvements are needed, specific to the patient population accessing these spaces. Create a plan to implement these improvements.	<b>Ongoing</b>
<b>Tower A - Stairwell</b>	Improve visibility to easily identify the edge of each step of the stairwell.	Investigate options and implement a solution to improve visibility in the Tower A stairwell.	<b>2027 - 2028</b>

## Appendix B:

<b>Accessibility Planning Committee Membership</b>
Administrative Assistant, Clinical Administration
Coordinator of Public Affairs and Communications
Clinical Director of Diagnostic Imaging and Support Services
Clinical Director Emergency Department (ED) / Intensive Care Unit (ICU), Inpatient Surgery and Obstetrics
Director of Human Resources (HR)
Director of Information Technology (IT)
Clinical Director of Mental Health Services
Director of Facilities
Clinical Director of Rehabilitation, Medical, Ambulatory Care
Manager of Allied Health, Geriatric Emergency Management (GEM) and Geriatric Day Hospital (GDH) - (Occupational Therapist Representative)
Manager of Materials Management
Clinical Manager of Risk and Patient Relations Delegate, Education
Patient / Family Experience Advisor(s)
Vice President of Clinical Programs / Chief Nursing Executive
Ad Hoc Members: Members of the Hospital and broader community and partners who can represent the interests of persons with disabilities on an as needed and/or consultative basis.

To contact the committee about this plan or to provide PRH accessibility feedback, please e-mail: [accessibility@prh.email](mailto:accessibility@prh.email).