

**ACCESSIBILITY BARRIERS REPORT**  
**Period January 1, 2008 – November 1, 2016**

| <b>BARRIER IDENTIFIED</b>   | <b>ACTION REQUIRED</b>   | <b>STATUS</b> |
|---|--|---------------|
| Narrow doorway to SMOL chapel area impedes access of individuals using larger motorized wheel chairs                                | Removal of door in increase traverse width   | Complete      |
| Snow impeding access to parking meter in SMOL parking lot   | Amend snow removal route; up-date work routine to prioritize clearance around parking meters; train applicable staff   | Complete      |
| Availability of accessible parking close to SMOL physiotherapy outpatient area  | 8 additional accessible parking spaces allocated close to entrance   | Complete      |
| Shared access to SMOL television area by individual with hearing impairment during recreational activity                            | Diversity awareness and sensitivity education to volunteer and recreational therapy group regarding probing to understand if there are accessibility needs which require individuals to use higher volume levels when sharing the area.  | Complete      |
| Prompt response by PM security responding to need to provide access to building and placement of seating area outside main entrance | Up-grade to intercom device made to include two-way communication mechanism; review of related security process; train applicable staff; provide seating at main entrance  | Complete      |
| PM Elevator temporarily out of service requiring alternative route to be used   | Review down-time record; identify root cause; complete necessary repairs   | Complete      |
| SMOL Toilet height too low in accessible washroom   | Facilities management working group completed review of compliance to accessible height standards; devices were found to be compatible with required heights and commode chairs in use.  | Complete      |
| SMOL Door weight of accessible washroom too heavy   | Facilities management working group reviewed use of washroom and alternative washroom locations for feasibility and ease of access while retrofit work is being completed.<br><br>Doors, frames and hardware are being redesigned for 4 public washroom. Expected completion date April 1, 2015. | Complete      |
| Access to WiFi required by SMOL patient to use table assistive communication device   | WiFi access provided   | Complete      |
| Request for wheelchair accessible tables in SMOL cafeteria positioned close to window   | Adjustable tables installed and relocated to be proximal to window area  | Complete      |

|   |   |          |
|---|---|----------|
| Request for telephone device in SMOL outpatient therapy area with larger numbers for those with visual impairment | Pay phones are being removed based on lack of use and individuals requiring assistance are assisted by Volunteer Services or Switchboard Services to initiate call.   | Complete |
| SMOL Standard accessible washroom not accessible to large format wheelchair                                       | Client provided access to larger accessible washroom  | Complete |
| SMOL specific unit laundry facilities cannot be accessed due to door width  | Client provided assistance with laundry and/or use of accessible facilities on another level  | Complete |
| SMOL pay and display parking requires excessive walking for those with mobility issues                            | Have implemented option to pay for parking within facility in order to avoid excessive walking  | Complete |
| MHS way finding difficulty encountered by visually impaired visitor to an on-site meeting                         | Administrative staff responsible for booking third party meetings on site provided the following message for inclusion in meeting confirmations: <i>Please advise us in advance if any of the participants require accommodation to find their way to the meeting location. Visitors may also inquire at reception for assistance</i>                           | Complete |
| PM elevator congestion creating delays for visitors reaching resident units                                       | Communication with families and residents through memo and Family Members meeting to explore alternatives (such as providing access to stairwells, visits off units or relocation of residents where feasible) and to provide updates on service to elevators. Traffic flow was monitored and strain has been resolved.   | Complete |
| PM Stairwells required swipe card access limiting access by visitors  | Reception services have been instructed to provide visitors access to stairwells by request; visitors are encouraged to use elevators in order to assist with maintaining safety of residents.  | Complete |
| PM Lobby wheel chair lacking footrest   | Evaluated by occupational therapy services and resolved.  | Complete |
| SMOL visitor requiring assistance to patient area was delayed from visiting unit                                  | Several resources including portering and volunteer services are typically available to provide assistance.   | Complete |
| Visitor to MHS attending a LHIN meeting had difficulty navigating the building due to visual impairment           | Executive and admin assistants were asked to include the following information when supporting externally-booked meetings, or any meetings that include members of the public: "Please advise us in advance if any of the participants require accommodation to find their way to the meeting location. Visitors may also inquire at reception for assistance." | Complete |
| When Sydenham elevator was  | Staff monitored flow and resident/family needs  | Complete |

|   |  |  |
|---|--|--|
| closed for repairs it lengthened the wait for residents and families at the Montreal elevator | and made efforts to minimize wait times as possible. |  |
|---|--|--|

*Source: Providence Care we-Care Compliments and Complaints tracking system*

*Abbreviations: SMOL – St. Mary’s of the Lake Hospital; MHS – Mental Health Services; PM – Providence Manor*