



## Accessibility Plan 2024 Victoria Village Manor LTC

### I. Introduction

Victoria Village Manor is committed to providing accessible services to its residents, families, staff, volunteers, and all others involved with the organization. This Accessibility Plan is designed with the goal of identifying existing barriers that limit access to the services the organization provides and proposing solutions that will improve accessibility in these areas. This Accessibility Plan is developed with consideration of the varying abilities and needs of persons served, personnel, and other stakeholders in Victoria Village Manor, and with the hope of creating a welcoming and fully accessible environment for those of all abilities.

*Disabilities* are defined in both the Ontario Human Rights Code and The Accessibility for Ontarians with Disabilities Act (AODA) as “a broad range and degree of conditions, some visible and some not visible. A disability may have been present from birth, caused by an accident, or developed over time. There are physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, epilepsy, drug and alcohol dependencies, environmental sensitivities, and other conditions.”

*Accessibility* is about ensuring that those of all (dis)abilities are given equal access to services and the opportunity to participate fully. An organization must consider the obstacles that individuals may face when accessing its facilities, services, or care, and work to accommodate individuals’ needs and to minimize all identified barriers.

A *barrier* is an obstacle, or something that prevents an individual with a disability from participating fully in an activity or a task. Just as disabilities are often invisible, the barriers those with disabilities face are often invisible to those who are not directly impacted by them. Victoria Village Manor is committed to improving the quality and accessibility of its care and services by finding solutions to barriers present in the organization, visible or not.



The Accessibility Plan is developed with the above definitions in mind, and with the consideration of other factors that may impact one's access to care and services, like financial and language barriers.

Barriers to access can include:

- Physical barriers, including:
  - Architecture
  - Environment
  - Transportation
- Communication or information barriers, including:
  - Technology
  - Language
- Attitudinal barriers
- Barriers to employment
- Financial barriers
- Barriers to community integration

## **II. Objectives**

In the creation, implementation, and ongoing evaluation of the Accessibility Plan, Victoria Village Manor has the following objectives:

- To ensure all residents receive accessible and equitable care
- To ensure that all persons served have equal access to services that meet their needs, no matter their ability
- To continue training and educating staff on accessibility, with specific reference to the accessibility needs of persons served by Victoria Village Manor
- To ensure that Victoria Village Manor continues to identify barriers to access for persons served, staff, and other stakeholders and community members
- To create action plans designed to reduce or eliminate these barriers



- To continually measure the success of barrier removal and implement further change as necessary

### **III. Policy**

In accordance with the Ontario Human Rights Code and AODA, Victoria Village Manor strives to provide quality services and care to all of those served, no matter their ability. Victoria Village Manor respects and protects the worth and dignity of all those involved with the organization. This means that all members should have equal opportunity to participate fully in everyday life at Victoria Village Manor.

The organization is committed to identifying, addressing, and eliminating all barriers faced by residents, their families, staff, volunteers, and other stakeholders when possible, supporting Victoria Village Manor's goal of equal access and participation.

The organization will also consider those barriers brought forward by persons served, personnel, and stakeholders. Barriers can be identified by these parties in their responses to surveys put out by the organization or verbally. All verbal accommodation requests are recorded for further consideration. All accommodation requests are reviewed by the relevant management staff. A decision is then made on whether the request can be accommodated, and the outcome is documented for future reference.

Victoria Village Manor also adheres to the equal employment opportunity policy and non-discrimination practices. Those of all abilities are encouraged to apply to and become involved with Victoria Village Manor's Long-Term Care facility.



#### IV. Accessibility Action Plan

| Type of Barrier | Barrier  | Solution/Actions to be Taken  | Measure of Success   | Priority | Person(s) Responsible             | Time Frame                               | Budget                 |
|-----------------|--|---|--|----------|-----------------------------------|--|------------------------|
| Architecture    | Carpeting in some areas of the facility (4 <sup>th</sup> and 5 <sup>th</sup> floor resident rooms) | - Replace carpeting with a hard and flat flooring option to reduce the likelihood of residents or staff tripping or injuring themselves, infection control risks. | All carpeted floors have been replaced with hard surface flooring in hallways and on units 6 and 3; 4 and 5 ongoing.   | Medium   | - Director of Operations<br>- CEO | Long-Term (multi-year)                   | \$2,000/room (roughly) |
|                 | Uneven tiles, safety concerns on 3 <sup>rd</sup> floor patio                                       | Replacing tiles, roof membrane. Removal of planter.   | Patio work is complete, pending railing installation.  | Medium   | Director of Operations            | 2024                                     |                        |
| Environment     | Staff parking area-limited lighting at night and issues with ice in the winter                     | - Developed of a detailed parking plan, addressing some parking lot issues  | A plan for addressing the prioritized parking issues is developed, with clear next steps for solving these selected issues<br><br>Lighting repair in large staff parking lot and commercial parking, light standard repairs and tree removal to reduce risk of low lighting. | Medium   | Director of Operations            | Ongoing                                  |                        |
|                 | Sidewalk/parking areas with concrete deteriorating   | - Cement sidewalks need to be fixed in a number of outdoor areas  | - Inventory of areas to be improved<br>- Capital plan to complete work   | Medium   | Director of Operations            | Ongoing, 78 Ross St. parking next (2025) |                        |



| Type of Barrier | Barrier   | Solution/Actions to be Taken  | Measure of Success   | Priority           | Person(s) Responsible   | Time Frame   | Budget |
|-----------------|---|---|--|--------------------|---|--|--------|
|                 | Staff security given the nature of the community has been a concern (access to safe work environment) | <ul style="list-style-type: none"> <li>- Implemented comprehensive security camera system for ongoing monitoring of entrances, buildings, and surrounding property.</li> <li>- Implemented page/buzz in system for evenings and nights so that visitors can not enter the main vestibule unless allowed in by charge nurse.</li> <li>- Accommodate staff parking in front parking lot during evenings (after visiting hours/5pm) and nights.</li> </ul> | Decrease in reports of safety concerns, decrease in incidents involving nearby unhoused community members.     | <b>Medium-High</b> | Director of Operations;<br>CEO  | Buzz-in system/ exterior page button installed in Spring 2024 (all others ongoing) |        |
|                 | Residents are unable to physically leave building due to secure system (fobs) throughout the Home     | Assessment/test available for residents interested and capable of leaving the Home themselves. If passed, residents are granted a fob and able to exit (ex. to smoke (following passed smoking assessment), to shop, etc.)  | Residents interested in having access in and out of the building are given test and granted a fob accordingly. | <b>Medium</b>      | Director of Resident and Family Services<br><br>Restorative Care Coordinator<br><br>Director of Nursing | Ongoing, enhanced use through 2023-24 due to newer residents who smoke             |        |



| Type of Barrier                            | Barrier   | Solution/Actions to be Taken   | Measure of Success   | Priority     | Person(s) Responsible | Time Frame                 | Budget |
|--|---|--|--|--------------|-----------------------|----------------------------|--------|
| Attitudes                                  | Not all residents are culturally tolerant or understanding<br><br>(also see Cultural Competency Plan)     | - Goal of running at least 2 cultural or diversity-based programs per quarter, to increase resident awareness and acceptance of different cultures<br><br>(2 every 3 months for a total of at least 8 programs annually) | Determine how many programs with a cultural/diversity focus were run in previous year to measure whether this goal has been reached (typically based on the heritage and culture of residents and their interests) | Medium       | Manager of Recreation | Ongoing                    | \$0    |
|  | Prejudice or misunderstanding of resident needs and diagnoses   | Annual training on AODA Customer Service and dementia / behaviour care for all staff, relevant to role.  | All staff have completed annual / onboarding by the end of the year.   | Medium       | HR Manager            | Ongoing, assigned annually |        |
|  |   | W.R.A.P committee formed (see cultural competency plan) – residents can share lived experience with peers (ex. “Living with Vision Loss” presentation)   | Committee formed in 2024 – success measured by continued meetings throughout the calendar year   | Low – medium | Manager of Recreation | Ongoing                    |        |
| Incidents of residents, family acting with | Increased follow through on investigation of staff, resident, and family abuse experienced by staff, take | Decrease in number of reported incidents, enhanced tracking of   |  |              |                       |                            |        |



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|-----------------|--|--|---|---------------|---|------------|--------|
|                 | prejudice against staff  | appropriate action if conflict is discriminatory (supported by new HR Manager position). Adding signage stating our zero tolerance for abuse of staff by families, residents, etc.   | incidents (ex. incident forms, complaints)  |               |   |            |        |
| <b>Finances</b> | Not all residents or applicants at Victoria Village Manor have the documentation needed to receive rent reductions | <ul style="list-style-type: none"> <li>- Help with rent reduction applications</li> <li>- Increase assistance we offer to residents who need help with filling out their income tax return forms or who are not receiving their proper benefits</li> </ul> | <ul style="list-style-type: none"> <li>- Have a developed plan or mechanism in place for those residents who need assistance with their income tax returns</li> </ul>             | <b>Medium</b> | <ul style="list-style-type: none"> <li>- Director of Resident and Family Services</li> <li>- Social Work Services</li> <li>- Payroll Manager</li> </ul> |            | \$0    |
|                 | Not all residents have a trust account and cannot join other residents on outings                                  | <ul style="list-style-type: none"> <li>- Maintain a donation-based fund for those residents who do not have a trust fund or who cannot afford outings themselves</li> </ul>  | <ul style="list-style-type: none"> <li>- A designated fund has been created and is receiving donations</li> <li>- Increased number of residents attending paid outings</li> </ul> | <b>Medium</b> | Director of Resident and Family Services  | Ongoing    | \$0    |



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|-------------------|--|---|--|-------------------|--|---------------------|--------|
|                   |  | - Dare to Dream initiative created and run by the Family Council  | - Residents who previously did not attend paid outings have started participating in more of these programs<br>-Fundraising for program with 50/50 raffles |                   | Family Council,<br>Director of Resident and Family Services                  |                     |        |
|                   | Residents can not afford needed mobility devices                         | A backup of walkers and wheelchairs are kept on site and can be distributed to residents according to their need. | Residents who require mobility devices have access.  | <b>Medium</b>     | Director of Resident and Family Services<br><br>Restorative Care Coordinator | Ongoing             |        |
| <b>Employment</b> | Employment opportunities available to those of varying cognitive ability | Partnership with Empower Simcoe to employ a client in reception, paired with a mentor.                            | Successful and continued employment of Empower Simcoe client, consideration of future partnerships.  | <b>Low-Medium</b> | HR Manager   | Spring/ Summer 2024 |        |





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|-----------------|---|--|--|----------|----------------------------|---------------------|--------|
| Communication   | Some residents may not speak English/have a different first language (also see Cultural Competency Plan)                    | <ul style="list-style-type: none"> <li>- Collect information on staff languages spoken at onboarding</li> <li>- Try to place staff on floors with residents who speak the same language</li> </ul> | <ul style="list-style-type: none"> <li>- Total number of staff who speak each language in the home are calculated and shift/floor placements are made with this in consideration (as possible) (ex. Polish speaking resident and staff paired, recruited volunteer that spoke Arabic with resident)</li> <li>-Use Google translate as needed when staff with language are not available</li> </ul> | Low      |                            |                     | \$0    |
|                 | Free internet for residents   | - Upgrade of all access points in the Home and increased number of access points to assist in internet connectivity.   | - Stronger connection in areas of the home that previously had limited connection  | High     | Director of Finance<br>CEO | Complete as of 2023 |        |
| Technology      | Unique and new approaches to dementia and mobility care – remove barriers to social connection and engagement for residents | Abby board and Tovertafel as technology to enhance dementia care and services provided.  | Increase in technology usage.  | Medium   | Manager of Recreation      | Ongoing             |        |



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|-----------------------|---|---|---|---------------|---|---------------------------------|--------|
|                       | Residents lack knowledge or access to technology for personal use, communication etc.             | Free computer skills class being offered to residents, providing training on computers and tablets.<br><br>In-house computers are available for resident use. | Number of residents who attend computer course. | <b>Low</b>    | CEO<br><br>Social Work Services                     | Scheduled to begin in July 2024 |        |
| <b>Transportation</b> | At admission, set all residents up with BACTS number (Barrie Accessible Community Transportation) | - Wheelchair accessible transportation to outings or appointments at low cost   |   | <b>Medium</b> | - Director of Resident and Family Services<br>- CEO | Ongoing                         |        |





Updated: June 2024 (previous update: April 2024)