



**MINUTES of
LWDH ACCESSIBILITY ADVISORY COMMITTEE**

Date: January 17, 2022	Location: Virtual	Chairperson: Brock Chisholm	Admin Support: Lesley Hollis
Time Meeting Called to Order: 12:13 p.m.		Time Meeting Adjourned: 1:27 p.m.	
Attendees (List all) If late, note time of arrival			
Donna Makowsky	Brock Chisholm	Dianne Pelletier	Larry Somers
Mary Bawden	Kendra Dobinson	Richard Hoppe	Wayne Ficek
Absent/Regrets			
Patricia Clink	Samantha Atchison		

Topic	Discussion/Action Item	Person(s) Responsible for Action Item & Deadline
1. Call to Order		
1.1 Approval of agenda as presented or with additions	<ul style="list-style-type: none"> The agenda was approved as presented. 	Carried
2. Approval of Minutes		
2.1 Draft Minutes October 18, 2021	<ul style="list-style-type: none"> Moved by R. Hoppe and seconded by W. Ficek to approve the minutes of October 18th, 2021, with corrections made to meeting date. 	Carried
3. Business Arising		
3.1 Barrier Remediation update 3.1.1 List 3.1.2 Braille Signage	<ul style="list-style-type: none"> L. Somers provided an overview of the outstanding items in the Barrier Remediation List. <u>2E door frames and corners low contrast:</u> All doors and frames will be re-painted with the contrasting colors during the upcoming renovation. <u>Audio Alert on power doors:</u> L. Somers is obtaining quotes from Keystone for this initiative. <u>Basement lighting:</u> vestibule lighting was upgraded to LED lighting, all other areas were assessed and deemed appropriate. 	L. Somers B. Chisholm S. Atchison



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	<ul style="list-style-type: none"> • <u>Admitting office needs grab bars:</u> patient registration office was moved. Chairs with arms to assist patients to stand have been put in new office space, no issues brought forward. • <u>Morningstar:</u> Renovation will be started shortly. Drawings will be circulated to the Committee, will be adding another accessible washroom. • <u>Morningstar:</u> Staff washroom requires a grab bar. L. Somers will double-check needs with R. Hoppe • <u>Emergency Wicket too high:</u> L. Somers to send preliminary drawings to W. Ficek for review. Renovation is being planned. • <u>Challenge Clubs manual doors:</u> need to obtain funding to replace the doors • <u>Visual Fire Alarm:</u> strobes have been installed in all identified areas - remove • <u>Challenge Club:</u> washroom needs a few more items to be truly accessible, looking for quotes. Funding still needs to be secured. • <u>Braille Signage on target locations:</u> accessible washrooms and elevator buttons all have Braille. • L. Somers and S. Atchison will tour the facility to clarify which signage and supplies are needed. 	
<p>3.2 Age Friendly Committee update</p>	<ul style="list-style-type: none"> • M. Bawden is the Chairperson of the Age Friendly Committee, but no meetings have been held due to COVID-19. • One of the staples in an age friendly community is Accessibility, including all public places. • Having an age friendly hospital is also a goal, however achieving this may not necessarily mean Accessibility criteria. 	<p>Information</p>



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	<ul style="list-style-type: none">• B. Chisholm recommended to review the new Healthcare Accessibility Standards, as it may cover all age friendly goals as well.• A sub-group is looking at age friendly businesses in town, next meeting has been deferred until May.• M. Bawden also sits on the City of Kenora Accessibility Committee.	
3.3 Patient and Family Advisory Committee (PFAC)	<ul style="list-style-type: none">• Continues to meet monthly. Our January meeting was deferred due to the recent COVID-19 surge in the community but will resume meeting in February.• We are going to wait to promote membership until the COVID restrictions have decreased.• PFAC has reviewed our visitor policy and provided input.• The Committee has been reviewing the provincial patient declarations and comparing to ours.• The Terms of Reference will be reviewed.	Information
3.4 OCHNAP Issues 3.4.1 Essential Caregivers 3.4.2 Clear face masks	<ul style="list-style-type: none">• We currently have no visitors allowed in hospital.• We don't allow visitors in Emergency or and outpatient departments unless they are deemed essential caregivers.• We ask the question about vaccination status, but we don't exclude any visitors unless they fail the screening tool. • Recommended that clear face masks be available. We have purchases clear face masks, but they are cloth. Cloth masks are not allowed for our front-line staff. Our staff wear level 3 face masks, and there are no level 3 <u>clear</u> face masks available.	Information



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<p>3.4.3 Interpreter access for ASL</p>	<ul style="list-style-type: none"> • B. Chisholm will inquire if the clear face masks can be used with a face shield. • We have an account with an interpreter service and can facilitate ASL if needed. 	
<p>3.5 All Nations Hospital update</p>	<ul style="list-style-type: none"> • We have moved into Stage 2, which is functional planning of the project. • 22 user groups have been set up. • The first rounds of focus groups were held right before Christmas. • Second rounds have been deferred due to the increased COVID-19 activity in the community. • Update provided on the project to date, including travel to other sites, stages of planning, community engagement, etc. 	<p>Information</p>
<p>3.6 Space Audit update</p>	<ul style="list-style-type: none"> • Knowing that we were many years from a new hospital, a large space audit was performed. • Many spaces were revamped or physically moved to consolidate services. • Anticipating reno's for ER (if funding received) and 2 East/Maternity. 	<p>Information</p>
<p>3.7 ER Lifts and Education</p>	<ul style="list-style-type: none"> • All staff in ER are trained to use the lifts in the department. • Process for ongoing training/refreshers is being assessed. • Revising the accessible washroom and shower room is in the reno plans for the ER Department. 	<p>Information</p>
<p>3.8 Braille forms</p>	<ul style="list-style-type: none"> • Our "Consent to Treatment" and "Consent to Blood Products" forms were sent to S. Atchison for conversion to Braille (10 copies each) 	<p>Information</p>
<p>4. New Business</p>		



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4.1 Accessibility Compliance Report and Audit	<ul style="list-style-type: none"> • Report submitted at the end of December, received notification in January that we are being audited. 	Information
4.2 Multi-Year Accessibility Plan 2022-2026	<ul style="list-style-type: none"> • Circulated. • No concerns or feedback. • Will be forwarded to the CEO for approval. 	Information
4.3 Review of policies	<ul style="list-style-type: none"> • The following policies were circulated, reviewed and approved: <ol style="list-style-type: none"> a. General b. Information and Communication c. Employment d. Transportation e. Design of public spaces f. Customer service 	Information
4.4 Round Table	<ul style="list-style-type: none"> • <u>W. Ficek</u> – let’s keep emphasizing that we should <u>always</u> continue to go above and beyond minimum standards with Accessibility Standards in the hospital. • <u>M. Bawden</u> – agreed with statement above 	Information
5. Adjournment / Next Meeting		
	<ul style="list-style-type: none"> • The meeting was adjourned at 1:09 p.m. • The next meeting will be Monday May 16th, 2022, at 12:00 p.m. – 1:00 p.m. 	