1.0 Purpose

The Centre for Addiction and Mental Health (CAMH) is committed to providing an accessible and inclusive environment ensuring CAMH personnel, clients/patients and visitors are treated fairly, equitably, and respectfully in accordance with Accessibility for Ontarians with Disabilities Act (AODA) 2005, S.O. 2005, c. 11 and the Ontario Human Rights Code, R.S.O., 1990, c H.19.

This policy is designed to ensure that all CAMH personnel, clients/patients and visitors are aware of the benefits of achieving accessibility for people with disabilities, and know their rights and responsibilities under the AODA. It also establishes accessibility standards for Customer Service at CAMH in accordance with relevant legislative requirements.

This policy applies to all activities that take place at CAMH as well as work-related activities that take place off-site (e.g., conferences, forums, client/patient work in the community, etc.).

2.0 Persons Affected

This policy applies to all CAMH employees, physicians, students, volunteers, and agents (hereafter referred to as “CAMH personnel”) who interact with the public, clients/patients or family members on behalf of CAMH. In addition, any committees, or related organizations, including, without limitation, the Empowerment Council, committees of family members established by CAMH or other similar group are also subject to this policy, in respect of ensuring and accessible and inclusive environment on behalf of CAMH.
3.0 Policy

3.1 CAMH believes that treating people with respect is a key guiding principle for excellent client/patient care and an effective, healthy organization. As such, CAMH is committed to eliminating differences in health status between groups, creating a diverse and inclusive workplace and meeting the accessibility needs of people with disabilities in a timely manner. In order to achieve these commitments, CAMH implements the following standards:

3.1.1 CAMH develop a multi-year accessibility plan that outlines its strategy to prevent and remove barriers, and how it will meet legislative and regulatory requirements. The accessibility plan and annual status report will be available internally, on INSITE, and externally, on www.camh.ca, and will be provided in an accessible format upon request. The multi-year accessibility plan will be reviewed and updated in accordance with legislative and/or regulatory requirements.

3.1.2 CAMH will incorporate accessibility criteria and features when designing, procuring and/or acquiring goods, services, and facilities in accordance with procedure AF 5.2.6 Procurement of Goods and Services Procedure. Where it is not practicable to do so, CAMH will provide an explanation, if requested, detailing why accessibility criteria could not be incorporated in the procurement or acquisition of goods, services and/or facilities.

3.1.3 CAMH will provide accessible vehicles for clients/patients with disabilities or an equivalent alternative if the accessible vehicle is not available. People with disabilities will be given equal opportunity to obtain, use and benefit from the services, goods or facilities provided by CAMH.

3.1.4 People with disabilities have the right to use their own personal assistive devices while accessing the goods, services or facilities provided by CAMH, unless there is a defined risk associated with that use.

3.1.5 CAMH personnel will be familiar with the supports, assistive devices and accessible spaces available at CAMH to increase the accessibility of our services to people with disabilities. Refer to CAMH Accessibility Resources.

3.1.6 People with disabilities who use a service animal have the right to enter CAMH with the animal and keep the animal with them, unless this is precluded by law. Where a service animal is excluded by law, the organization will ensure that other measures are available to the person with a disability to obtain, use and benefit from the services.
3.1.7 People with disabilities who are accompanied by a support person have the right to have access to that support person while accessing goods, services and facilities of CAMH. If discussing confidential information always ask the person with the disability if they prefer their support person to stay present. CAMH will provide personnel with disabilities with individualized emergency response information when necessary.

3.1.8 CAMH will provide notice in the event of a planned or unexpected disruption in the facilities or services usually used by people with disabilities.

3.1.9 CAMH will provide CAMH personnel with disabilities with individualized emergency response information when necessary.

3.1.10 CAMH personnel who interact with the public on behalf of CAMH will receive training on providing inclusive customer service to people with disabilities. This includes those that engage with the public or develop policies and procedures such as managers, senior leaders, directors, and board members. CAMH personnel will also be trained on an ongoing basis when changes are made to policies, practices and procedures. Up to date training records must be kept.

3.1.11 CAMH has a process to receive feedback on the provision of goods, services and facilities provided to people with disabilities accessing service or working at CAMH. This process is posted on our website and is available in accessible formats to people with disabilities.

3.1.12 All policies, practices and procedures for providing accessible customer service and meeting other requirements set out in the Standards will be documented in writing and available both internally and externally.

3.1.13 Internet and intranet websites and web content controlled directly by CAMH (or through a contractual relationship that allows for modification of the product) will conform to legislative and/or regulatory requirements.

4.0 Definitions

**Assistive Devices:** Devices used to assist persons with disabilities in carrying out activities or in accessing the services of persons or organizations covered by this standard. Assistive devices include, but are not limited to, wheelchairs, reading
machines, recording machines, hearing devices, devices for grasping, and canes. (AODA, 2005).

**Accessible formats**: Formats that are an alternative to standard print and are accessible to people with disabilities. Accessible formats may include large print, Braille, recorded audio and electronic formats such as DVDs, CDs, screen readers, etc.

**Accessibility plan**: A plan that describes the actions an organization will take to prevent and remove barriers and when it will do so.

**Communication supports**: The term supports as it is used in the Information and Communications Standards refers to supports that individuals with disabilities may need to access information. Some examples include plain language, sign language, as well as reading the information aloud to a person with vision loss, adding captioning to videos or using written notes to communicate with someone who is hard of hearing.

**Conversion-ready formats**: Refers to any electronic or digital format that facilitates conversion into accessible formats, such as Braille, large print, audio cassettes, CDs, DVDs, etc.

**Barrier**: Anything that prevents a person with a disability from fully participating in all aspects of society because of their disability, including a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

**Disability**: Refers to:
- any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, illness, or present from birth and, without limiting the generality of the forgoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device;
- a condition of mental impairment or a developmental disability;
- a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language;
- a mental disorder; or
- an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.” (AODA, 2005)

Disabilities can be visible as well as non-visible, of different severity, and the effects of a disability may come and go. For example:
- A person with arthritis has a disability that over time may increase in severity.
- A person with a brain injury has a disability that is not visible.
- A person with multiple sclerosis has a disability that causes them to experience periods when the condition does not have an effect on their daily routine and other periods when it does.

**Service Animals:** As defined in the *Accessibility for Ontarians with Disabilities Act*, an animal is a service animal if either:
- it is readily apparent that the animal is being used by a person for reasons relating to the person’s disability;
- it is “readily apparent” that an animal is a service animal when it is obvious by its appearance or by what it is doing. For example, it may be readily apparent that an animal is a service animal if it is wearing a harness, saddlebags, a sign that identifies it as a service animal, or has a certificate or identification card from a service animal training school or an identification card from the Attorney General of Ontario. It may also be readily apparent if a person is using the animal to assist in performing tasks, such as:
  - alerting individuals who are deaf, deafened or hard of hearing to sounds;
  - pulling a wheelchair;
  - alerting to seizures;
  - opening/closing doors;
  - providing mental health support;
  - retrieving dropped items;
  - guiding individuals with impaired vision.

OR
The person provides documentation from an approved regulated health professional confirming that the person requires the animal for reasons relating to the disability.

- The letter need only explain that the animal is required because of a disability. The letter does not need to identify the disability, why the animal is needed, or how it is used.
- “Approved regulated health professionals” are members of the following:
  - College of Audiologists and Speech-Language Pathologists of Ontario;
  - College of Chiropractors of Ontario;
  - College of Nurses of Ontario;
  - College of Occupational Therapists of Ontario;
  - College of Optometrists of Ontario;
  - College of Physicians and Surgeons of Ontario;
  - College of Physiotherapists of Ontario;
  - College of Psychologists of Ontario;
  - College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario.

NOTE: The definition of service animal does not include an emotional support animal who does not otherwise meet the above requirements.

STRIDES (Systematic Tracking & Review of Incidents: Disclosure for the Enhancement of Safety): CAMH’s internal reporting system. STRIDES is an administrative management tool that gathers information for quality improvement, risk management and legal purposes. It is an internal document and is not part of the client/patient’s health record. Incidents entered into STRIDES are categorized according to the level of severity.

Support Persons: An individual hired or chosen by a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs or with access to goods, services and facilities. The support person could be a paid personal support worker, a volunteer, a friend or a family member. They do not necessarily need to have special training or qualifications. Please note that CAMH can only insist a support person accompany a person with a disability for health or safety reasons, in consultation with the person with a disability and when there is no other way to protect health or safety of the person or others. Any fees or
fares for service of the person with a disability must be waived for the support person.

5.0 Responsibilities
5.1 All CAMH personnel and any other person, who acts on behalf of CAMH, provide client/patient care or who deal with the public, family members or community partners are required to be familiar with this policy and act in accordance with this policy, including participating in training on its implementation.

6.0 Procedures
6.1 Notice of Disruption in Facilities or Services
6.1.1 Notice for disruption in services usually used by persons with disabilities will include information about the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if available.
6.1.2 Notice will be provided directly to clients/patients by their service provider when disruptions are known about in advance.
6.1.3 Planned service interruptions for elevators, driveways and parking areas will be posted by Support Services at the relevant locations and on CAMH INSITE, including information on the duration of the interruption and any alternative facilities that may be available.
6.1.4 If there is an unexpected disruption, clients/patients will be notified as soon as possible by their service provider, and via posted announcements.

6.2 Training of CAMH Personnel
6.2.1 A variety of methods will be used to deliver training including an information guide/booklet, an e-learning tutorial, online resources, presentation at meetings, and in-service education as appropriate to job roles and functions.
6.2.2 The training will include but is not limited to:
6.2.2.1 the purpose of the AODA and the requirements of the customer service standard, the Integrated Accessibility Requirements and the related but distinct disability related obligations under the OHRC;
6.2.2.2 how to interact and communicate with people with various types of disabilities;
6.2.2.3 how to interact with people with disabilities who use an assistive device or require the assistance of a service animal or a support person;
6.2.2.4 how to access an in-house resource on how to use the equipment or devices available at CAMH’s or otherwise that may help with the provision of goods, services and facilities to people with disabilities, e.g. bell relay, accessible washrooms, ASL interpretation;
6.2.2.5 what to do if a person with a disability is having difficulty in accessing CAMH’s goods, services and facilities; and
6.2.2.6 CAMH’s policies, practices and procedures that affect the way goods, services and facilities are provided to people with disabilities.

6.2.3 The training will be disseminated as follows:
6.2.3.1 all new employees will receive an introduction to the AODA in their orientation process;
6.2.3.2 mandatory e-learning training is on CAMPUS for all employees;
6.2.3.3 contractors, volunteer, trainees and physicians will receive in person training or a link to online training prior to commencement of their work at CAMH. They will also be provided with the link to CAMH’s accessibility page for further resources.

6.2.4 The training will be tracked and recorded as follows:
6.2.4.1 online learning will be recorded by the training provider and then tracked by the People and Experience;
6.2.4.2 attendance at orientation will be recorded through People and Experience;
6.2.4.3 volunteers will be recorded through Volunteer Services.

6.3 Accessibility Plan
6.3.1 The Accessibility plan will be developed in consultation with CAMH’s Accessibility Planning Committee.
6.3.2 The plan is posted internally, on INSITE, and publicly, on www.camh.ca and is available in alternative formats upon request.
6.3.3 CAMH will conduct an annual status report update of the plan and post the update publicly.

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6.3.4 CAMH will formally review and revise the overall plan in accordance with legislative and/or regulatory requirements.

6.4 Feedback on the Accessibility and Customer Service for People with Disabilities
6.4.1 Clients/Patients, Families and the Public
   6.4.1.1 Feedback will be facilitated through the Client Relations Office. Refer to policy PC 1.6.1 Client Relations.
   6.4.1.2 Client Relations Office can be contacted at:
       Office Location: Bell Gateway Building, 100 Stokes Street
       Telephone: 416-535-8501 ext. 32028
       Email: client.relations@camh.ca

6.4.2 CAMH personnel with feedback on accessibility should contact the appropriate internal resource depending upon the nature of the feedback:
   6.4.2.1 Health Safety and Wellness Department (for individual accommodation and questions).
   6.4.2.2 People and Experience (for questions about our Accessibility Plan and resources).
   6.4.2.3 Facilities Planning (for building related issues).

6.5 Provision of Information on Accessible Customer Service
6.5.1 This policy is posted on CAMH’s external website and can also be accessed upon request.
6.5.2 CAMH will take into consideration the person’s ability to access information and will provide any document or information in a format that meets those needs as agreed upon with the person, to the best of our abilities (e.g., email, large font, hard copy, Braille, verbally reviewed in person or over the telephone).

7.0 References
   Accessibility for Ontarians with Disabilities Act, S.O. 2005, c. 11. Available at:

   Accessibility Standards for Customer Service, Ont. Reg. 429/07. Available at:
Title: Accessibility and Customer Service for People with Disabilities  


8.0 Links/Related Documents

8.1 Related Policies and Procedures

AF 5.2.1 Procurement of Goods and Services
PC 1.6.1 Client Relations
PC 2.1.5 Animals at CAMH

8.2 Other Resources

CAMH Accessibility Resources

9.0 Review/Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision No.</th>
<th>Revision Type</th>
<th>Reference Section(s)</th>
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<tr>
<td>November 2009</td>
<td>1.0</td>
<td>New Policy</td>
<td>• N/A.</td>
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<tr>
<td>June 2013</td>
<td>2.0</td>
<td>Minor</td>
<td>• Move procedures in section 3.0 to section 6.0; addition of requirements from Integrated Accessibility Standard.</td>
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<tr>
<td>January 2017</td>
<td>3.0</td>
<td>Minor</td>
<td>• Requirements of accessible customer service changes in services animals and training.</td>
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<tr>
<td>April 2018</td>
<td>4.0</td>
<td>Minor</td>
<td>• Update policy to refer to goods, services and facilities so it is in</td>
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<td>Date</td>
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<td>Revision Type</td>
<td>Reference Section(s)</td>
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<tr>
<td>March 2019</td>
<td>5.0</td>
<td>Reviewed with no changes</td>
<td>• N/A.</td>
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<tr>
<td>February 2021</td>
<td>6.0</td>
<td>Moderate</td>
<td>• Sections 1.0, 2.0, and 3.0 – addition of legislative requirements, committee commitments and multi-year plan. Addition of new definitions.</td>
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Appendix A – The Relationship of the *Accessibility of Ontarians with Disabilities Act* (AODA) to the *Ontario Human Rights Code* (OHRC)

The *AODA* does not replace or affect existing legal obligations under the *OHRC* or other laws in respect to accommodation of people with disabilities.

Organizations have to comply with both the *AODA* and the *OHRC*. While both deal with accessibility, they are two very different pieces of legislation. The *OHRC* is an individual, complaints based legislation that addresses discrimination. The *AODA* applies to all organizations in Ontario and will increase accessibility for all. The *OHRC* requires organizations to accommodate people with disabilities to the point of undue hardship. The *AODA* does not replace or affect legal rights or obligations that arise under the *OHRC* or other applicable legislation related to accommodation of people with disabilities. This means that the *OHRC* or other legislation may require additional accommodation measures that go beyond or are different from the standards established by the regulations of the *AODA*.