



Accessibility

Section: General	Policy No: 1-410
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1. POLICY

For this policy, the University of Ottawa Heart Institute (UOHI), the Ottawa Heart Institute Research Corporation (OHIRC), and the University of Ottawa Heart Institute Foundation (Foundation) are collectively referred to as “the Institute”.

The Institute is committed to advancing a culture of inclusivity, equity, and accessibility. We recognize and respect the inherent dignity, unique attributes, and rights of every individual.

The Institute will ensure that all patients, visitors, caregivers and staff, regardless of disabilities, have equitable access to cardiac care and support services in alignment with *the Accessibility for Ontarians with Disabilities Act, 2005* (AODA).

This policy applies to all patients, research participants, visitors, staff, and volunteers of the Institute, including interactions in clinics, programs, hospital and research facilities.

2. DEFINITIONS

Accessibility – The ability of individuals, regardless of disability, to access and benefit from the Institute’s facilities, services, and programs without barriers.

Accessibility for Ontarians with Disabilities Act (AODA) – Ontario legislation enacted in 2005 that sets standards for improving accessibility in areas such as customer service, employment, transportation, and healthcare.

Barrier – Anything that prevents a person with a disability from fully participating in society, including physical, architectural, technological, informational, communication, attitudinal, and systemic barriers.

Disability – As defined by the Ontario Human Rights Code, this includes any physical, sensory, intellectual, learning, or mental health condition that may be permanent or temporary.

Assistive Device – Any tool or equipment used by individuals with disabilities to maintain or improve their independence, such as wheelchairs, hearing aids, screen readers, or communication boards.

Communication Supports – Methods used to assist individuals with disabilities in accessing information, including sign language interpretation, large-print materials, electronic documents, and plain-language communication.

Inclusive Care – An approach to healthcare that ensures all patients, including those with disabilities, receive equitable, respectful, and effective treatment tailored to their specific needs.

Accessible Facilities – Physical spaces designed or modified to accommodate individuals with disabilities, including automatic doors, ramps, accessible parking, and washrooms.

3. PROCEDURE

3.1. COMMITMENTS

- **Accessible Facilities and Services:**
 - Maintain barrier-free access to facilities, including accessible entrances, washrooms, and parking.
 - Offer assistive devices such as wheelchairs, hearing loops, and braille materials to enhance access.
- **Communication Supports:**
 - Provide accessible formats and communication including large print, plain language, or electronic documents.
 - Ensure interpreters or alternative communication support, including sign language, are available as needed.
- **Inclusive Care Delivery:**
 - Offer equitable services tailored to patients' needs, ensuring equitable opportunity for individuals with physical, sensory, or cognitive disabilities.
 - Train staff to deliver care and communicate effectively with patients with disabilities.
- **Feedback and Continuous Improvement:**
 - Actively encourage patient and caregiver feedback through accessible channels, including online forms, in-person communication, and suggestion boxes.
 - Regularly review feedback and accessibility barriers to improve services.
- **Emergency Procedures:**
 - Provide clear evacuation plans with accommodations for individuals with disabilities during emergencies.

3.2. ACCESSIBILITY FEEDBACK PROCESS

Patients and visitors can provide feedback about accessibility through: The Accessibility Feedback Form available on the Institute website **OR** by Contacting the UOHI Patients Relations Office by phone (613-696-7000 ext.19305) or email (patientrelations@ottawaheart.ca) to share comments or suggestions for improvement.

3.3. TRAINING REQUIREMENTS

All Institute staff and volunteers will undergo training on accessibility in a Health Care Environment during their initial orientation to ensure compliance and empathetic service delivery.

3.4. COMPLIANCE AND REVIEW

This policy will be reviewed every three years to remain consistent with legislative updates, including the AODA, and to incorporate best practices.

4. RELATED POLICIES AND/OR LEGISLATIONS

Legislations

- [Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11](#), and its regulations:
 - Integrated Accessibility Standards Regulations (IASR), O. Reg. 191/11
- [Ontarians with Disabilities Act, 2001, S.O. 2001, c. 32](#)
- [Ontario Human Rights Code \(OHRC\), R.S.O. 1990, c. H.19](#)
- [Employment Standards Act, 2000, S.O. 2000, c. 41](#)
- [Occupational Health and Safety Act, R.S.O. 1990, c. O.1](#)

Related UOHI Policies

- [UOHI Inclusivity, diversity, equity, and accessibility \(IDEA\) statement](#)