

## ACCESSIBILITY

## OP 4.22

### POLICY STATEMENT

Community Living Dufferin is committed to achieving optimal accessibility for all people supported in all areas of its services and structures, regardless of their disability.

**Accessibility barriers that a person supported by CLD may encounter include but are not limited to:**

#### **Physical / Structural Barriers**

A **structural** barrier is any physical factor that makes accessibility difficult. Examples of these include: heavy doors at entrances and building interiors, doorknobs that must be twisted, narrow doorways etc.

#### **Environmental Barriers**

An **environmental** barrier can include flickering lights, noise levels, temperature levels, fragrances or alarms that cannot be heard by individuals with hearing impairments.

#### **Communication Barriers**

A **communication** barrier can include fonts that are too small, information that is not presented in understandable formats, or signage that is confusing or inadequate.

#### **Attitudinal Barriers**

An **attitudinal** barrier is a negative attitude that people have towards an individual with a developmental disability. This can include attitudes of neighbours, health care professionals or community members, lack of 'person first' language in publications or lack of sensitivity or tolerance.

#### **Financial Barriers**

A **financial** barrier is anything that may mean that a service is restricted because of lack of sufficient financial resources.

#### **Transportation Barriers**

A **transportation** barrier speaks to situations in which people are unable to reach or fully participate in services because of the lack of suitable and available transportation.

#### **Policy/Practice Barriers**

A **policy/practice** barrier refers to policies and practices that do not accommodate the needs of people using services.

#### **Other Barriers**

Please identify any other barriers that you may not have noted elsewhere.

### PROCEDURES

1. Any identified barriers found should be reported to the Accessibility Committee using the Feedback and Concern Form (ADPF 7.1). The Executive Director or designate will follow up with the complainant within 5 business days.
2. Communication barriers shall be addressed by providing information in accessible formats or communication supports at the request of any consumer or member of the public.

3. Accessibility Barriers shall be addressed on an individual basis and will be reviewed annually as part of the persons planning process OPF 2.14/OPF 3.1. If there are barriers identified and that cannot be dealt with at a program level the person or support circle member will complete the Feedback and Concerns Form (ADPF 7.1) and submit it to the Accessibility Committee (see procedure 1).
4. An annual agency wide accessibility self-assessment using the associated Accessibility Audit Checklist (OPF 4.8) will be completed by the CLD Accessibly Committee. Participation from all affected stakeholders will be solicited to identify and evaluate accessibly barriers within CLD structures and services.
5. Identified barriers through the assessment process will be prioritized by the CLD Accessibility Committee who will endeavor to ensure that all accessibility issues and needs are addressed within the bounds of Health & Safety, existing legislation and fiscal limitations. Temporary solutions may be put in place until a permanent solution can be implemented.
6. All staff will be trained in accessibility and customer service within the first six months of employment. Certificate of Completion of training will be placed on the employee's personnel file.
7. Where community barriers have been identified the Agency will notify the officials involved and advocate on behalf of those we support, our employees and the community.

All structures purchased, leased or rented and services provided by CLD will have to be assessed using the associated Accessibility Audit Checklist (OPF 4.8) and barriers must be address or a plan to eliminate barriers must be developed prior to CLD actively using the structure.

**REFERENCES FOR USE WITH THESE PROCEDURES.**

- OPR 4.13 Accessibility Committee Terms of Reference
- ADP 7.1 Customer Service Policy
- ADP 1.3I Accommodation Policy

**FORMS FOR USE WITH THESE PROCEDURES**

- OPF 4.8 Accessibility Audit Checklist
- ADPF 7.1 Feedback Concern Form

**CORE COMPETENCIES RELATED TO THIS POLICY**

- Creative Problem Solving and Decision Making
- Advocating for Others

Procedures Approved by Executive Director:	Policy Approved by the Board of Directors
Date: March 5, 2013	Date: March 5, 2013
Procedures Updated: Dec 14, 2015, Aug 19, 2016	Policy Updated:
Policy & Procedures Reviewed:	April 8, 2017