

## Terms of Reference

<b>TITLE:</b> Accessibility Committee	
<b>DATE:</b> June 17, 2009	<b>APPROVED BY:</b> Senior Management Committee
<b>REVIEW FREQUENCY:</b> Every 2 years	<b>REVISED/REVIEWED:</b> February 2010, March 18, 2014, December 11, 2017, April 6, 2018

### Purpose:

The purpose of the Accessibility Committee is to identify, promote and ensure accessibility for all persons living with a disability while at Cambridge Memorial Hospital (CMH); in accordance with:

- a) the Accessibility Plan for Cambridge Memorial Hospital (CMH);
- b) the requirements of the Accessibility for Ontarians with Disabilities Act 2005 (AODA), and;
- c) any standards arising from the AODA.

### Objectives:

- 1) To develop a five year Accessibility Plan that includes the following:
  - a) a report on the status of measures that CMH has taken to identify, remove and prevent barriers to accessibility for people with disabilities, including a chronology of barrier removal initiatives from past years;
  - b) a list of initiatives recommended for the coming years to identify, remove and prevent barriers to accessibility for people with disabilities (an Accessibility Work Plan);
  - c) a report on feedback received from the public, patients, staff related to barriers to accessibility to inform this plan; and
  - d) a report on training compliance.
- 2) To develop a CMH annual work plan that reflects the requirements noted in 1) above for approval by the Senior Management Committee.
- 3) To review CMH accessibility policies and procedures every three (3) years, or as needed to ensure alignment with legislation and current practice.
- 4) To undertake reviews of all proposed or updated organizational policies from an accessibility lense / point of view.
- 5) To ensure a training protocol is in place for all new hires and those returning from long term leaves of absence, and that updates related legislation, CMH policies, procedures and practices have been communicated to employees, medical/professional staff, volunteers, agents and others.  
Ensure the regular review of accessibility related training and learning modules of tenured staff at a minimum of every 5 years in alignment with the multi-year accessibility plan.
- 6) To ensure that the Accessibility Plan, policies, procedures and practices are available:
  - a) in the format required by the person with the disability, upon request, in an agreed upon time frame; and

- b) for the public, staff, medical professional staff, volunteers and agents and others in a prominent place and in a variety of formats.
- 7) To develop committee expertise on accessibility issues, policies, procedures and practices so as to act:
  - a) as a resource on accessibility for CMH leadership and the Board;
  - b) as a resource for staff, medical/professional staff, volunteers and agents;by ensuring that committee members undertake ongoing education through their annual work plan to ensure competency within the committee
- 8) To ensure that ongoing audits are undertaken that reflect the requirements of the AODA for all existing space, space to be renovated or new space to be constructed.

### **Membership:**

- Manager of Planning & Redevelopment (Chair)
- Director of Capital Redevelopment (co-Chair)
- Allied Health practitioner
- Public Affairs and Communications representative
- IT representative
- Patient Experience Lead
- Clinical educator/facilitator and/or
- Human Resources representative
- Clinical management representative
- Clinical representatives (2) (1 inpatient and 1 outpatient)
- Employee living with disability
- Community at large representative(s): person with a disability, a caregiver of a person with a disability or a person representing an agency supporting persons living with a disability
- Consulting Experts (as required)
- Ad hoc members (as required)

### **Selection Process:**

Members will be selected from a submission of names assembled through a leadership call for representatives across the organization as positions become available as a result of;

- a) resignation or;
- b) as a result of the expiration of a member's term.

New members will undergo a general orientation with an existing member of the Accessibility Committee to provide further background on committee roles and responsibilities.

Consultant or ad hoc membership will be undertaken on an as needed basis, and will follow the selection process noted above.

Consultant selection will follow the hospital procurement policy.

### **Term:**

Members of the CMH Accessibility Committee shall serve for a minimum of 2 years.

### **Accountability:**

The Accessibility Committee will be accountable to Senior Management Committee. Annually, the Committee must submit a work plan prior to the start of the fiscal year for approval by Senior Management Committee. The Director of Capital Redevelopment will, on behalf of the Committee, bring forward those items as required to the Senior Management Committee for review, comment, and approval. Such items may include those issues that reflect staff resource requirements, operational impact, or financial resource requirement. Where required, the Senior Management Committee may advance such items to the Board for review, comment or approval.

### **Meeting Frequency:**

At a minimum, meetings will be held on a quarterly basis. Additional meetings may be called at the discretion of the Chair(s) as required.

### **Agenda Preparation:**

The agenda will be developed by the Chair / Co-Chair no later than one week in advance of the scheduled meeting.

Agenda items can be submitted by all members of the Committee and / or from Administration (Senior Management Committee) or Board for inclusion on the agenda.

### **Quorum & Decision Making:**

Decisions will be made by consensus on those matters of the Committee. Where consensus is not evident, decisions will be made by vote.

Quorum will constitute a 50% +1 requirement for those items requiring Committee agreement. The Chair or Co Chair is not required to vote and will only vote when necessary to break a tie.

### **Minutes:**

Formal meeting minutes will be documented by the Chair / Co-Chair or designate highlighting the general discussion undertaken and actions where required.

Circulation of minutes will include all Committee members and others as required and noted within the meeting minutes.

### **Materials:**

All Accessibility Committee related documentation will be retained and organized on CMH's internal network for access by the organization.

### **Review:**

The Committee will:

- a) undertake a regular review to evaluate the Committee objectives, including the terms of reference;
- b) undertake a regular review to evaluate the performance of the Committee as it relates to its objectives and terms of reference; and
- c) undertake the review every 3 years.