

# The Ottawa Hospital's 2025 Accessibility Annual Status Report

This report provides an overview of activities that took place at The Ottawa Hospital in 2025 to identify, reduce and eliminate accessibility barriers. The information includes the status of the commitments presented in the 2025 one-year extension of the hospital's 2023-2024 Multi-Year Accessibility Plan as well as highlights of other activities.

The report is produced by the Official Languages and Accessibility Department (OLAD), which operates under the direction of the Executive Vice-President & Chief Strategy and People Officer.

If you have any questions about accessibility at The Ottawa Hospital and the hospital's multi-year accessibility plan, or if you would like to receive this report in an alternate format, please write to [accessibility@toh.ca](mailto:accessibility@toh.ca).

And if you want to get involved in supporting accessibility at The Ottawa Hospital, we want to hear from you!

## Content:

1. [Activities related to hiring](#)
2. [Activities related to employee support](#)
3. [Activities related to patient support](#)
4. [Activities related to the built environment](#)
5. [Activities related to training and awareness](#)
6. [Activities related to compliance with the Accessibility for Ontarians with Disabilities Act](#)
7. [Status of commitments recorded in 2025](#)

# 1. Hiring

The hospital's Talent Acquisition team:

- Continued to track the number of requests for accommodations received throughout the recruitment process.
- Established a working group to reflect on how to ensure job candidates are fully informed of the core requirements of positions in order for them to be able to request appropriate accommodations.
  - Clarity on the core requirements of positions also allows the hospital to determine whether a given individual facing accessibility barriers may be able to fulfil core duties with accommodations.
- Continued ad-hoc collaboration with the Official Languages and Accessibility Department to address accessibility issues that impact candidates and employees with disabilities.
- Continued to increase its awareness of benefits of hiring persons with disabilities as well as the barriers faced by candidates and employees with disabilities by participating in networking and learning opportunities.
  - Such opportunities include ongoing collaboration with the Employment Accessibility Resource Network (EARN) and the United Way.
  - Next steps include continuing education to the Talent Acquisition team on the duty to accommodate within TOH.

Further to the activities listed above, all job postings on the internal and external website now include the following revised statement on accommodations: “The Ottawa Hospital is an equal opportunity employer and is committed to providing an inclusive work environment. Candidates are encouraged to request accommodations throughout all stages of the recruitment process. These accommodation requests will be kept confidential. To request an accommodation or if you have any questions regarding accessibility, please contact [HRSupport@toh.ca](mailto:HRSupport@toh.ca).” This wording was established following extensive consultations that included seeking feedback from the Disabled Community@TOH employee resource group, the Equity, Diversity and Inclusion Council and the Accessibility Advisory Committee.

## 2. Employee Support

The Parking team:

- Completed a tendering process securing continued offer of accessible inter-campus transportation for staff, including the 2026 launch of new shuttle vehicle fleet that will provide enhanced comfort for riders thanks to the installation of heavy-duty vehicle suspension.

The Emergency Management Program (EMP) team:

- Completed a tendering process to enhance mass notification during incidents; sought enhancements included increasing multi-modal notification (audio and visual) and allowing staff to select how notifications are received, i.e., by text, email or telephone call. A combination of solutions is being implemented, with the services of Hypercare for mass notification and continued use of Net Support Notify and overhead paging as additional communication forms.
- Updated the hospital's Crisis Communications Plan to notify the public about incidents that would impact access to services and continued work with the Communications team to develop information for the public on hospital emergency codes.
- Completed the incorporation of icons to accompany colour-coded emergency code materials for staff who are colour-blind or partially sighted in job action sheets, which provide staff with information on what to do in different types of emergency situations.

Further to the activities listed above, the EMP team participated in a multi-team effort to ensure that individualized workplace emergency plans are updated when an employee requiring such a plan changes work location or sees changes in their accessibility needs. This work was accomplished by introducing a form in the Human Resources Information System that allows employees and leaders to access and update information, and the Emergency Management Program team to receive notification to provide updated individualized plans when required.

### 3. Patient Support

The Communications team:

- Continued monitoring the level of accessibility of the external website as the team prepares to launch a new site that will feature a best-in-class, inclusive infrastructure and design that will be accessible and meet AODA compliance regulations.
- Continued ensuring that documents that are uploaded to the external website in a Portable Document Format (PDF) are accessible.

Further to the activities listed above, the hospital continued to offer sign language interpretation to patients and the Patient Relations team continued to receive and address accessibility concerns, including through the Accessibility Feedback Form that is accessible on the hospital's website. This form was enhanced in 2025 to allow for the inclusion of photographs.

### 4. Built Environment

Civic Campus:

- Entrance Improvements: Upgraded the Parkdale Clinic building main entrance by removing carpet, improving flooring transitions, and adding enhanced wayfinding and signage

General Campus:

- Ward A Patient/Family Lounge: Fully renovated the kitchenette to significantly enhance both the accessibility and the functionality of the space.
  - Upgrades included new counters and dispensers installed at accessible heights to ensure full compliance with accessibility standards.
  - As this area is heavily used by patients and families, the improvements have had a positive impact on independence and overall user experience.
- Doorway Modifications to the Rehabilitation Centre Recreation Space: Widened a doorway to improve mobility and access for patients, families, and staff.

Further to the activities listed above, four (4) high-traffic washrooms were prioritized for redesign to address accessibility gaps and reduce barriers for patients, visitors, and staff. Renovations are scheduled early 2026.

### Riverside Campus:

- Wayfinding Review: Completed an assessment of wayfinding on the third floor, recognizing that the area serves many visually impaired individuals.
  - Based on the findings, substantial upgrades were made to improve signage clarity and overall navigational support.
- Parking: Brought the accessible parking of the 1919 Riverside Drive visitor parking lot much closer to the front door, and the adjacent concrete pad at entry was redone to improve accessibility.

### Throughout TOH:

- Improved wayfinding at main entrances.
- Installed additional automatic door operators across TOH.
- Purchased and installed accessible picnic tables to improve outdoor seating options.
- Engaged a third-party consultant to assess high-traffic areas on the main floors of both the General and Riverside campuses as well as the parking garage at the General Campus.
  - The consultant's scope also included reviewing and providing guidance on what built environment features should be evaluated during walkthroughs focused on accessibility and identifying opportunities to improve.
  - The consultant's findings will help establish a more consistent and informed approach to accessibility walkthroughs and project feedback.
  - Their recommendations will also play a key role in shaping five-year planning priorities.
- Continued seeking accessibility input for integration into the detailed design process.
  - Feedback is requested at multiple stages to ensure all designs consider and support barrier-free access for patients, visitors, and staff.
- Continued to perform scheduled and emergency maintenance of accessible elements.
  - Such elements may include accessible parking spaces and their signage, outdoor public use eating areas, and exterior paths of travel (which include ramps, stairs, curb ramps, and depressed curbs), as well as other critical built environment features that help minimize accessibility barriers, such as automatic door operators, accessible washrooms, and elevators.
  - This type of maintenance is part of regular hospital activities, and it is not tracked by the OLAD.

Further to the activities listed above, emphasis was placed on re-establishing a subcommittee dedicated to identifying and setting priorities for accessibility enhancements across the built environment. As such, the Accessibility of the Built Environment Subcommittee was formally launched in February 2025. This group played a critical role in ensuring that capital funding for the 2025/2026 fiscal year was allocated to the highest-impact accessibility renovations and improvements.

New Campus Work Plan – ongoing:

- The NCD design process incorporates comprehensive accessibility input from both a third-party accessibility consultant and the Patient and Family Advisory Council (PFAC). Feedback is integrated at all major design milestones, ensuring accessibility considerations are embedded from early concept development through detailed design. This collaborative approach helps identify potential barriers, improve user experience, and align the project with best-practice accessibility standards. Accessibility remains a core priority throughout the design of the new campus, guiding key decisions to support a fully inclusive and barrier-free environment for patients, visitors, and staff.

## 5. Training and Awareness

The OLAD team:

- Held an awareness and collaboration session with the Patient Relations Department team to review and enhance the capture and categorization of accessibility concerns.
- Published information on Guide Dog Etiquette produced by the Canadian National Institute for the Blind (CNIB) in the hospital's internal weekly newsletter, marking Guide Dog Awareness Month; posters were also put up in the Employee Corner display cases of each campus.
- Continued updating a training module for new leaders, which is nearing completion.
  - This training will include a supporting resource for leaders to access when accessibility questions or issues arise.

Further to the activities listed above, the hospital continued to provide training on accessibility to various groups of people starting work or volunteering, in different formats. These groups included new hires, volunteers, leaders, and members of the Board of Governors.

And thanks to the work and support of the Disabled Community@TOH employee resource group, activities were also held in conjunction with National AccessAbility Week and the International Day of Persons with Disabilities.

National AccessAbility Week:

- Mounted a display featuring comics strips on the topic of a day in the life of a person with a disability, using humour and art to spark reflection.
- Held a conversation panel to challenge the perceptions of what it means to have a disability and work full-time in a health-care setting.

International Day of Persons with Disabilities:

- Held a film screening of *Dreamscapes*, an award-winning experimental film exploring mental health. Attendees had the opportunity to participate in a question-and-answer session with the creators of the film after the screening, i.e., the Ghost Rooster Collective.

Further to the above, a portrait of a member of the Environmental Services team was published on social media to share their experience living with a non-visible disability (epilepsy) and an episode that happened once at work, including how the patients and his team supported them through it.

## 6. Compliance with the Accessibility for Ontarians with Disabilities Act

The OLAD team:

- Issued a Multi-Year Accessibility Plan that will guide activities until the end of 2030 following the expiry of the previous multi-year accessibility plan and its one-year extension.
  - Consultation with the Accessibility Advisory Committee and the Disabled Community@TOH took place in order to determine objectives of the plan.
  - Flexibility is built into the plan to allow for further goal setting by the upcoming Accessibility Patient and Family Advisory Committee and to allow for adjustments to the plan if the provincial government makes changes to accessibility regulation.
- Completed the biennial accessibility compliance report to the Ministry for Seniors and Accessibility.
- Refined compliance monitoring activities.

- Continued working on updating accessibility policies and procedures.

## 7. Status of commitments recorded in 2025

Commitments included in the 2025 One-Year Extension to the 2023-2024 Multi-Year Accessibility Plan	Status
<p><u>Customer Service and Proposed Provincial Health Care Accessibility Standards Work Plan</u> The main goal for 2025 was to complete a refreshment of training for manager-level leaders.</p>	A revised training module is nearing completion.
<p><u>Employment Standard – Talent Acquisition Work Plan</u> The main goal for 2025 was the inclusion of language on job postings that will help attract candidates with disabilities by increasing their confidence in the hospital’s efforts to promote and support inclusion and equal opportunity.</p>	Completed.
<p><u>Employment Standard – Emergency Management Work Plan</u> The main goal for 2025 was to participate in a multi-team effort to ensure that individualized workplace emergency plans are updated when an employee requiring such a plan changes work location or sees changes in their accessibility needs.</p>	Completed.
<p><u>Information and Communication Standard Work Plan:</u> The main goal for 2025 was to finish the internal style guide to make sure staff-written content is clear, easy to read and free from language that could cause stigma toward people with disabilities.</p>	Work on the development of the TOH Guide to Inclusive Language section of the Style Guide is to continue.
<p><u>Built Environment and New Campus Work Plan</u> The main goal for 2025 was the reinstatement of a subcommittee dedicated to directing priorities for accessibility improvements to the built environment.</p>	Completed.

Note: Ce rapport est disponible en français.