



Weeneebayko Area Health Authority

Multi-Year Accessibility Plan 2025-2030

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1.0 Executive Summary

Weeneebayko Area Health Authority (WAHA) is committed to ensuring that staff, patients, visitors and volunteers are able to access the hospital safely. The hospital highly values and strives to follow all accessibility standards to ensure that all individuals, including those with disabilities, can access healthcare services without barriers.

Patient experience is a top priority at WAHA, as it is always our goal to provide positive, high quality health care services for patients. Reducing barriers to accessing care is an important way that the patient experience is prioritized and addressed at the hospital. It is imperative that patients and visitors with disabilities receive equal treatment and can navigate hospital services with ease, experiencing an inclusive and supportive environment.

The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation.

Ontario Regulation 429/07 Accessibility Standards for Customer Service came into effect in 2008, and Ontario Regulation 191/11, Integrated Accessibility Standards became law in 2011 and included standards for information and communication, employment, and transportation.

We are pleased to provide a five-year Accessibility Plan that outlines our strategic direction with regards to accessibility that highlights current barrier-free initiatives that have been completed and future plans that embrace the Integrated Standards of the AODA.

2.0 Objectives

This plan includes the following objectives:

Describe the process by which WAHA will identify, prevent, reduce and/or remove barriers to persons with disabilities.

- Outlines the process by which the status of each barrier is reviewed and monitored.
- Outlines the process by which new barriers are identified and included in future plans.
- Describes how WAHA will make this accessibility plan available to the public.

3.0 Strategic Plan

The WAHA Board of Directors operates on a three year planning cycle.

WAHA is committed to ensuring that the health authority fulfills its obligation to deliver high quality standards in every aspect of health care that engages patients, community members, allied partners and Weeneebayko staff. The organization's quality strategy provides the framework to systematically assess, evaluate and improve the structure, process and outcome related activities in care and services, highlighting an organization wide approach which is collaborative and interdisciplinary in nature. At WAHA, we strive to ensure that quality standards are defined and adhered to throughout the organization. WAHA embraces both western and traditional approaches to medicine.

Vision:

Weeneebayko Area Health Authority will distinguish itself as a provider of quality health services with a holistic approach that reflects the distinct needs of all peoples in the Weeneebayko region.

Mission:

Weeneebayko Area Health Authority is a regional, community-focused organization, committed to providing optimum health care as close to home as possible.

Values:

WAHA is committed to promoting healthier lifestyles while continuing to improve the holistic, lifelong well-being of all.

WAHA supports families and communities through health education, advocacy and Cree language services.

WAHA is committed to providing high-quality health services that include traditional and cultural healing methods.

WAHA supports Western and Traditional approaches to medicine.

4.0 About Weeneebayko Area Health Authority

Weeneebayko Area Health Authority (WAHA) oversees the medical services and facilities of Ontario's James Bay and Hudson Bay coastal regions. The organization resulted from the October 1, 2010 integration of the Weeneebayko Health Authority/Weeneebayko General Hospital in Moose Factory, the James Bay General Hospital in Moosonee, Fort Albany and Attawapiskat and the hospitals' associated agencies in the communities of Kashechewan and Peawanuck. In Cree, *Weeneebayko* refers collectively to the waters of Hudson and James Bays. Most people living in this Ontario region are Cree and the WAHA Board members stress that their organization is a First Nations-controlled entity. The Hospital is governed by a volunteer Board of Directors with 16 members representing the communities served. The Board and staff are dedicated to improving the health status of the people living in this remote and scenic part of Ontario. The Hospital operates under the provisions of the Public Hospitals Act. Services provided include acute and chronic care as well as 24 hour emergency services including family medicine clinics. A Regional Mental Health program serves all communities and the WAHA Ambulance Service provides pre-hospital care. Referral services and tertiary care beyond Weeneebayko General Hospital is provided by Kingston General Hospital and the Timmins and District Hospital. A charter aircraft provides services to Kingston for entitled Indigenous patients requiring diagnostic tests and specialist care. Many Specialists also visit the area to provide services on-site in the communities. The primary care provided by the WAHA is complemented by onsite general surgery and full time anesthesia support in addition to specialist visits from Queen's University for pediatrics; obstetrics/gynecology; geriatrics rheumatology; ophthalmology; rehabilitation and neurology. While Queen's University is the primary university link, the WAHA is also associated with the University of Toronto through the dental program and with McMaster University through psychiatric support. The total catchment area for the James Bay coast is 12,000 people.

For further information visit our website at www.waha.ca

WAHA operates in the following sites:

Moose Factory – Weeneebayko General Hospital

The main site, is located on Moose Factory Island and includes the following:

- Located at 19 Hospital Drive in Moose Factory, Ontario. The hospital has 33 Inpatient beds, 6 bassinets and 2 labour beds. The hospital provides 24/7 access to emergency care – ER, Family Medicine Clinic, Operating Room, Hemodialysis, Diabetes, Dental, Diagnostic Imaging, Medical Laboratory, Rehabilitation and Mental Health, Additionally the hospital utilizes the Ontario Telemedicine Network (OTN) to facilitate consultations and critical care services.

Moosonee Health Centre

- Located at 5 Percy Way in Moosonee, Ontario. The Health Centre provides 24/7 access to care, emergency and walk-in. The Health Centre has 1 hospital bed. Additionally, the health centre has Nurse Practitioners on site Monday to Friday and consultations and critical care services with Physician.

Fort Albany Health Centre

- Located at 5 Airport Road in Fort Albany, Ontario. The hospital provides 24/7 access to care with registered nurses available to deliver emergency room services, supported by consulting physicians. Services include: Clinics – follow ups or specialty Mental Health. Additionally, the hospital utilizes the Ontario Telemedicine Network (OTN) to facilitate consultations and critical care services.

Attawapiskat Health Centre

- Located at 972 Riverside Road in Attawapiskat, Ontario. The hospital provided 24/7 access to care with registered nurses available to deliver emergency room services, supported by consulting physicians. Services include: Clinics – follow ups or specialty and Mental Health. Additionally, the hospital utilized the Ontario Telemedicine Network (OTN) to facilitate consultations and critical care services. The hospital has 14 inpatient beds and 2 bassinets.

The hospital's Emergency Department was built to manage 7,000 visits a year and now sees almost 35,000. Originally built in 1964, the hospital's current facility is in much need of an expansion, and we are pleased to share that preliminary site preparations are underway to support the construction of a new 419,311 square feet state -of-the art healthcare campus. Pomerleau has begun site work on the property, with full construction planned to begin this fall. Patient occupancy is planned for 2030

The new campus will include:

- 36 bed acute care hospital with 100% private rooms
- 32 bed Long-Term Elder Lodge
- Staff residences
- Patient and family hostel
- Ambulatory care clinic*

The design features significant use of natural light, modern features, new and enhanced parking lots and refreshed gardens and green space. A new, elevated helipad will also be a part of the project.

The new facility will be based on best practice standards and meet all accessibility requirements, as extensive planning took place with accessibility and design consultants.

Our goal as a community hospital is to provide quality patient care that meets the needs of our growing community.

We are developing a strong vision for the future of Weeneebayko Area Health Authority centered on a revitalized hospital, cutting-edge equipment, and comfortable, modern space for patients and families to receive health care close to home.

5.0 Barrier Identification & Prioritization

The plan establishes a process by which WAHA will identify, quantify, prevent or remove barriers to people with disabilities.

Barrier Identification

These barriers can be categorized as follows:

- Physical/Architectural
- Informational/Communication
- Attitudinal
- Technological
- Policies and practice
- Methods to identify, track and address barriers include:
 - Identification of potential accessibility issues by the Patient Experience Office through an incident
 - Expanse incident reporting software module
 - Occupational Health & Safety reviews/audits
 - Feedback from the public/community via WAHA website or email:
communications@waha.ca Patient.experience@waha.ca
 - Committee
 - Feedback from Human Resources team, staff and professional staff
 - Joint & Safety Committee recommendations.

Barrier Prioritization

Process to be used in assisting the prioritization of each identifiable barrier includes:

- Review of legislated requirements
- Stakeholder feedback
- Assessment of the population affected by the barrier
- Risk assessment posed by barrier
- Practicality of a solution to be implemented
- A way to avoid a barrier i.e. "work around"

- Available resources/capacity assessment (cost/construction/phasing/timing)
- Coordination with other renovation projects and communication at WAHA

6.0 Current Identified Barriers & Multi-Year Plan

This identifies the list of current barriers by type and proposed resolution to remove each barrier:

Type of Barrier	Description	Resolution	Timeline
Physical/Architectural	Hospital has equipment in hallways.	New hospital facility will have widened hallways and designated storage for equipment for each clinical department.	To be completed by June, 2030 when new hospital is built.
Physical/Architectural	Family Medicine bathroom – not wheelchair accessible	Widen the bathroom stalls for easier accessibility	To be completed by December 2025
Information/Communication			
Information/Communication	Wayfinding maps	Update signage/map for more patient friendly	To be complete by December 2025
Policy/Practice	Ensure all hospital policies and emergency plans are reviewed to	Create Accessibility Committee to include	To be complete by

	ensure accessibility is reflected.	facilities, occupational health, human resources, communications, clinical.	December 2025
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7.0 Highlights of Barrier-Free Initiatives Completed

Type of Barrier	Description	Action
Physical/Architectural	Emergency Door – not fully accessible	2019 – installed new automatic door opener, easier entrance access
Physical/Architectural	Walkway was gravel and difficult for patients to enter the family clinic entrance	2023- refurbished the walk way to the family clinic entrance with interlock brick for smooth/flat surface.
Physical/Architectural	Entrance had steps only	2023 – installed a ramp for easier access to family medicine clinic
Physical/Architectural	Open waiting room – no patient privacy	2023 – installed privacy wall to separate waiting room and reception area. This would provide privacy for those who are impair hearing
Information/Communication	Job postings – letters were blue colour, font size 10. not supportive of visually impaired persons.	2024/2025 – Changed letter to black and font size to 12 – arial.

8.0 Review and Monitoring Process

An Accessibility Committee will be created in 2025 with a plan to meet quarterly. Relevant updates will be brought forward to the Equity, Diversity and Inclusion (EDI) Committee, Emergency Planning Committees.

The committee will be responsible for ensuring the accessibility plan is reviewed annually and that accessibility projects move forward on a timely basis.

The Executive Leadership Team will be updated annually on accessibility projects and progress.

9.0 Communication of the Plan

WAHA's Multi-Year Accessibility Plan will be posted on the hospital's external website www.waha.ca. Hard copies are available in the Human Resources office. Copies of the plan in an accessible format will be made available on request by contacting Corporate Communication communications@waha.ca.

Comments and feedback regarding the plan may be submitted via WAHA's website Feedback Form, monitored by Patient Experience or by emailing Patient Experience directly: Patient.experience@waha.ca.