



Policy No:	I-d-65-73
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Title:	Providing Access for People with Disabilities
Issued By:	Sinai Health Equity & Accessibility Committee
Approved By:	Quality, Patient Safety & Clinical Risk Committee
Applies to:	This policy applies to patients, families, caregiver and visitors, as well as all other members of the Sinai Health community, including employees, health care professionals, learners, researchers, interns, volunteers, advisory groups, the public, community-based partners, affiliated research institutes and associations, suppliers, contractors, and other health care and business partners who interact with the public on behalf of Sinai Health.

Purpose

The purpose of this policy is to ensure that accessibility is part of everything we do at Sinai Health. It guides how we provide patient care, communicate, design our spaces, buy goods and services, and engage with our community.

We are committed to creating a hospital environment where everyone can take part fully, with dignity and independence.

This policy applies to everyone in the Sinai Health community, including patients, families, caregivers, employees, privileged healthcare professionals (physicians, midwives, dentists), researchers, interns, learners, volunteers, contractors, suppliers, and anyone representing the hospital.

Accessibility means meeting the unique needs of people living with physical, sensory, cognitive, developmental, mental health, and neurodivergent experiences. We recognize that many disabilities are invisible or episodic, and we are committed to removing both visible and hidden barriers.

Policy Statement

Sinai Health recognizes accessibility as a fundamental human right and a vital component of person- and family-centred care that includes patients, families, and caregivers.

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We acknowledge that ableism — the systemic barriers, biases, and assumptions about disability that exist within healthcare — can prevent individuals from receiving equitable care. We are committed to addressing and dismantling these barriers by embedding accessibility across all hospital systems, spaces, and services.

Sinai Health is committed to:

- Providing care that upholds the dignity, independence, and autonomy of every patient.
- Identifying and removing barriers that affect how patients and families access, navigate, and experience healthcare.
- Creating clinical environments and communication practices that are inclusive, welcoming, and responsive to diverse needs.
- Maintaining ongoing partnerships with patients, families, caregivers and staff with lived experience of disability to inform and guide hospital planning and decision-making. Engagement will occur through the Sinai Health Equity and Accessibility Patient & Family Advisory Committee, participation in co-design of hospital spaces and processes, representation on Patient & Family Advisory Councils, and other sources of feedback from patients, families, caregivers and staff (i.e., Patient Relations, Occupational Health etc.).
- Meeting and where possible, exceeding all requirements under the Accessibility for Ontarians with Disabilities Act (AODA), the Integrated Accessibility Standards Regulation (IASR), and the Ontario Human Rights Code.
- Taking reasonable steps, up to the point of undue hardship, to proactively embed accessibility into all aspects of patient care, communication, service delivery, occupational health and learner management — and to uphold our duty to accommodate people by ensuring accessibility is integrated across all policies, practices, and organizational systems.
- Maintaining a multi-year accessibility plan, reviewed and updated every five years in consultation with patients, families, staff and subject matter experts, and making it publicly available.
- Ensuring accessibility for both visible and non-visible disabilities, including neurodivergent conditions such as autism, ADHD, dyslexia, sensory processing differences, and mental health conditions.
- Continuously improving our efforts to remove barriers for individuals with disabilities — in the care we provide, the services we deliver, and the design of our buildings and spaces.

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Definitions

Ableism

A term used to describe the discriminatory communications, actions, policies, and practices against persons with disabilities. Ableism may be individual or systemic, conscious or unconscious, and has been found to be embedded in institutions, systems, and the broader culture of a society. Ableism sees persons with disabilities as being less worthy of respect and consideration, less able to contribute and participate, or of less inherent value than others. Ableism can limit the opportunities of persons with disabilities and reduce their inclusion in the life of their communities. Ableism is analogous to and intersects with other forms of discrimination, such as racism, sexism, and ageism.

Assistive Devices

Specialized equipment used by or provided for persons with a disability including but not limited to mobility aids such as wheelchairs, scooters, walkers, canes, crutches, prosthetic devices, hearing aids, cognitive aids such as computer or electrical assistive devices, and computer software and hardware such as voice recognition programs, screen readers and screen enlargement applications and closed captioning.

Person with Disability

Disability means:

- a. any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, and a brain injury,
- b. any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,
- c. a condition of mental impairment or a developmental disability,
- d. a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- e. a mental health disorder, or;
- f. an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

The definition includes disabilities of different severity, visible as well as non-visible disabilities, and disabilities the effects of which may come and go.

Examples:

- A person with arthritis has a disability that over time may increase in severity.
- A person with a brain injury has a disability that may not be visible.

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- A person with multiple sclerosis has a disability that causes them to experience periods when the condition does not have an effect on their daily routine and other periods when it does.

It is important to understand that information about a disability is personal and private and must be treated confidentially.

Support Persons

A **support person** is an individual hired or chosen by a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs, or with access to goods or services.

The support person could be a paid personal support worker, a volunteer, a friend, or a family member. He or she does not necessarily need to have special training or qualifications.

Service Animals

Service animals are not pets — they are working animals that may be trained to assist individuals in overcoming barriers related to a disability. Some service animals are easily identifiable through visual indicators showing their role in supporting a person with a disability.

If the animal's purpose is not immediately apparent, the person with a disability may be asked to provide documentation from a regulated health professional licensed in Ontario confirming that the animal is required due to their disability. They may also present an identification card issued by the Ministry of the Attorney General.

Under Ontario's AODA (2005), an animal — including an emotional support animal — qualifies as a service animal if the person provides documentation from one of the regulated health professionals stating that the animal is needed for reasons related to the disability.

- A member of the College of Audiologists and Speech-Language Pathologists of Ontario.
- A member of the College of Chiropractors of Ontario.
- A member of the College of Nurses of Ontario.
- A member of the College of Occupational Therapists of Ontario.
- A member of the College of Optometrists of Ontario.
- A member of the College of Physicians and Surgeons of Ontario.
- A member of the College of Physiotherapists of Ontario.
- A member of the College of Psychologists of Ontario.
- A member of the College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario.

Examples of service animals include:

- **Guide Dogs:** travel tool for persons with severe visual impairment / blind.
- **Hearing Dog:** trained to alert a person with severe hearing loss/deaf when a sound occurs.

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- **Mobility Dog:** trained to enhance life and mitigate disability e.g. open doors, ring doorbell, activate elevator, steady while walking, carry objects, pull wheelchair, etc.
- **Seizure Response Dog:** trained to alert to an oncoming seizure, assist by standing guard during a seizure or get help during a seizure.
- **Psychiatric Service Dog:** trained to retrieve medication, lead person out of a crowd, activate medical alert, etc.
- **Emotional Support Animal:** Provides emotional support to individuals with a mental health condition. They are generally not trained to perform specific tasks in relation to a disability, but their presence provides comfort and emotional support. (CMPA, 2023)

Therapy Animal

A cat or dog over the age of one year that has been screened, oriented, and registered through Volunteer Services. The animal must be clearly identified as a registered therapy animal (e.g., by wearing a jacket with appropriate markings) and must be accompanied at all times by a registered Volunteer Services member who is identifiable by an official volunteer ID badge or jacket. The animal must also be evaluated and approved by a recognized organization, such as Therapeutic Paws or St. John Ambulance, to provide psychological or emotional support to patients.

Patient Pet

A domesticated animal kept for companionship that is not a service animal or therapy animal, and belongs to or resides in the same household as a patient.

Procedure

1. Meeting Accessibility Needs

The hospital is committed to ensuring that all patients, including those living with disabilities, can access care, services, and facilities in a manner that upholds dignity and independence. The hospital also recognizes the important role of families and caregivers in supporting patients and will engage them in care discussions and planning with the patient's consent and in accordance with the Substitute Decisions Act (SDM Act) when applicable.

To support this commitment, the hospital will ensure the following:

- **Early Identification of Patient Accessibility Needs**

The hospital will endeavor to obtain information about a patient's unique accessibility needs as early as possible in the care process. Accessibility information may be collected through admission, registration, referral, other intake procedures, and initial clinical assessments, as well as through communication with the patient or, where the patient consents, their family member, caregiver, or designated support person. In accordance with the SDM Act, Substitute Decision-Maker's (SDM) will be engaged when consent cannot be obtained directly from the patient.

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- **Meeting Accessibility Needs in Care Delivery**

Care teams will take reasonable steps to ensure that patients' identified accessibility needs are addressed in a timely and effective manner. When barriers arise, staff will work collaboratively with the patient and, with consent, their family, caregiver, or substitute decision-maker (SDM) to identify suitable measures to support access to care, up until the point of undue hardship.

- **Continuity of Care**

The hospital will endeavor to ensure that patient accessibility supports are maintained and communicated across departments, programs, and care settings to promote seamless continuity of care. When a patient transitions between units, services, or providers, accessibility information will be reviewed and transferred to ensure ongoing support without interruption.

- **Ongoing Review and Check-Ins**

Staff will regularly reassess with patients to confirm whether accessibility needs have changed and whether existing supports remain effective. These reviews should occur at key points in the care process — for example, upon admission, transfer, discharge, or when a change in condition occurs — and whenever a patient, or where appropriate, their family, caregiver, or SDM indicates that needs have evolved.

- **Communication and Collaboration with Families and Caregivers**

Meeting patient accessibility needs is a shared responsibility. Staff will engage in ongoing, respectful communication with patients and, with consent, their families and caregivers to clarify needs, review supports, and ensure that care delivery remains accessible. If a patient is incapable of making or communicating care decisions, staff will involve the SDM in accordance with the SDM Act and hospital policy. Staff will provide information in accessible formats and use appropriate communication supports to promote informed decision-making.

- **Continuous Improvement**

The hospital will maintain and refine processes for identifying, recording, and acting on patient accessibility needs. Feedback from patients, families, caregivers, and staff will be used to improve accessibility practices, promote consistency across departments, and strengthen accountability.

- **Roles and Accountability**

All departments and care teams are responsible for integrating accessibility considerations into patient care planning and service delivery.

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2. Training

Accessibility Training Commitment

We are committed to providing all staff, volunteers, contractors, and leaders with training on accessible customer service, Ontario's accessibility standards, and the relevant aspects of the Ontario Human Rights Code. In addition, training will be provided to:

- Individuals involved in developing organizational policies; and
- Anyone providing goods, services, or facilities on behalf of the organization.

Training Content

Training is tailored to each person's role and covers:

- The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the requirements of the Customer Service Standards.
- Our organization's accessibility and customer service policies.
- Respectful communication with people with diverse disabilities.
- How to interact with and support individuals using assistive devices, service animals, or support persons.
- How to use on-site or available equipment/devices that assist in providing accessible services.
- What to do if a person with a disability is having difficulty accessing our goods, services, or facilities.
- Recognizing and addressing ableism, particularly in healthcare contexts.

Training Process

- Training is provided as soon as practicable after hiring and during orientation, clinical education, and policy updates.
- Updates are provided whenever policies change.
- Records are maintained, including training dates and the number of participants.

3. Assistive Devices

- People with disabilities have the right to use their own personal assistive devices while accessing Sinai Health's care, services, or facilities.
- Personal assistive devices may only be restricted if they present a defined safety or infection prevention risk. In these cases, staff will assess the situation and work with the individual to identify safe alternatives. If a personal device is deemed unsafe, the hospital will make every effort to provide a suitable substitute.
- Sinai Health also provides accessibility equipment such as lifts, accessible call bells and hearing amplification systems. Staff are trained in the safe use of these devices and can

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connect patients and visitors with team members who have specific expertise when needed.

4. Communication

We communicate with people with disabilities in ways that respect their individual needs. This may include methods such as:

- Large print or plain language documents
- Sign language interpretation
- Captioning or real-time transcription
- Assistive listening devices
- Communication boards or other augmentative tools

Care teams will work with each person to determine the communication method that best supports their understanding and participation in care.

5. Service Animals

People with disabilities who use service animals are welcome in all Sinai Health facilities and services. Service animals may remain with their owners (patients or visitors) in any public area, unless restricted by law. If advance notice isn't provided, Sinai Health will make every reasonable effort to accommodate both the individual and the animal.

When it is not obvious that the animal provides a service, a letter from a regulated health professional may be requested (*See list of approved regulated health professional in Service Animal definition above). If a service animal is restricted from entering specific areas by law, Sinai Health will arrange alternate ways for the person to access care.

Restricted Areas

For safety and infection control all animals including service animals are not permitted in sterile or restricted zones under the Health Protection and Promotion Act, including but not limited to:

- Operating rooms
- Intensive/critical care, pre- and post-operative, and step-down units
- Sterile/clean supply or medication storage areas
- Food preparation or storage spaces
- Procedure rooms involving radiation (e.g., X-ray, CT) or sterile procedures

Patient Responsibilities

Patients bringing a service animal must:

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- **Plan ahead:** Arrange care if temporarily unable to control the animal (e.g., during surgery).
- **Supervise and care:** Feed, manage behavior, and ensure the animal's well-being.
- **Identify:** Ensure the animal wears visible identification and has up-to-date vaccination details if required.
- **Communicate:** Notify staff of any allergies or fears involving animals.

Emergency Visits

Patients who are conscious and able to control their service animal will not be separated unless consent is given, there are medical reasons, or the service animal is exhibiting unsafe or disruptive behavior that could affect others in the area.

For patients who are temporarily unable to care for their service animal due to unforeseen circumstances, and who do not have a support person with them or a contact person available, the manager or designate leader in charge will contact:

- The contact or support person to pick up and assume responsibility for the service animal.
- Security to temporarily transfer the service animal to a kennel in the designated space in the hospital.

If no support person or contact person for the patient is available, the manager or designate leader will contact the emergency service telephone number identified on the service animal's vest or in the pocket of the vest. The emergency service will arrange to pick up and take temporary responsibility for the service animal. The service animal will remain in the kennel while waiting to be picked up by the emergency service. The emergency service is responsible for returning the service animal to the patient to resume its duty, when possible.

If the emergency service or contact person is unavailable, the manager or designate leader will **contact 311 Toronto Animal Services** to arrange for **temporary protective custody** of the service animal until it can be safely reunited with the patient.

Inpatients

Patients who anticipate being unable to care for their service animal should plan accordingly and make alternative arrangements for the animal's care during their hospital inpatient stay. Circumstances that may limit a patient's ability to care for their animal include being under anesthesia or sedation, receiving intensive/critical care treatment, being placed on bed rest, or experiencing physical or cognitive limitations that prevent independent feeding, walking, or cleaning up after the animal.

Patients are encouraged to plan ahead by arranging for a trusted family member, friend, or caregiver to assist with the animal's care, or by making temporary boarding arrangements.

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The care team can help identify local resources or service animal organizations that may provide short-term support if needed.

If a patient becomes unexpectedly unable to care for their service animal and no support person is available, the **manager or designate leader** will make reasonable efforts to ensure the animal's temporary care and safety. This includes:

- Attempting to contact the patient's designated support person to assume responsibility for the animal.
- If the support person is unavailable, contacting the **emergency service number** identified on the service animal's vest or tag to arrange short-term care and safe return.
- If neither is reachable, contacting **311 Toronto Animal Services** to arrange temporary protective custody until the animal can be safely reunited with the patient.

Room allocation will be determined with consideration for the patient's care needs, as well as the comfort and medical needs of other patients on the unit.

Outpatients

If it is anticipated that a patient will need to be separated from their service animal during an outpatient visit (for example, for a procedure), the outpatient care team will work with the patient before the appointment to develop a plan that ensures both the patient's care needs and the animal's well-being are met.

Employee Responsibilities

Sinai Health employees and contractors must:

- Notify their manager of any allergies or fears related to animals.
- Document provider changes in the patient's chart.
- Only request documentation if the animal's role is not obvious.
- Never separate a patient and service animal without consent.
- Avoid touching, feeding, distracting, or caring for the service animal.
- Encourage other patients to avoid touching, feeding, distracting, or caring for the service animal.
- Educate patient to avoid animal contact with open wounds or devices and perform frequent hand hygiene.
- While care for the animal is the responsibility of the patient, if the animal has an elimination accident, support services should be contacted to remove the debris and clean up the area. Gloves should be worn and hand hygiene performed after glove removal. Support Services should disinfect the area with hospital-approved disinfectant.

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Employees who volunteer to assist a service animal outside work hours do so at their own risk, unless delegated during emergencies.

Leader Responsibilities

Leaders (e.g., Patient Care Managers, Nursing Care managers etc.) should:

- Educate staff about appropriate interactions with service animals.
- Address and document concerns related to allergies or fear of animals.
- Reassign patient care if assigned staff is uncomfortable interacting with a service animal.
- Coordinate supports and clarify responsibilities for the service animal's care.
- Discuss expectations with families or visitors bringing service animals.

Safety and Incident Reporting

Any injury caused by a service animal must be reported through SAFER, in accordance with hospital incident reporting policies.

Staff who sustain a bite or serious injury should proceed to the nearest Emergency Department for immediate medical assessment and care. If possible, collect animal owner/custodian information (name, address, phone number).

Notify Toronto Public Health of an animal bite by completing an [Animal Exposure Report](#). Personal information on this form is collected under the authority of the Health Protection and Promotion Act, R.S.O. 1990, c. H.7. Depending on the case, Public Health can assist healthcare providers to assess the level of risk associated with an exposure and may provide rabies vaccine to healthcare providers upon request.

If an injury or bite occurs, staff must also contact Occupational Health:

- Mount Sinai Hospital: ohsmsh@sinaihealth.ca or 416-586-4800 ext. 1572
- Hennick Bridgepoint: ohs.hbh@sinaihealth.ca or 416-461-8252 ext. 2802

Occupational Health will support employees throughout any absence associated with the injury, including notification to WSIB and coordination of any return-to-work or workplace accommodation programs.

Removal or Exclusion

A service animal may only be removed or separated if:

- Its behavior or health poses a direct safety risk patients, staff, physician or others, or;
- The attending physician recommends removal for medical reasons.

All decisions and rationale must be documented in the patient's record. Complaints or objections unrelated to behavior, health, or safety will not justify removal. Alternatives should be explored to maintain patient access to Sinai Health services.

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6. Support Persons

- People with disabilities have the right to be accompanied by a support person while on Sinai Health premises.
- In limited circumstances, Sinai Health may require that a person with a disability be accompanied by a support person for health or safety reasons—either for the individual or for others. Before making this decision, we will:
 - Consult with the individual to understand their needs
 - Consider health and safety risks based on available evidence
 - Confirm that no other reasonable alternatives are available
- When a support person is required for health or safety reasons, any admission fee (if applicable) will be waived.

7. Notice of Temporary Disruptions

Notice of Service Disruptions

- In the event of a planned or unexpected disruption to services or facilities used by people with disabilities, Sinai Health will provide prompt notice.
- The operational lead of the impacted area will be responsible for planning, coordinating and implementing notifications related to the disruption.
 - The lead(s) will coordinate with relevant internal partners — including, Clinical teams, other affected departments, and Corporate Communications— to ensure accurate, consistent, and timely messaging.

Notices will include:

- The reason for the disruption
- The expected duration
- A description of alternative facilities or services, if available

Services and facilities covered by this policy include (but are not limited to):

- Elevators and lifts
- Accessible washrooms
- Accessible entrances and automatic doors
- Communication supports (e.g., TTY phones, hearing amplification systems)
- Patient information desks or reception services

Notices will be made publicly available through:

- Signage and wayfinding at affected locations and main entrances
- Sinai Health's website and/or patient portal for prolonged disruptions
- Information desks and reception staff
- Direct communication with patients, families, and visitors when possible (e.g., phone, email, or verbal notice)

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8. Providing Accessibility Feedback

Sinai Health welcomes feedback on how we provide accessible customer service. Customer feedback will help us identify barriers and respond to concerns. Patients, families, visitors, employees, contractors, and third-party agents may provide feedback on accessibility to care teams, supervisors, the Patient Relations Unit, or hospital leadership.

All feedback will:

- Be acknowledged promptly
- Be addressed respectfully
- Be used to inform improvements
- Be collected through accessible processes that meet different communication needs

Feedback Process

For Patients, Caregivers, Support Persons and Visitors

We value your feedback and are committed to addressing your concerns with care and respect.

1. **Share your feedback** with any member of your care team.
2. **Your care team will listen and respond** directly whenever possible.
3. If your concern needs additional follow-up, the **Patient Relations Department** will be contacted to support you.
 - a. **Phone:** 416-586-4800 ext. 5066
 - b. **Email:** patientrelations@sinaihealth.ca
4. All concerns are managed through Sinai Health's **standard Patient Relations Process**, ensuring your voice is heard and your experience is reviewed carefully.

Employees, Contractors, and Third-Party Agents

- Employees are encouraged to share accessibility-related feedback with their area leader or supervisor.
- For disability or medical-related workplace accommodations, employees can contact Occupational Health, Safety and Wellness:
 - Mount Sinai Hospital: ohsmsh@sinaihealth.ca or 416-586-4800 ext. 1572
 - Hennick Bridgepoint: ohs.hbh@sinaihealth.ca or 416-461-8252 ext. 2802
- Employees can also contact Diversity, Equity, Inclusion and Respectful Workplace at REDI.SH@sinaihealth.ca

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9. Notice of Availability of Documents

- Sinai Health notifies the public that documents related to accessible customer service are available upon request. Notices are posted on Sinai Health’s website and/or patient portal and staff and volunteer orientation materials (to support consistent communication)
- Upon request, Sinai Health will provide these documents in an accessible format or with communication support.
- We will consult with the individual making the request to determine the most suitable format or support (e.g., large print, electronic version, plain language, or communication assistance).
- Accessible formats will be provided in a timely manner and at no additional cost.

10. Self-Service Kiosks

- Sinai Health will incorporate accessibility features, or consider accessibility needs, when designing, procuring, or acquiring self-service kiosks.
- Accessibility features may include, but are not limited to:
 - Adjustable height or angle for screens and payment devices
 - Tactile keypads and braille instructions
 - Audio output options with headphone jacks
 - Screen magnification and high-contrast display modes
 - This ensures that kiosks are usable by people with a range of disabilities, supporting independent and equitable access.

11. Procurement

- Sinai Health incorporates accessibility criteria and features when procuring or acquiring goods, services, or facilities, including self-service kiosks.
- If it is not possible or practical to do so, Sinai Health will, upon request, provide an explanation.
- This commitment ensures that accessibility is considered at every stage of planning, purchasing, and implementation, supporting equitable access for patients, visitors, and staff.

12. Information and Communication

- Sinai Health has a process for receiving and responding to feedback. This process is accessible to persons with disabilities upon request.
- We communicate with people with disabilities in ways that respect their individual needs. When requested, information about our organization and its services—including

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public safety information—will be provided in accessible formats or with communication supports:

- In a timely manner, taking into account the person’s accessibility needs
- At no additional cost beyond the regular fee, if any, charged to others
- We will consult with the individual to determine the most suitable format or support.
- If certain information or communications cannot be converted into an accessible format, Sinai Health will provide:
 - An explanation as to why the material is unconvertible
 - A summary of the unconvertible content
- The public will be notified about the availability of accessible formats and communication supports through:
 - Signage in key patient and visitor areas
 - Sinai Health’s website and/or patient portal
 - Information desks and reception staff
- Sinai Health also ensures its website meets the internationally recognized **Web Content Accessibility Guidelines (WCAG) 2.0 Level AA**, in compliance with Ontario’s accessibility laws.

13.Design of Public and Clinical Spaces

- Sinai Health will meet all accessibility requirements under Ontario law when constructing or making major changes to our public and patient spaces.
- Our public and patient spaces include (examples):
 - Entrances and lobbies
 - Hallways and waiting areas
 - Patient areas (e.g., inpatient units, outpatient clinics, treatment areas)
 - Accessible washrooms
 - Parking areas
 - Outdoor paths of travel (e.g., walkways, ramps)
 - Service counters and reception areas
- We have procedures in place to prevent disruptions in accessible areas of our public and patient spaces. If a disruption does occur, notice will be provided promptly with details about the reason, expected duration, and available alternatives.

14.Changes to Existing Policies

- Sinai Health is committed to ensuring that all policies respect and promote the principles of **dignity, independence, integration, and equal opportunity** for people with disabilities.
- Any policy that does not align with these principles will be reviewed and either modified or removed.

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Related Forms and Policies

- Sinai Health Multi-Year Accessibility Plan
- Assistive Devices Policy
- Patient Relations Feedback Process
- Procurement Guidelines – Accessibility Checklist
- Disruption of Service Communication Protocol

References

1. Accessibility for Ontarians with Disabilities Act, 2005 (AODA)
2. Ontario Regulation 191/11 – Integrated Accessibility Standards
3. Ontario Human Rights Code
4. Canadian Charter of Rights and Freedoms
5. Government of Ontario – Accessibility Policy Requirements