

# **AODA AGENCY STANDARD**

## **BARRIER FREE ACCESS TO FACILITIES AND SERVICES**

### **Agency Standard**

**Chatham-Kent Children's Services' physical plant(s) shall be free of architectural barriers that restrict access to the Agency and/or the Agency shall make provision for use of accessible facilities. Chatham-Kent Children's Services shall provide services in a manner that respects the dignity and independence of all persons, including those with disabilities.**

### **Procedure**

#### **GENERAL**

Chatham-Kent Children's Services shall locate its offices and service facilities in such a way that they are easily accessible to clients and other potential users by private and/or public transportation.

Services shall be easily accessed through in-home and community-based service delivery. Specific services shall be offered through satellite sites located in the smaller communities throughout the Municipality.

Wherever possible, the Agency shall seek and provide office space that is accessible to persons with disabilities. When this cannot be accomplished, clients who are unable to gain access to Chatham-Kent Children's Services offices shall be accommodated through agreements with other community agencies for shared office space or in the clients' own homes.

Chatham-Kent Children's Services shall, upon request, give a copy of the procedures required under the Ontario Regulation 429/07 – Accessibility Standards for Customer Service to any person.

Every employee shall use reasonable efforts to allow persons with disabilities to use their own assistive devices and/or support person in the access services.

Employees of Chatham-Kent Children's Services will communicate with persons with disabilities in a manner that takes into account the person's disability.

#### **DEFINITIONS**

**Assistive Devices -** an auxiliary aid, such as communication aids, cognition aids, personal mobility aids and medical aids (i.e. canes, crutches, wheelchairs or hearing aids)

**Disabilities -** same as defined in the Ontario Human Rights Code

**Employees -** every person who deals with members of the public or other third-parties on behalf of Chatham-Kent Children's Services, whether the person does so as an employee, volunteer or otherwise

- Persons with Disabilities -** individuals who are affected with a disability as defined under the Ontario Human Rights Code
- Service Animals -** any animal individually trained to do work or perform tasks for the benefit of a person with a disability
- Support Persons -** any person, whether a paid professional, volunteer, family member or friend who accompanies a person with a disability in order to help with communications, personal care or medical needs or with access to goods or services

## TERMINOLOGY

The following is an excerpt from the Ministry of Community and Social Services.

“Words can influence and reinforce the public’s perception of people with disabilities. They can create either a positive view of people with disabilities or an indifferent, negative depiction. Here are some general tips that can help make your communication and interactions with or about people with all types of disabilities more successful.”

- Use *disability* or *disabled*, not handicap or handicapped
- Never use terms such as *retarded*, *dumb psycho*, *moron* or *crippled*. These words are very demeaning and disrespectful to people with disabilities
- Remember to put people first. It is proper to say *person with a disability*, rather than *disabled person*
- If you don’t know someone or if you are not familiar with their disability, it’s better to wait until the individual describes his/her situation to you, rather than to make your own assumptions. Many types of disabilities have similar characteristics and your assumptions may be wrong.

The following preferred words and phrases will help you choose language that is neither demeaning nor hurtful.

People with disabilities prefer these terms:

<b>PLEASE USE</b>
A person who has cerebral palsy. Person who has multiple sclerosis. Person who has arthritis etc. Person with a disability.
Seniors
A person with autism. A person who has autism.
A person who has a congenital disability. A person with a disability since birth.
A person who is blind. A person with vision disability. A person with vision loss. A person with a visual impairment. A person with low vision.

A person with a brain injury. A person with an acquired brain injury. A person with a head injury.
A person who uses a wheelchair.
A person with a mental illness. A person with a mental disorder. A person with a mood disorder (for example, a person with depression, a person with bipolar disorder). A person with a personality disorder (for example, a person antisocial personality disorder). A person with an anxiety disorder (for example a person with obsessive-compulsive disorder). A person with schizophrenia.
A person with a disability. A person with a physical disability. A person with mobility impairment.
A person who is deaf (for example, a person with profound hearing loss). A person who is deafened (for example, a person who has become deaf later in life). A person who is hard of hearing (for example, person with hearing loss). When referring to the Deaf community and their culture (whose preferred way of communication is sign language), it is acceptable to use "the Deaf".
A person who is deaf and does not talk.
A person who is deaf-blind (for example, a person who has any combination of visual and auditory impairments).
A person with a disability.
A person with a disability.
Seniors. Older adults.
A person who has epilepsy.
Seizures
A person with a disability. The term handicapped may be used when referring to an environmental or attitudinal barrier as in "a person who is handicapped by a set of stairs leading to the entrance."
A non-visible disability.
A person with a disability.
A person with a learning disability or people with learning disabilities.
A person with an intellectual disability. A person with a developmental disability.
A little person. A person of short stature. A person who has a form of dwarfism.
A person with Down Syndrome. A person with an intellectual or developmental disability.
A person without a disability. A person who is not disabled. A person who is able-bodied. Specifically, a person who is sighted, a hearing person, a person who is ambulatory.
A person with a disability. The word "patient" may be used when referring to a relationship between medical professionals and their clients.
A person with a disability.
A person who has muscle spasms.
A person with a speech impediment or impairment.

## **TYPES OF DISABILITIES**

### **Deaf, Deafened and Hard of Hearing**

Hearing loss may cause problems in distinguishing certain frequencies, sounds or words. A person who is deaf, deafened, or hard-of-hearing may be unable to:

- Use a public telephone;
- Understand speech in noisy environments; and,
- Pronounce words clearly enough to be understood by strangers.

Like other disabilities, hearing loss has a wide variety of degrees. Persons who are deaf or hard of hearing may require assistive devices when communicating.

When serving persons who have hearing disabilities:

- Attract the person's attention before speaking. The best way is a gentle touch on the shoulder or gently waving your hand;
- Always ask how you may help. Don't shout. Speak clearly;
- Be clear and precise when giving directions, and repeat or rephrase if necessary;
- Make sure you have been understood;
- Face the person and keep your hands and other objects away from your face and mouth;
- A person who is deaf people may use a sign language interpreter to communicate; always direct your attention to the person who is deaf, not the interpreter;
- Any personal (e.g. financial) matters should be discussed in a private room to avoid other people overhearing;
- If the person uses a hearing aid, try to speak in an area with few competing sounds; and
- If necessary, write notes back and forth to share information.

### **Deaf-Blindness Disabilities**

Deaf-Blindness disabilities are a combination of hearing and vision loss. The result for a person who is deaf-blind is significant difficulty accessing information and performing daily activities. Deaf-blindness interferes with communication, learning, orientation and mobility. People who are deaf-blind communicate using various sign language systems, Braille, telephone devices, communication boards and any combination thereof. Many people who are deaf-blind use the services of an Intervener who relays information and facilitates auditory and visual information and acts as a sighted guide.

Most people who are deaf-blind will be accompanied by an intervener, a professional who helps with communicating. Interveners are trained in special sign language that involves touching the hands of the client in a two-hand, manual alphabet or finger spelling, and may guide and interpret for their client.

When serving persons who are deaf-blind:

- Do not assume what a person can or cannot do. Some people who are deaf-blind have some sight or hearing, while others have neither;
- A person who is deaf-blind is likely to explain to you how to communicate with them or give you an assistance card or a note explaining how to communicate with them;

- Do not touch or address the service animals – they are working and have to pay attention at all times;
- Never touch a person who is deaf-blind suddenly or without permission unless it's an Emergency;
- Understand that communication can take some time- be patient; and
- Direct your attention to the person, not the Intervener.

## **Intellectual Disabilities**

Intellectual disabilities affect a person's ability to think and reason. It may be caused by genetic factors such as Down's Syndrome, exposure to environmental toxins, such as Fetal Alcohol Syndrome, brain trauma or psychiatric disorders.

A person with an intellectual disorder may have difficulty with:

- Understanding spoken and written information;
- Conceptual information; and
- Perception of sensory information; and memory.

People with intellectual or developmental disabilities may have difficulty doing many things most of us take for granted. These disabilities can mildly or profoundly limit one's ability to learn. You may not be able to know that someone has this disability unless you are told, or you notice the way people act, ask questions or use body language. As much as possible, treat the person with an intellectual or developmental disability as you would anyone else. They may understand more than you think, and they will appreciate being treated with respect.

When serving persons who have an intellectual or developmental disability:

- Do not assume what a person can or cannot do;
- Use clear, simple language;
- Be prepared to explain and provide examples regarding information;
- Remember that the person is an adult and unless you are informed otherwise, can make their own decisions;
- Be patient and verify your understanding;
- If you can't understand what is being said, don't pretend. Just ask again;
- Provide one piece of information at a time; and
- Speak directly to the person, not to their companion or attendant.

## **Learning Disabilities**

Learning disabilities include a range of disorders that effect verbal and non-verbal information acquisition, retention, understanding and processing. People with a learning disability have average or above average intelligence, but absorb and process information and express knowledge in different ways.

Learning disabilities can result in:

- Difficulties in reading;
- Problem solving;
- Time management;
- Way finding; and,
- Processing information.

Learning disabilities are generally invisible and ability to function varies greatly. Respond to any requests for verbal information, assistance in filling in forms and so on with courtesy; and allow extra time to complete tasks if necessary.

## **Mental Health Disabilities**

Mental health disabilities include a range of disorders; however, there are three main types of mental health disability:

- Anxiety;
- Mood; and,
- Behavioural.

People with mental health disabilities may seem edgy or irritated; act aggressively; be perceived as pushy or abrupt; be unable to make a decision; start laughing or get angry for no apparent reason.

When serving persons with mental health disabilities:

- Treat each person as an individual. Ask what would make him/her the most comfortable and respect his/her needs to the maximum extent possible;
- Try to reduce stress and anxiety in situations;
- Stay calm and courteous, even if the customer exhibits unusual behaviour, focus on the service they need and how you can help.

## **Physical Disabilities**

Physical disabilities include a range of functional limitations from minor difficulties in moving or coordinating one part of the body, through muscle weakness, tremors, and paralysis. Physical disabilities may be congenital such as Muscular Dystrophy; or acquired, such as tendonitis.

A physical disability may affect an individual's ability to:

- Perform manual tasks such as holding a pen, turning a key or grip a door knob;
- Move around independently;
- Control the speed or coordination of movements;
- Reach, pull or manipulate objects; and,
- Have strength or endurance.

There are many types and degrees of physical disabilities, and not all require a wheelchair. It may be difficult to identify a person with a physical disability.

When serving persons who have physical disabilities:

- Speak normally and directly to the person. Don't speak to someone who is with them;
- Ask people with physical disabilities if they would like help;
- Wheelchairs and other mobility devices are part of a person's personal space. Don't touch, move or lean on them;
- Provide information about accessible features of the immediate environment (automatic doors, accessible washrooms, etc.);
- Keep ramps and corridors free of clutter;
- If a counter is too high or wide, step around it to provide service;

## **Speech Disabilities**

Speech disabilities involve the partial or total loss of the ability to speak. Typical disabilities include problems with:

- Pronunciation;
- Pitch and loudness;
- Hoarseness or breathiness; and
- Stuttering or slurring.

Some people have problems communicating. It could be the result of cerebral palsy, hearing loss, or another condition that makes it difficult to pronounce words, causes slurring or stuttering, or not being able to express oneself or understand written or spoken language. Some people who have severe difficulties may use communication boards or other assistive devices.

When serving persons with speech or language impairments:

- If possible communicate in a quiet environment;
- Give the person your full attention. Don't interrupt or finish their sentences;
- Ask them to repeat as necessary, or to write their message;
- If you are able, ask questions that can be answered 'yes' or 'no';
- Verify your understanding; and
- Have patience, respect and a willingness to find a way to communicate

## **Support Persons and Service Animals**

Support persons assist people with disabilities in a variety of ways, such as a sign language interpreter assists with communication or a Personal Support Worker provides physical assistance. A support person may also be a volunteer, friend or relative. Persons with disabilities may be accompanied by their support person while accessing services.

Service animals offer independence and security to many people with various disabilities. Examples of service animals include:

- Dogs used by people who are blind;
- Hearing alert animals for people who are deaf, deafened or hard of hearing; and
- Animals trained to alert an individual to an oncoming seizure and lead them to safety.

Every employee shall allow persons with disabilities to be accompanied by their guide dog or service animal unless the animal is excluded by law. Where an animal is excluded by law from the premises, the reason why the animal is excluded shall be explained to the persons with disabilities and other reasonable arrangements should be provided;

When a service animal is unruly or disruptive (jumping on people, biting, or other harmful behaviour), an employee may ask the person with a disability to remove the animal from the area or refuse access to services. Other reasonable arrangements to provide services shall be explored with the assistance of the person with a disability;

## **Vision Disabilities**

Vision disabilities can include a loss of peripheral or side vision, or a lack of central vision, which means that the person cannot see straight; very few people are totally blind. Many have limited vision such as tunnel vision, where a person only sees ahead. Some can see the outline of objects while others can see the direction of light.

Vision loss may result in:

- Difficulty reading or seeing faces;
- Difficulty in unfamiliar places;
- Inability to differentiate colours or distances;
- A narrow field of vision;
- The need for bright light, or contrast; and
- Night blindness.

Vision disabilities may restrict the person's ability to read signs, locate landmarks or see hazards. In some cases, it may be difficult to tell if a person has a vision disability. Others may use a guide dog or white cane.

When serving persons who have vision disabilities:

- Verbally identify yourself before making physical contact;
- If the person uses a service animal- do not touch or approach the animal- it is working;
- Verbally describe the setting, form, location as necessary;
- Offer your arm to guide the person. Do not grab or pull;
- Never touch the person without asking permission, unless it is an emergency;
- Don't leave the person in the middle of a room. Show them to a chair, or guide them to a comfortable location; and
- Don't walk away without saying good-bye.

## **Other Disabilities**

Smell disabilities may involve the inability to sense smells or a hypersensitivity to odours and smells. A person with a smelling disability may have allergies to certain odours, scents or chemicals or may be unable to identify dangerous gases, smoke, fumes and spoiled food.

Touch disabilities may affect a person's ability to sense texture, temperature, vibration or pressure. Touch sensations may be reduced or heightened resulting in a hypersensitivity to touch, temperature, or the opposite, numbness and the inability to feel touch sensations.

Taste disabilities may limit the experience of the four primary taste sensations; sweet, bitter, salty and sour. A person with a taste disability may be unable to identify spoiled food or noxious substances.

Other disabilities result from a range of other conditions, accidents, illnesses and diseases including ALS, asthma, diabetes, cancer, HIV/AIDS, environmental sensitivities, seizure disorders, heart disease, stroke and joint replacement.

Disabilities are not always visible or easy to distinguish.

## **DISRUPTION IN SERVICE**

### **Planned**

Planned disruptions in service will happen from time to time. Services that may be affected include, but are not limited to: entrance repairs, renovations that limit access to an area or technology that may become temporarily unavailable. If a disruption in service is planned and expected, Chatham-Kent Children's Services will provide notice and will include information including: the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if available.

Notice will be provided either on the website, over the phone, in writing or posted in a conspicuous place on site, where appropriate.

### **Unplanned**

In the event of an unplanned disruption in service, notice may be provided in a variety of different ways and will be done as quickly as possible. Chatham-Kent Children's Services will provide notice and will include information including: the reason for the disruption, its anticipated duration and a description of alternative facilities or services, if available.