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# People First

**A HELPFUL GUIDE TO DISABILITY AND  
ASSISTING THOSE WITH DISABILITIES**

**HUMAN RESOURCES DEPARTMENT**





## Did you know?

A 2005 survey by the Canadian Council in Social Development revealed that:

- ◆ 3.4 million Canadians report having a disability that restricts them in their daily activities (about 1 in every 10 people).
- ◆ Disability rates increase with age and of the population 65 and over – 40% report having some form of disability.
- ◆ 70% of all persons with disabilities report needing support with daily activities.
- ◆ Over half a million adult Canadians report having some form of vision loss and over a million report some form of hearing loss – not corrected by eyewear or hearing aids.
- ◆ 57% of adults with disabilities require some type of aid or device.

## Accessibility at TBRHSC

The Ontario Government recognizes that persons with disabilities are no different than anyone else in terms of the services they have a right to expect. It was this recognition that gave rise to the 2001 Ontarians with Disabilities Act (ODA) and more recently the 2005 Accessibility for Ontarians with Disabilities Act (AODA).

Through the development, implementation and enforcement of accessibility standards, the main objective is to have a barrier free and fully accessible Ontario by 2025. The accessibility standards apply to TBRHSC and as such the Hospital must produce an annual report on the current year’s accomplishments and the subsequent year’s strategies with respect to accessibility.

TBRHSC has formed an Accessibility Advisory Team, comprised of members from the Hospital, community and special interest groups. The Team works actively during the year, through meetings and internal audits, to prepare the Annual Accessibility Plan and continually improve our accessibility.

### ☞ Pocket Pagers

- ◆ Available at Switchboard.
- ◆ A pager that vibrates to notify patients who cannot hear our paging system.
- ◆ For patients who are Deaf, deafened or hard-of-hearing only.

### ☞ Pocket Talkers

- ◆ Allows a patient to use headphones to hear sound/voices amplified through a mini-microphone system
- ◆ For patients who are Deaf, deafened or hard-of-hearing only.
- ◆ Available in Rehabilitation, Utilization & Adult Mental Health – contact your manager for more information.

### ☞ Amplified Telephone

- ◆ Portable devices for patient rooms are available at Switchboard.
- ◆ On pay phones marked with this symbol:



### ☞ American Sign Language (ASL) Interpreters

- ◆ Available upon request – advanced notice is required.
- ◆ Contact the Canadian Hearing Society at 623-5594 or Ontario Interpreting Services at 623-5743.

### ☞ Closed Captioning

- ◆ Enabled on all waiting room televisions.
- ◆ Can be activated on patient rooms upon request. If unsure, contact Switchboard for instruction.

### ☞ Teletypewriter (TTY) Text Phone Devices

- ◆ Portable devices available at Switchboard.
- ◆ Fixed devices are available in Emergency, Main Entrance, Cafeteria and on pay phones marked with this symbol:



### ☞ Medbridge Translation System

- ◆ Available Hospital wide on select computers with the following icon:



## Services/Accommodation available at TBRHSC

### ☞ Printed Floor Plan

- ◆ Printed copies available at Information Desk

### ☞ Directory Floor Plan Signs

- ◆ Beside the Grand Staircase on levels 1, 2 and 3.
- ◆ Inside Main Entrance Doors and beside the Information Desk

### ☞ Accessible Entrances

- ◆ All entrances are accessible at ground level and without curbing.
- ◆ Equipped with automatic, sliding and/or revolving doors.

### ☞ Accessible Parking

- ◆ Spaces in lots A1, A3, B, C1, C2, D, E, and F
- ◆ Renal parking spaces outside Renal entrance

### ☞ Accessible Washrooms

- ◆ We have over 20 accessible washrooms and they are marked with this symbol:



### ☞ Accessible Elevators

- ◆ All are accessible and equipped with Braille buttons and audio tones.

### ☞ Easy Access Doors

- ◆ Internal doors are automatic or have lever handles.
- ◆ External doors are hand waves, sliders and/or revolving.

### ☞ Handrails

- ◆ In all main hallways except front foyers.

### ☞ Wheelchairs

- ◆ Available in Emergency and Main Entrance.
- ◆ Extra wide wheelchairs also available.

### ☞ Service Animals

- ◆ See ADMIN-15policy on Service Animals.
- ◆ Contact the department manager for further information.

## What is a Disability?

Disability and handicap have two very different meanings.

“Disability” refers to a restriction in a person’s ability to participate in a specific activity. “Handicap” refers to an environmental or attitudinal barrier that prevents the person with a disability from participating to their maximum potential.

*eg. A disability is the restriction a person who is deaf has in their ability to hear spoken conversation, a handicap would be another person’s reluctance to use means other than speech to communicate with this person.*

## General Communication Tips

- ◆ **PEOPLE FIRST!** Focus on the person, rather than the disability.
- ◆ **Approach the person from the front, where they can see you.** This position allows you to communicate with expressions or body language that often times speak louder than words.
- ◆ **Speak directly to the person,** rather than to an attendant, companion or interpreter.
- ◆ **Speak in a normal voice.** It can be insulting to speak loudly or slowly to a person with a disability, they will let you know if they have difficulty hearing or understanding you.
- ◆ **Avoid actions and words that suggest the person should be treated differently.** It is fine to invite a person in a wheelchair to “go for a walk” or to ask a person who is blind if they “see what you mean”.
- ◆ **Listen to what people say.** Do not assume you know what they want or what is best for them.
- ◆ **Don’t hesitate to offer assistance if the situation warrants.** Respect the person’s right to accept or refuse your offer.
- ◆ **If you are unsure how to act or what is appropriate – ask the person.**

## People who are culturally Deaf or have hearing loss

Accommodations for people who are culturally Deaf or experience some degree of hearing loss are those of communication and language. These groups are separate and distinct.

### Facts:

#### Persons with Hearing Loss

- ◆ People who are hard of hearing or deafened are those that have a loss of hearing sound that can range from mild to profound and whose language is a spoken language i.e. English, French. Those that are hard of hearing can often hear some sounds but may not be able to understand speech.
- ◆ People with hearing loss may use speech, lip reading, speech reading, reading or a print transcriber to communicate.

#### Culturally Deaf persons

- ◆ Culturally deaf persons are members of a cultural/linguistic minority group whose language is a signed language i.e. American Sign Language (ASL), Langues de Signes Quebecois (LSQ).
- ◆ Culturally deaf person's first language is a signed language and therefore signed language interpretation services are required. The printed use of a spoken language will vary depending on the individual and situation.

### Tips:

- Determine the language to be used and what personalized accommodations are required.
- For signed language, secure services of a professional interpreter. For spoken language, make available print transcription, assistive listening devices.
- Calmly get the person's attention before speaking and maintain eye contact.
- Speak/and or write to the person in a visually and auditory quiet area (if possible). When speaking, do so slowly and clearly, being careful not to over-emphasize words or distort lip movements. When writing, use plain language and graphics. As required, do both.
- Keep your face visual – don't cover with hands or masks.

## People who are anxious or agitated

### Facts:

- ◆ People become anxious or agitated for a variety of reasons. Some may be under a great deal of stress; some may have experienced a loss and are grieving; others may have a mental illness and are experiencing some symptoms.

### Tips:

- Use clear, straightforward language – rephrase if necessary.
- Be clear about who you are and your role.
- Check to make sure they understand – do not try to talk over them.
- Recognize the individual's stress level and try to help calm them.
- Eliminate (if possible) physical or sensory barriers which may be causing a problem.
- Try to relocate (if possible) the person to an area where there are fewer onlookers if they seem agitated or uncomfortable.
- If the request is beyond your control, explain that it is and ask how you can best help the person – avoid involving too many people.

## People with developmental disabilities

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### Facts:

- ◆ A developmental disability should not be confused with a psychiatric or mental illness.  
eg. Developmental disability – Downs Syndrome  
eg. Psychiatric disability – Schizophrenia
- ◆ A developmental disability is characterized by a difficulty in understanding, communicating, mobility, controlling behaviour or a combination of these.
- ◆ A developmental disability does not necessarily mean the person is of low intelligence.
- ◆ People with developmental disabilities may have difficulty with both receptive and expressive language (communicating and understanding what is being communicated).
- ◆ Sensory issues (over or under stimulated senses) are a problem with many types of developmental disabilities.

### Tips:

- ☞ **Do not be offended by lack of/inappropriate response(s) or unconventional behaviour.**
- ☞ **Maintain eye contact.** This shows respect and that you are genuinely listening and trying to help.
- ☞ **Do not use complex terminology or jargon – use simple sentences.**
- ☞ **Clearly identify yourself, your role and that you are trying to assist/help them.**
- ☞ **Offer physical assistance and direction when necessary.**
- ☞ **Address any inappropriate behaviour immediately – explain any rules/regulations or behaviour expectations.** It can be more difficult to explain why behaviour is inappropriate if it is not dealt with the first time.

- ☞ Use pantomime, body language and facial expressions – these are vital communication tools.

### Services/Accommodation available at TBRHSC (refer to page 13 for details):

- ◆ Teletypewriter (TTY) Text Phone Devices
- ◆ Amplified Telephone
- ◆ Pocket Pagers with vibrate mode
- ◆ Closed Captioning on Televisions
- ◆ Pocket Talker
- ◆ American Sign Language (ASL) Interpreters are not available at the hospital. The service must be arranged by contacting Ontario Interpreting Services (OIS) at 623-5743

## People who stutter or have trouble speaking

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### Facts:

- ◆ Stuttering is a pattern of speech where the speaker repeats or prolongs sounds for an unusually long time.
- ◆ Stuttering may be aggravated by anxiety or stress.
- ◆ Profoundly pre-lingually deaf people are those who were born with insufficient hearing to enable them to acquire speech normally, or who lost their hearing prior to the age at which speech is required and thus have difficulty forming the words the way they are commonly heard.
- ◆ Neither situation is indicative of a developmental or psychiatric disability.

### Tips:

- ☞ **Listen patiently and do not finish their sentences.**
- ☞ **Listen to what they are saying, rather than how they are saying it.**
- ☞ **Do not interrupt the person, but ask for clarification if needed.**
- ☞ **Attempt to create a relaxed environment where both of you feel at ease.**
- ☞ **Do not suggest that they slow down or start over.** This can call attention to the disability and increase anxiety.

## People who are blind or have low vision

### Facts:

- ◆ Low vision denotes a level of vision that is 20/70 or worse and cannot be fully corrected with glasses – indicating you see at 20 ft what a person with good vision sees at 70 ft.
- ◆ Low vision is not the same as blindness – a person with low vision has some residual sight and usually requires adaptations for the performance of daily activities, such as reading.
- ◆ A person is considered “legally blind” when the best corrected central acuity is 20/200 (normal acuity is 20/20) or the peripheral vision is narrowed to 20 degrees or less in the better eye.
- ◆ People who are legally blind may still have some vision – very few people experience total loss of vision.

### Tips:

- ☞ **Identify yourself** do not assume the person will recognize your voice.
- ☞ **Offer your arm, rather than grabbing theirs.**
- ☞ **Let them know of possible hazards**, such as doors, steps, changes in terrain (concrete to gravel or grass) etc.
- ☞ **Never interfere with a guide dog by petting or distracting it.**  
A guide dog provides a service to the owner and when working should not be distracted. Do not pet a service dog unless you have permission.
- ☞ **Let the person know when you are leaving and if possible leave them in contact with a tangible object such as a table or a wall.**  
This will eliminate the problem of leaving them in an open space with no point of reference.

### Services/Accommodation available at TBRHSC:

- ◆ See ADMIN-15 policy on Service Animals.
- ◆ Elevators are equipped with Braille buttons and audio tones.

## People with physical or mobility disabilities

### Facts:

- ◆ Physical disabilities occur widely and can range from arthritis to paralysis.
- ◆ Physical disability goes beyond having to use a wheelchair or wear a back brace. There are many medical conditions, such as multiple sclerosis and chronic fatigue syndrome which may affect person’s mobility.
- ◆ Physical disabilities cannot be generalized because each person will have different causes, symptoms and management strategies.
- ◆ Physical disabilities do not necessarily indicate other disabilities as well, such as difficulty hearing or a developmental disability.

### Tips:

- ☞ **Try to sit or crouch**, so that you are speaking at eye level.
- ☞ **Respect personal space.** A person’s wheelchair is essentially an extension of their body. Do not lean on it or move them without their permission.
- ☞ **Do not assume help is needed and accept that person’s right to refuse help.**
- ☞ **Be aware.** Take notice of what is accessible and inaccessible to people in wheelchairs.

### Services/Accommodation available at TBRHSC:

- ◆ Wheelchairs are available at Switchboard.
- ◆ Many washrooms are accessible and are marked as such.
- ◆ Accessible parking is located in lots A1, A3, B, C1, C2, D, E and F.
- ◆ All entrances are accessible and have either automatic, revolving or sliding doors at ground level, without curbing.