



ADDICTIONS
FOUNDATION
OF MANITOBA

Accessibility Plan 2018-2020

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The Addictions Foundation of Manitoba (AFM) Accessibility Plan

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1.0 Background Information

1.1. Accessibility for Manitobans Act

The Accessibility for Manitobans Act (AMA) was passed on December 5, 2013, with the goal to provide clear, proactive processes to identify, prevent and remove barriers to accessibility.

Under this legislation, accessibility standards will be developed to address barriers to accessibility in the following key areas of daily living:

- Customer Service
- Employment
- Transportation
- Information and Communication
- Built Environment

All public sector organizations (including the AFM) must develop an Accessibility Plan to address accessibility barriers in policies, practices and procedures. The goal is to ensure Manitobans of all abilities have full access to programs and services designed to meet the public's needs.

Section 3(1) of [The Accessibility for Manitobans Act](#) defines a barrier as anything that interacts with a physical, mental, intellectual or sensory *disability* in a way that may hinder the person's full and effective participation in society on an equal basis.

Disability¹ – Under Manitoba's Human Rights Code, a physical or mental disability is interpreted broadly and contextually and includes related characteristics. A Disability may be visible or invisible, and may include conditions that are asymptomatic or in remission. When determining if discrimination is based on a disability, the focus is on obstacles to full participation in society rather than on the condition or state of an individual. In the context of addiction, a Disability may include actual or perceived previous

¹ From the Manitoba Human Rights Commission *Physical and Mental Disability Interpretation Policy* (#1-4).
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or existing or potential dependence on alcohol, drugs, or addictive substances, and may include addiction to gambling.

1.2 Principles of Accessibility

Section 2(2) of [The Accessibility for Manitobans Act](#) identifies the following four guiding principles of accessibility:

1.2.1 Access. Persons should have barrier-free access to places, events and other functions that are generally available in the community.

1.2.2 Equality. Persons should have barrier-free access to those things that will give them equality of opportunity and outcome.

1.2.3 Universal design. Access should be provided in a manner that does not establish or perpetuate differences based on persons disability.

1.2.4 Systemic responsibility. The responsibility to prevent and remove barriers rests with the person or organization that is responsible for establishing or perpetuating the barrier.

1.3 Barriers to Accessibility

There are five categories of barriers identified by the AMA.

1.3.1 Attitudinal barriers result when people think and act based on false assumptions. For example, a staff member talks to an individual's support person because they assume the individual with a disability will not understand.

1.3.2 Informational and communication barriers are created when information is offered in a form that suits some, but not all, of the population. For example, print that is too small for some people to read or a public address system that a person with hearing loss cannot hear.

1.3.3 Technological barriers occur when technology, or the way it is used, cannot be accessed by people with disabilities. For example, websites that are not accessible to people who have low vision and use screen reader software.

1.3.4 Systemic barriers are policies, practices or procedures that result in some people receiving unequal access or being excluded. For example, job descriptions that can exclude people based on a disability, such as requiring a driver's licence, even when the job does not require driving.

1.3.5 Physical and architectural barriers are physical obstacles that make it difficult for some to easily access a place. For example, a door knob that cannot be turned by a person with limited mobility or strength or a hallway or door that is too narrow to allow a person who uses a wheelchair to pass through safely.

2.0 Baseline Report

2.1 Organizational Overview

AFM is a provincial crown agency committed to being a foundation of excellence in providing addictions services and supporting healthy behaviours. AFM's legislated mandate is to provide addictions treatment services and public education. AFM is accredited through Accreditation Canada, an independent, not-for-profit organization that accredits 1,200 health care organizations across the Canada. Funding for AFM is provided by Manitoba Health, Seniors and Active Living, the Manitoba Liquor and Lotteries Corporation, and donations from private supporters.

Over 400 staff provide a wide range of addictions services to Manitobans through more than 28 locations across the province. In addition to these locations, AFM has partnerships with 20 school divisions, providing on-site services in 51 schools across Manitoba. On an "as needed" basis AFM

provides services to an additional 47 schools across the province. Through various partnerships including Manitoba Health, Seniors and Active Living, Healthy Child Manitoba, Manitoba Justice, Child and Family Services and several Indigenous communities, AFM provides services across the province to adults and youth.

2.2 Accessibility Planning Working Group

An Accessibility Planning Working Group was established to oversee the development of this Accessibility Plan. The six member group includes the co-chairs of the Diversity and Cultural Safety Committee.

This committee is a twelve member group with representatives from across the province, and will coordinate Accessibility compliance and support implementation on an ongoing basis. The co-chairs of the committee will act as the Accessibility Coordinators for AFM while the Provincial Leadership Team (PLT) is responsible for plan oversight.

2.3 Accessibility Achievements

The Accessibility Planning Working Group identified the accessibility achievements listed below:

- A provincial Diversity and Cultural Safety Committee has been established whose mandate is to coordinate initiatives related to diversity inclusivity and cultural safety.
- Webinar technology is being used for trainings to improve accessibility.
- American Sign Language (ASL) interpreters are provided at meetings to support the inclusion of Deaf staff members, and to Deaf clients to support access to service provision.
- ASL training was offered to staff in one location to reduce communication barriers with a Deaf co-worker.

- A client-centred policy is in place at AFM.
- Trauma-Informed Care Level 1 training is mandatory for all staff.
- Workplace Health and Safety Committees look at issues of accessibility for staff members, investigates concerns and makes recommendations to AFM's Provincial Leadership Team.
- Considerations related to accessibility have been discussed in relation to emergencies at AFM. Program areas identified opportunities to improve.

2.4 Accessibility Barriers

AFM's Accessibility Planning Working Group completed an initial review of barriers to accessibility within AFM. A small focus group with individuals who self-identify as having experienced accessibility barriers were consulted.

The following is an initial list of barriers, organized by barrier type, which were identified by the working group and through consultations:

2.4.1 Attitudinal Barriers *(created when people think and act based on false assumptions)*

- Knowledge about different types of barriers and how to increase accessibility may be inconsistent across the agency.
- As with the general public, staff may have attitudes, assumptions, stereotypes and personal beliefs that can create unintentional barriers.

2.4.2 Information and Communication Barriers *(created when information is offered in a form that suits some, but not all, of the population)*

- There is currently no formal process in place to enable individuals to access or request information in alternate formats (e.g., large print, audio, readable format for screen readers) for internal or external documents.

- Some of AFM's existing communication materials may not be easily accessible. For example, brochures, reports and other AFM documents meant for clients or the public are not always written at a reading level accessible to all.
- The AFM website contains some barriers to accessibility. For example,
 - Videos on the AFM website promoting services may not be accessible to people with low vision or hearing loss.
 - Website graphics and charts are included without descriptions (e.g., AFM building tours).
 - Contact information on the AFM website is not easily accessible.

2.4.3 Technological Barriers *(occurs when technology, or the way it is used, is not accessible to people with disabilities)*

- A review of the AFM website is necessary in order to better understand accessibility barriers.
- An understanding of additional technological barriers is necessary.
- Client forms are primarily available in hard copy format.

2.4.4 Systemic Barriers *(policies, practices or procedures that result in some people not receiving equal access or being excluded)*

- Processes and requirements regarding intake, programming and services offered at AFM may not adequately accommodate barriers to accessibility.
- People with disabilities may be excluded from events if their needs have not been considered and addressed at the event planning stage.

2.4.5 Physical and Architectural Barriers *(physical obstacles that make it difficult for some to easily access a place)*

- Aging Infrastructure in various facilities may result in physical barriers. For example, lack of public elevator, wheelchair ramps, automatic doors and other physical support devices at various AFM locations throughout the province.

The accessibility plan includes completing a more in-depth analysis of barriers across the agency. The initial priorities are included in the current action plan.

3.0 Accessibility Action Plan

3.1 Statement of Commitment to Accessibility

AFM is committed to continued work towards preventing and removing barriers across the agency. Increasing accessibility and meeting AMA requirements helps promote dignity and independence and is an important way that AFM welcomes, respects and values diversity.

AFM's Vision, Mission and Values provided the foundation and helped guide the development of this plan.

Vision: Healthy Resilient Manitobans

Mission: A foundation of excellence in providing addictions services and supporting healthy behaviours.

Values: Our values define what we believe in. They provide us with a common understanding of what is important and provide us with a framework for our actions.

Client-Centred – welcoming and respecting diversity.

Capacity for Change – supporting clients and staff.

Collaboration – working with partners.

Continuous Improvement – identifying and using evidence-based practices.

3.2 Accessibility Action Plan - AFM Accessibility Action Plan 2018-2020

Action	Timeline	Leads
Communicate to all staff regarding the new accessibility policy and action plan and introduce training on Customer Service Standard (<i>Attitudinal Barrier</i>)	November 30, 2018	Accessibility WG
Provide all staff access to online training on Customer Service Standard; monitor progress and follow up to ensure all staff complete training (<i>Attitudinal Barrier</i>)	December 2018 – June 2019	Staff Development
Develop a guideline on the AMA requirements for public events and communicate to appropriate AFM staff (<i>Systematic Barrier</i>)	December 2018	Communications
Assess current accessibility features of the AFM website and explore options for improvement (<i>Information & Communications Barrier and Technological Barrier</i>)	March 2019	Communications
Provide Accessibility training to Diversity and Cultural Safety Committee (<i>Attitudinal Barrier</i>)	Spring 2019	Committee Co-Chairs
Create an additional staff, client and family consultation plan (<i>inclusive of all barriers</i>)	June 2019	Accessibility WG
Complete an in-depth analysis to further assess barriers and identify opportunities to improve accessibility in the agency (<i>inclusive of all barriers</i>)	Spring 2020	Diversity Committee
Explore additional ways to engage	On-going	Diversity

staff on accessibility issues <i>(Attitudinal Barrier)</i>		Committee
The Intake and Assessment Framework Working Group will apply an accessibility lens to the framework <i>(Systematic Barrier)</i>	On-going	Residential Services Review Steering Committee Intake and Assessment Framework Working Group
Continue working with Shared Health Services on capital planning initiatives that include a review of AFM facilities from an accessibility lens <i>(Physical Space)</i>	On-going	CEO and PLT

**For more information, to provide feedback on AFM’s Accessibility Plan or to request an alternate format of the Accessibility Plan, please contact:
AFM Diversity and Cultural Safety Committee
Email: diversity@afm.mb.ca**

References

Accessibility for Manitobans Act, SM 2013 c 40, CCSM c A1.7 [AMA].

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