



**ACCESSIBILITY IS MORE THAN A RAMP: NOTES FROM KEYNOTE  
SPEECHES, PANEL PRESENTATIONS, AND AUDIENCE QUESTIONS**

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(If you have any questions about the information contained in this document, or are interested in reproducing any part of it, please contact Barry Kaplan: 613-546-4291, x.1385; or [bkaplan@cityofkingston.ca](mailto:bkaplan@cityofkingston.ca))

### Opening Remarks

TIM EICHHOLZ - Take a seat please. Good morning. Good morning. We booked this place and we kept saying is it big enough? What a nice sunny Kingston day. In August we hoped for a barbeque, but it is late now. I am the chair for the Accessibility Advisory Committee in Kingston. My first privilege is to introduce Mayor Harvey Rosen

MAYOR ROSEN - Thank-you Tim. Good morning. Welcome to Accessibility is more than a ramp form. On June the 14<sup>th</sup> the Ontario government passed to AODA - Doctor Marie Bountrogianni introduced the new act - to include an inclusive society. All to have an opportunity to participate to their full potential. I support this to eliminate barriers. This has been going on for almost 3 years. In response to the anticipated impact on everyone in the community and building on our consultations, the City has recognized the need to share information about accessibility and the necessity of providing opportunities to share information about accessibility. The city is proud to host this forum. I want to note the keynote speakers today in particular and thank the community for organizing this event today. Thank-you for coming. I encourage you to share you thoughts. Today will be informative and productive.

TIM - Now a few ground rules. If you haven't done so - pick up your conference package at the first break. Lunch - Please order it (if you haven't already) asap. Smoking is outside only in the designated spots. Washrooms - limited. Time and everyone will go at the same time - you figure it out. Okay, two access monitors - KYM and Jeanette - if any needs, please flag them down to help. Does anyone have need for American Sign Language interpreter? I would encourage

you to complete the survey in your package. Here are the guidelines - only one person to speak at a time. Raise your hand and we will bring a microphone to you. The access monitors will keep a speakers list to know who is next. Refrain from side conversations. Use the microphone to speak. Face the audience to speak. Introduce yourself. Don't cover your mouth when speaking. These rules - geez. Microphones amplify paper shuffling. Set paper aside. Keep the aisles open to get in and out. Don't interact with the working dogs. Ask Kym and Jeanette for anything specific. Any questions?

TERI HIBBS - Good morning. It's my job to Introduce Judith Moses. Known her for 10 years - a management consultant. She has worked with anti violence organizations over the past number of years. An advocate for the eradication of violence. Violence against women and seniors are important to her. She has authored several training manuals. Judith is known for her integrity in her work.

### **Keynote Speaker #1: Judith Moses**

JUDITH MOSES - Good morning.

[The following is Judith's prepared speech, and is not a transcript from the AIMTAR real-time captionist.]

Accessibility is more than a ramp: there are several different ways we can interpret or use this phrase to help us all better understand the various challenges and barriers disabled people experience on a daily basis.

Accessibility is more than a ramp ~ because getting to your door is just the start. Not even the start: first a

wheelchair user has to get to your building ~ can she use the public transit system to respond to a last minute invitation to dinner or does she have to get a doctor's note, be confirmed as "disabled and therefore eligible for transport" and then book a ride on an access bus days in advance of any outing? What about taxi cabs ~ do you have an adequate number of accessible cabs in your community based on the number of disabled people who reside there? And once she's on her way, will she find adequate curb cuts and clear, safe sidewalks? Do you keep your ramp shovelled? How heavy is the door when she makes it to the top of your ramp?; do you have automatic doors?; which way do they swing? And then when she's in, can she manoeuvre comfortably around your merchandise or are your racks and aisles too close together to accommodate a chair? Can she approach at least one counter at the bank or the theatre and interact with someone face to face ~ and my pet peeve, can she use the bathroom?

Accessibility is more than a ramp ~ because accessing and using a service or business is about more than getting to the door. Of course, we're still talking about the accessibility requirements of wheelchair users. What about other the challenges and barriers experienced by people with other disabilities?

Accessibility is more than a ramp ~ because there is more than one kind of disability. People with different disabilities require different accommodations or need different kinds of barriers eliminated. Some folks, like me, do require a ramp or an elevator or a lift or an accessible transit bus because they are unable to manage stairs for any number of reasons ~ maybe like me, they don't have enough strength in their legs to lift their own body weight up a

step. Others require bars in the bathroom...automatic doors...ASL interpretation...closed captioning on TV...auditory cues in elevators to confirm floor changes or at intersections to confirm light changes...access to talking books or to materials written in Braille...physical assistance with activities of daily living...the list goes on.

This rather obvious starting point exposes one of the more irrational, yet most commonly held, assumptions about disability in our society: that disability is a single entity construct ~ or one disability is all disabilities ~ all disabilities are one disability. If all disabilities are one disability, then the same accommodations will meet the needs of all disabled people.

We know this isn't true ~ rationally, logically, consciously; and yet, this assumption is evident in our day to day interactions with disabled individuals in many instances: we raise our voices when speaking to someone who is blind; we speak very, very slowly to a wheelchair user, allowing ample time for comprehension and understanding. And if this assumption is evident in our individual interactions with persons with disabilities, we must consider the possibility that it also inadvertently informs, one might say contaminates, our government policies and collective decision-making processes from time to time.

A wee story from my own life ~ sometimes, depending on what's going on with my disability at any given time, I do use a wheelchair...and on this particular occasion, I was in my chair and shopping for work clothes with my partner. I rolled up to the check out, put several hundreds of dollars

worth of merchandise on the counter, and plunked down my trusty gold MasterCard. The clerk didn't respond to my greeting and avoided all eye contact with me. After ringing everything through, she looked over and past me, made eye contact with me partner and half whispered/half mimed: "can she sign her own name?" Obviously if I was in a wheelchair I was also Deaf ~ or "deaf enough" that I wouldn't hear her whisper...and I guess I was also blind ~ or "blind enough" that I wouldn't see her playing charades with my partner...and I had an intellectual disability which prohibited me from learning how to use a credit card or sign my own name...all things considered, it was obviously be best to treat me as a dependent child and interact exclusively with my "care taker" ~ especially since money was involved.

One disability ~ some kind of physical limitation that necessitated the use of a wheelchair ~ was all disabilities ~ I was also hard of hearing, couldn't see very well and had an intellectual disability. All those distinct disabilities were one disability in that clerk's mind.

One disability ~ one set of accommodations required to promote accessibility.

Accessibility is more than a ramp ~ because there is more than one kind of disability. When we conveniently forget or ignore this ~ or when we fail to educate ourselves about the many and significant differences between various disabilities ~ we may implement strategies designed to increase accessibility that do not promote barrier-free access to all persons with disabilities but rather allow selective access to those who live with very visible or relatively well known

disabilities, such as spinal cord injuries.

Accessibility is more than a ramp ~ because concrete accommodations will never be enough, may not even be made, until we acknowledge and address the less tangible and far more challenging barriers generated by ignorance, judgement, prejudice and fear.

We live in a culture that values people who look a particular way. Many of you are probably familiar with the research; some of you may have experienced the benefits or costs arising from these deeply entrenched preferences. Physically attractive people are more likely to be hired, to be promoted, to be paid more than their less attractive peers ~ especially but not exclusively, women. Tall people are more likely to be hired, to be promoted, to be paid more than shorter people ~ especially but not exclusively, men. Physically fit men and slim women are more likely to be hired, promoted, paid more. And everyone must be young ~ of if no longer young, we must do everything possible to look young. Let's face it: we pay, respect, idolize and honour our entertainers ~ actors and competitive athletes ~ just about more than anyone else in our society.

We reward people who look who a particular way ~ and our size, our shape, how we move, how we communicate, our age are all part of how we "look" or how we are perceived, experienced and valued by others.

And if you're thinking, I know plenty of physically unattractive, short, out of shape, older men and women who are well respected ~ after all, Einstein wasn't much of a looker and Mother Theresa was definitely short ~ fair enough.

We do also recognize and respect accomplishments, achievements and positive contributions to our work and social environments, despite our bias for culturally defined beauty. However, this offers little comfort to most people with disabilities since so many of us are still unable to secure the education or land the job that will allow us to gain this kind of respect.

It is the shadow side of these biases ~ the prejudices against and the negative reactions towards those who don't fit our narrow definition of "physically attractive" or who aren't given access to the same opportunities that would allow them to achieve, accomplish and contribute ~ that must be brought into the light and eradicated.

Disability is the club no one wants to belong to. Many of us don't come anywhere close to our society's definition of "physically attractive": our bodies are shaped differently; we may be missing entire body parts; have visible scars or disfigurements. We move differently, have odd, uncontrolled movements; or we may have difficulty moving some parts of our body at all.

We may require various pieces of equipment to help us move or communicate ~ none of which do much for us on the attractiveness scale: things like prosthetic limbs, leg braces, crutches, or letter boards. Our speech may be slurred, difficult to understand or we may speak an entirely different language such as American Sign Language and as a result, need an interpreter whenever we want to share our ideas or contribute to discussions. We may not look very nice when we eat or drink and we may need assistance with basic activities of daily living such as dressing, bathing

and toileting.

Despite our best intentions to look beyond appearances, many people ~ good people, kind people ~ are uncomfortable around disabled individuals; they may even feel disgusted, repulsed or afraid. Let's say you own a classy restaurant. If you know, in your gut, that you, your wait staff and most importantly, your non-disabled paying customers are going to feel uncomfortable or disgusted by the guy at the next table who happens to have cerebral palsy, then you have little motivation to make your restaurant accessible and welcoming to people with disabilities.

Fear is a powerful emotion. It feeds other emotions, such as anger and hatred ~ and it determines and drives behaviour. Where does that fear come from in relation to people with disabilities?

Some of it grows out of ignorance or lack of information: fear of the unknown. If we don't know much about disability as an issue or about the many different disabilities people in our communities live with, then we may be disproportionately nervous about "inviting" them into our businesses, work places or homes, about including them in our professional or personal communities.

Disability is the club no one wants to belong to ~ ironically, it's also the club that's ready to welcome anyone at any time. Now, more than ever before, we're aware of how quickly disability may become part of our lives. A car accident, a motorcycle accident, boating accident...skiing accident, diving accident, sporting accident...a fall from horse or a rock face or a bicycle...in an instance and in countless ways, any of us may become disabled...and suddenly,

we have an acquired brain injury, spinal cord injury or one or more of our limbs are simply gone...and suddenly, we are less than we were: less mobile, less independent, less powerful, less coordinated.

Disability may also creep into lives over time, piggy-backing on the aging process. As we age, we lose our sight, our hearing, our mobility. A 78 year old woman requires 4 times the amount of light to see with the same acuity she had at age 25 ~ just because she's 78. As we age, our memory and other cognitive functions are just not as sharp. Our sight, our hearing, our mobility, our cognition are less than they once were.

In so many ways and for most us, disability, acquired in an instant or acquired over time, is about loss: loss of function; loss of control; loss of options and earning power; in some instances, loss of identity. It's about learning to live with less.

This is the fuel that feeds the fear that drives the behaviour that results in our marginalization and exclusion. It's such a small distance between a logical and reality-based recognition that many people with disabilities have less functional capacity in some part of their body or brain ~ I, for example, have less feeling, strength and mobility in my legs and arms than most non-disabled people ~ it's such a small distance between less functional capacity in some part of my body or brain to less value or worth as a human being.

Less value or worth as a human being means less access to the privileges and benefits available to valued persons ~ in this instance, non-disabled people. Less access to education,

employment, entertainment, recreation. And so it should be no surprise to learn that people with disabilities are less likely to finish high school or participate in post-secondary education than non-disabled people. Disabled people currently experience the highest rates of unemployment or underemployment in Canada. And we are among the poorest of the poor.

Less value or worth as a human being, unfortunately, also means more of some things ~ more vulnerability to abuse, exploitation and violence, for example. The death machines of Third Reich, the gas chambers and crematoriums, were developed and perfected using people with disabilities. Entire institutions were emptied as thousands of disabled people were murdered and no one spoke out against the extermination of these "useless" people, these "burdens on society".

Today, people with disabilities are one and one half times more likely to experience violence than non-disabled persons in their same sex and age group. This means that a disabled teenage boy is one and a half times more likely to experience violence than a non-disabled teenage boy.

Statistics relating to violence against non-disabled women in Canada today suggest that:

- 3 out of 4 disabled girls and 3 out 4 disabled women will be sexually assaulted
- and 4 out of 10 disabled women involved in a dating or long term relationship will be physically assaulted at least once by their intimate partner.

Studies involving disabled women have found that:

- 80% - or 8 out of 10 - women with profound physical disabilities living in institutions have experienced physical violence, sexual violence or neglect
- 70% of women in psychiatric hospitals are sexually assaulted while in the hospital
- and 80 to 100% of women with intellectual disabilities have been sexually assaulted at some time in their lives.

This increased vulnerability to violence makes intuitive sense when we think how different disabilities might compromise a woman's ability to hear, see or escape an approaching offender, to defend or protect herself, to tell others about or to report the abuse so that it can be stopped, or in the case of women with intellectual disabilities, to understand and protest against various forms of sexual manipulation or financial exploitation.

In addition, the limited housing and employment opportunities available to many women with disabilities make it extremely difficult for them to leave abusive partners. For example, women with disabilities, on average, are paid less than non-disabled men, less than disabled men, and less than non-disabled women in Canada today.

Less value or worth as a human being also often means more isolation and this is particularly true for many people with disabilities. If you are unable to access educational

institutions, employment opportunities or recreational facilities for any number of reasons ~ no money, no accessible transportation, unable to enter the buildings or communicate with others once there; if restaurants and business are not accessible to you for similar reasons; if you're not welcome or invited to volunteer in your community ~ is it any wonder that many people with disabilities are more isolated, less visible, less active and less involved in day to day activities than their non-disabled neighbours?

I've drawn a pretty bleak picture thus far but things are slowly changing for the better for persons with disabilities on many fronts ~ we are more visible in mainstream media, working as physicians, coroners, lawyers and media consultants on various popular television shows; communities are wrestling with the issue of accessibility in a variety of ways; necessary legislation is being introduced; and monies are being made available to support education, training and employment initiatives for persons with disabilities.

Technological and medical advances are also changing, on a daily basis, the lives and options available to people living with various disabilities. It is much more likely that the loss or absence of a specific physical attribute or function can be accommodated for or translated into a different way of doing something than it was even a decade ago ~ less function is more easily transformed into different function ~ a different way of reading, speaking, communicating or moving.

But we mustn't ignore, minimize or deny the negative attitudes, judgements and fear that continue to influence these same lives every single day. Less function or different function should not - must not - translate into

less value or worth ~ less control, dignity, options or earning power.

Accessibility is more than a ramp ~ accessibility is an invitation to participate, to contribute, achieve, accomplish ~ to succeed or fail on a level playing field with non-disabled people. Accessibility is about recognizing, respecting and including me as an equal human being.

The accommodations and changes you make to increase the accessibility and eliminate the barriers that exclude disabled persons in this community should not just allow us "entry" in the broadest sense of the word, they must also:

- Allow us the greatest degree of control over ourselves and our environment as possible: I don't want to sit and wait until someone else arrives at your business to help me open the door at the top of your ramp because it's too heavy, too awkward or swings the wrong way for a wheelchair user to manipulate independently...and I don't want to be described as wheelchair-bound which implies a passivity and dependence that is disrespectful and inappropriate. Most wheelchair users, especially permanent users, see getting into their chair as no different than you getting into your running shoes - both are necessary if you're going out into the world.
- Accommodations should be designed to preserve our dignity and offer us options ~ the same number and type of options that non-disabled consumers or patrons or service user have: I don't want to come in the service entrance, take the freight elevator up to the next floor - me and the

fresh fish that's just arrived - be escorted through the kitchen, and then brought around to the dining room to join the rest of my party at your 3 star restaurant.

- Accommodations should be designed to allow us to participate and compete; designed to facilitate our earning power: I can't compete in the business world if I don't have access to a public transit system that gets me to and from work as easily, efficiently, and for the same cost as non-disabled transit users.

Accessibility is more than a ramp ~ because accessing and using a service or business is about more than getting to the door.

Accessibility is more than a ramp ~ because there is more than one kind of disability. People with different disabilities require different accommodations or need different kinds of barriers eliminated if they are to participate fully in our communities.

Accessibility is more than a ramp ~ because concrete accommodations will never be enough, may not even be made, until we acknowledge and address the less tangible and far more challenging barriers generated by ignorance, judgement, prejudice and fear.

Accessibility is more than a ramp ~ accessibility is about inclusion, participation, equality and respect. Give us a chance to contribute, achieve and accomplish ~ the more we participate, the more opportunity you will have to interact, one on one, with different individuals living with various disabilities. This kind of personal, direct exchange does

more to educate, inform and promote understanding and mutual respect than anything else. The more we understand and appreciate each other, the more comfortable we are with one another ~ more comfort - less fear; less fear - no need to marginalize, exclude or avoid.

Nobel laureate Aung San Suu Kyi has said: "The only real prison is fear, and the only real freedom is freedom from fear."

Don't be afraid. Invite us to the party!

Thank-you.

TIM - (handing Judith a gift from the City of Kingston - a framed poster about accessibility created by students at QECVI). This is created by Rene Coneau from Limestone District School Board.

Thank-you.

### **Keynote Speaker #2: Ernie Parsons**

TIM - Ernie Parsons is the MPP for Hastings/Prince Edward. He graduated as a professional civil engineer. He taught at Loyalist College. He was active on a number of boards before being an MPP in 1999. He is a foster parent as well.

ERNIE PARSONS - It is a delight to be here. I enjoyed Judy's speech. I am here to talk about AODA (Accessibility for Ontarians with Disabilities Act, 2005) passed back in the spring to replace the old Act that was less than complete. We passed the act but it is maybe 1% of what has to be accomplished. We make 1000's of laws and not all are

followed. Laws mean nothing without enforcement and financial assistance. We hope this is a new era. We want to do it right - changes the lives of everyone in Ontario. What we are trying to do is remove barriers. People are afraid of people that are different. We like what we know and are afraid of the unknown. When I was first on the school board, we had a school that I didn't know how to act and I didn't visit it and then we had a son who was handicapped and I visited there and it was wonderful. We believe we have a role to play as the government - in leadership. The Act wasn't even a mere shadow of the American Act because it only applied to provincial and municipal sectors and not private. It was explained that private couldn't afford it. In the States - 75% of companies in 10 years said they spent \$500 or less. It came about in the States because of the Vietnam Vets. I spoke to the drafters and said how did you get it through. We identified a relative or a friend of everyone elected that had a disability. We talked to them about how it would make life better for people they valued. There are two classes of people - those with disabilities and those with no disabilities yet. We took a leadership role. We consulted heavily with the disability community, with industry, stores, home builders and asked for advice up front. What I heard was we don't mind spending money, but we want the competitors to spend it too. All organizations need to be playing by the same rules.

I would get calls in opposition from the Americans coming here and expecting the same service as in the States. There are a number of places that think if you can get through the front door that is accessible. That is bothersome. I was bothered that the only things truly accessible were American owned in Canada. We focus heavily on the mobility issue.

Select a disability that is visible. Society has a dim view of mental disabilities. I spent a day in Trenton in a wheelchair and I thought the issue was going to be mobility. One place all they had was a button - no motor to open the door. One place I went for a coffee and a Tim Bit - one woman said "Does he want a coffee" to the person with me - and other stores I became invisible. Do we ever have an education to undertake to make people aware of their friends and neighbours?

Well, parts of first provincial legislation, the Ontarians with Disabilities Act, 2001 (ODA) remain in place. And requirements for annual reports from Broader Public Sector organizations will continue until the AODA is fully in place. It is a 20 year plan. For certain things like Casa Loma in Toronto - won't be accessible in 3 years. I hope I am not talking too fast. We have done a blueprint now - we aren't the right people to know what it should look like when finished.

We talked about accessibility into a restaurant and I never thought about a table being too high for access. There is also a requirement when elected that you leave your brain in your home town - any media here? We are going to have one central advisory committee to give the minister advice. Standards are going to be set - for example certain number of taxis and I am striving to think beyond that. In my area we have Sir James Whitney - 85% are unemployed and industry is wrongfully afraid of them. We are about to establish the first "Standards Committees" - one limitation - the majority on the committee must have a disability. "Transportation" and "Customer Service" are the first two committees for the standards. You have until November 10<sup>th</sup> to indicate if you

would like to serve on them. No pay - lots of prestige. In closing. I want to emphasize, we only know what we are told. We aren't that bright. We went into politics voluntarily. I have the ability to get the answers. Contact us if you have something to add to the standards. Let us know. You will bring experiences that can truly changes life for others in the Province. Thank-you.

TIM - (handing Ernie a gift from the City of Kingston - a framed poster about accessibility created by students at QECVI). The artist is Cliff Mackerel. Thank-you.

BREAK 11:05 - 11:20

### **Panel #1: Municipal Accessibility**

BARRY KAPLAN - We are going to begin the first panel. Could all take a seat? Welcome to our first workshop/panel. The topic is Municipal Accessibility. At the beginning of every panel, I remind you of the access guidelines. Raise your hand and I will listen to your question and repeat it into the microphone. I encourage our access monitors to help to run the microphone to those with questions. Thank-you for coming.

I'm pleased to see the turn out here. It's an acknowledgment of the work that the Steering Committee put into this. It is also heartening for the important process of "community development". One of the things to look forward to is positive change because people like yourselves who can identify barriers. The first panel is about some of those solutions. Ernie Parsons was articulate in setting the tone and benchmark based on the new legislation. In the City we are entering our 3<sup>rd</sup> year of identifying and removing

barriers. We work with an advisory committee, as does Queens, and the role they take on is they work with me for public consultations. They identify barriers. We develop a plan and then turn to the city - some of my colleagues here and ask them to operationalize these ideas. So, what we have today is a group of very motivated managers from the City of Kingston. I want them to introduce themselves. Each one will speak for about 5 minutes. Please hold all questions until all the panellists have spoken.

KRISTINE HEBERT - With culture, parks and recreation and prior to that I was the planning department. I am quite of the issues. I am trying to help identify issues in parks. There is a quick slide show on some of the improvements we have done recently. We are taking incremental steps. In the new year, parks, planning and accessibility are going to be in one division there - better for making things are looked after.

[Begins to show photos of park benches, picnic tables, playground swings].

This is Rotary Park - developed by Rotarians in the 70's. Last year, they celebrated and their biggest project was to improve the park. One of the things we identified was the paths through the parks. Money went to connecting the parking lots to the paths. Accessible play structure was given a face lift. It was accessible before. They are very generous. Accessible swings for the disabled were identified. Swing at the top is in place - there are 3 or 4 now. Both abled and disabled use them. From my perspective I think every park should have one of these. Two of the swings at the top and the accessible parking and the trail

along the shore line. Next, some more pictures from Rotary Park. There are a lot of simple solutions. One of the things is they construct the picnic table - add 12 inches to the end to make it accessible.

City Park - in 2002 we partnered with the radio stations they gave 50 000 towards and accessible play structure - very happy with it. The top slide is an earlier attempt for an accessible picnic table. This is a view of the accessible play structure. There is a phase two to this and it will be totally accessible. Phase 3 is planned as well. There is the sign that dedicated the play structure. Accessibility is water front trails and there are number of trails identified. We are trying to make them more accessible. This is behind the museum area. Community arenas all have doors that open by a button. Now sure if they open in the right direction. Challenged by older facilities. We go back to them to check when time and money permits. That is it.

SPEROS KANELLOS - Manager of Engineering (construction of new roadways and sidewalks, among many other areas). I would like to look at 3 areas, new sidewalks, audible traffic signals and "Safe Routes".

Sidewalks - About 15 years ago the City started concrete sidewalk ramps at intersection. In a few more years all will be completed. Taking sidewalks one step further - one of the concerns raised was how we finished the joints in our sidewalks. We did a pilot project where we broom finished it to shave off the bump. We are looking at where to put in wider sidewalks - on Wellington Street - 3 ½ metres now compared to about a 1 ½ metres. Also sidewalks - city was badly connected with sidewalks - in the west end and you

wanted to get downtown there was no sidewalks there. We just awarded a contract and we will have the first connection from Greenwood Park - includes two sets of traffic signals to accommodate pedestrians to cross Highway 15. Another new sidewalk project was surveying Bath Road for sidewalks from Harveys out to Collins Bay Road.

Audible Traffic Signals - Bath and Sir John A. - Looking for feedback - working for 1 year. We are relocating where the push buttons are - moving them to the edge of the sidewalks. Queens is planning to reconstruct University - looking at our second audible traffic signal there. Would like feedback on the signals.

Safe Routes - Another important accessibility initiative. Financial restrictions are at play so we want to establish areas that if you want to get into the downtown, develop a safe route - make it as accessible as possible. We would incorporate into all our streets. I would like your feedback. Thank-you.

KAREN KILLEEN - General Manager of the Grand Theatre. We are talking about a facility that is recognized and an emotional facility for the City of Kingston. I am going to start, just with a little story - years ago at Roy Thomson Hall in Toronto - new building. They did a lovely job in certain areas - ensuring all comfortable. On my second interview, the manager pointed to this large room - that's our coat check - able to hold 800 coats. I looked at it and looked at the ramp off one of the levels and I pointed and said what's that? He said that's our wheelchair ramp. So where 800 people are lining up you have 10 people who can't get out of the building. To this day, that access is handled by ropes,

and staff and there is nothing they can do about it. Physically it is built. How said, you bring an artist in to help with access, but no one looked at the front. We learn out lessons as we go along.

Inclusive strategy - A number of months ago, we had a session with the architect and Barry's committee and they want to know if the committee could come back to view the renovations. I would beg them to come back. They are dying to help me. The key in anything we do and this applies to municipal and private is to be proactive as opposed to reactive. If a situation we weren't aware of, pick up the phone and call and we will try and rectify. I want to find those problems first.

Physical accommodations - In terms of some of the physical aspects at the Grand Theatre, I will highlight some of them for you. 100 years old and so many barriers and situations were never addressed 100 years ago. Trying to adapt. If the Grand disappeared, to build a new one that would cause an uproar as well. Some things changed - no automatic doors, so have them now, make sure they open in the right direction. In the courtyard, we are reducing the outdoor space so anyone that does use that it's never perfect trying to keep it clean of snow, but by reducing it and putting the ramp inside the doors, less trouble with access and the smoking issues. The other features we are addressing are through the accessibility meetings - improved lighting, wider seats, physical size can also be a problem for people. So, I think making sure they are more comfortable, plus movable seats and more flexible with arms that can drop down, our wheelchair numbers on the main floor will be 8 - more than 10% of capacity. Being able to make the accommodation and all being

able to sit together. One of the changes is the new lounge space - also adding a chair lift to make it available to all. Washrooms - no coat hooks or shelves in there if not told this we may not have picked up on it. Signage throughout the building, doing improvements, our brochures, websites, people that are facing a problem or need some assistance quite often don't know how to find it. If you would like to have something dealt with - we are going to make that clear how the community communicates with the staff. You can do as much as the building allows you to do.

Training - I will skip to the last thing - most important - staff training. Someone who may experience a seizure - they may not need an ambulance, but if not trained to handle things, they aren't going to know. A lot we can do. Thank-you.

GREG MCLEAN - Supervisor of Parking Enforcement. Thank-you Barry. I will keep my comments brief. I will just run through a few of the changes we have made.

\$300 fine for parking - The most recent and visible was a \$300 fine for parking in a disabled space. There are signs on each space now. They are going to take note of the fine amount. Hopefully that will be a general deterrence to keep people out of those spaces. If they take a chance and get caught - last time they do it for sure. I'm happy to announce that the extra money - original fine was 100 - now 300 - mandated by the province. The \$200 above the original amount to go to an "accessibility fund" to be administered by others in the City. Quarterly contributions will be made to this fund, which is to be dedicated to enhancing accessibility.

Parking meters - We've been looking at improving accessibility - "Pay and Display Meters" require the parker to go to the machine and get a receipt and come back to the car. Didn't want it to be an onerous task to disabled - we have left a traditional meter at the disabled spaces so you have two options. We have looked at lowering those meters in the disabled spaces.

Looking at lowering all old fashioned meters. In front of Providence Manor, the new pay and display there we lowered it to make it more accessible. In terms of communication, we have come up with a brochure and put the information on the website - to ask them to leave the spaces for those who need them and the location of the spots.

Private property - \$300 fine isn't just public parking. It is also private parking spots. We will take a lead role to ask them to have the appropriate signage for the designated spots so there is continuity and there is a number of private property owners that can write parking tickets under a city by-law and they can write the 300\$ tickets as well.

BARRY - The floor is now open to questions from the audience. I invite the Accessibility Monitors to get the microphone.

QUESTION - There is a lump in the sidewalk on Weller and Compton - one by the units and one by the park.

SPEROS - If you do see lumps on any sidewalks in the city, please phone our customer service and they look into it. Get some more information - a street address, we will put it through.

BARRY - Citizens can directly communicate with our managers, you can call the client service phone number or myself or the advisory committee. All of those mechanisms find their way.

OTHER QUESTIONS: Grand Theatre - Any work to accessibility to the change rooms?

KAREN - No. The physical building because we are land locked, no changes on that part of the building in this renovation. We are looking at getting access from both directions and talking about how best to work around the fact we can't permanently change it. Trying to figure it out.

QUESTION - Rideau Street resident. Most drivers don't pay attention to pedestrians or people using assistive devices in Kingston. The City needs to address this problem by enforcing its existing bylaws. Cars will zip ahead of wheelchairs - inch at you. There is no consideration for you. On Ontario Street, there are a lot of people crossing and they have courtesy walkways and drivers don't pay attention to this.

SPEROS - We are challenged, because pedestrians only have a right to cross where there are signals or stop signs. We worked hard to come up with a solution for Rideau here. Under the Highway Traffic Act, the pedestrians do not have the right of way as in other provinces.

BARRY - Two more questions.

QUESTION - CFB KINGSTON - I am concerned about the signage (use of alternate format, locations/height appropriate for

people with various disabilities) and accessibility routes in buildings.

KAREN - Again, an answer to that kind of question - on behalf of the Grand, we need to take advantage of the help that is out there. Continue with community consultations. Ask the questions. We will be corrected if wrong. Take them out to the people with the answers. You will start to see improvements on the decisions.

COMMENT - [Brian Brophy, President of the Frontenac Kingston Council on Aging, speaks about a communications campaign their organization has recently launched, which address the misuse of designated parking spaces, called "Being inconsiderate does not entitle you to a disabled parking spot."

BARRY [repeats Mr. Brophy's remarks]- The Council on Aging has produced a paper that looks like a ticket. They are offering to provide people with these tickets to put on vehicles parked irresponsibly.

Now 12:03 - 15 minute break.

TIM - I will present the panellists with a gift bag. You will have an opportunity to ask them further questions.

BREAK - 12:05 - 12:20

**Keynote Speaker #3: Susan Scotti**

Our next speaker comes from Ottawa - Susan Scotti - Assistant Deputy Minister for Social Development Canada is our next speaker. Ms. Scotti was the assistant deputy minister for

homelessness. During her federal government career responsible for many national programs. Ms. Scotti joined the fed. Government in 1973 and has held many posts since. Prior to joining the public service she was involved with social work in Toronto.

SUSAN SCOTTI- Can all hear me?

[The following is Susan's prepared speech, and is not a transcript from the AIMTAR real-time captionist.]

Thank you for your kind words of introduction. I am delighted to be here representing Canada's Minister of Social Development, the Honourable Ken Dryden. He regrets he cannot join us and sends his best regards, and has asked me to deliver these words to you on his behalf.

I welcome this chance to meet with people taking action to advance accessibility for people with disabilities. It is a goal that we very much share with you in Social Development Canada and its Office for Disability Issues.

Let me start by congratulating the City of Kingston for adopting an official Accessibility Plan. It is a progressive plan which will help to remove barriers, not just physical ones, but also the invisible barriers that prevent the full participation of all citizens. I know that a few other cities have taken this sort of progressive action, and I hope that you are all part of a trend, and that many more communities will follow your good examples.

I also want to commend the Accessibility Advisory Committee of the city's Department of Community Services for organizing

this public education event which brings together such a diverse audience. Raising awareness of the challenges facing people with disabilities is extremely important in building momentum for action and identifying opportunities for change and what we can do collectively to address them.

I would also like to acknowledge the work done by Ernie Parsons, Parliamentary Assistant to the Minister of Community and Social Services, Sandra Pupatello and the Province of Ontario, which resulted in the *Accessibility for Ontarians with Disabilities Act* that requires all businesses and services to remove barriers to people with disabilities. This legislation should help to make significant improvements in the lives and livelihoods of people with disabilities.

#### **Where We've Come From**

Anyone who's been involved in disability issues for any length of time will tell you we have come a long way from where we were a generation ago.

It's hard to believe that, only 30 years ago, some children with disabilities weren't allowed to go to school with their siblings but, instead, lived in institutions far from their homes, families and friends. Even 20 years ago, disability issues were barely on the public radar. Whether you looked at access to transportation, accommodation, education or employment, opportunities for people with disabilities were severely limited.

That began to change with Canada's Charter of Rights and Freedoms. Canada's disability community played an instrumental role in 1985 in helping the Government of Canada shape the Charter's equality provisions, making our country

the first in the world to include disability in its Constitution. The recognition of the inalienable rights of people with disabilities - and our collective responsibility to one another - drove home that disability issues aren't about "us" and "them." They're about our families, our neighbours, our co-workers and, as we age, very likely about a whole lot of us.

Perhaps one of the greatest outcomes of the Charter was the awakening among Canadians that a person with a disability isn't someone to pity, but someone denied opportunity.

In the intervening years, we've learned a new lexicon, eliminating terminology that was as inaccurate as it was insulting. We've opened doors so children with disabilities now learn alongside their non-disabled classmates. We've removed barriers in many of our buildings and transportation systems to make it possible for people with disabilities to join the workforce. And we have capitalized on technology to improve communications and access to learning and employment.

Over the past 25 years, Canada has become recognized as a world leader for its income security programs, employment equity legislation, employability programming, tax measures, grants for post-secondary studies and community services that support citizens with a disability and their families.

But, as today's learning event makes clear, it's still not enough. Truly equality depends on the assurance of accessibility. And you are right: it goes beyond building a ramp. It is about achieving meaningful and measurable change in the lives of people with disabilities, from improved

employment outcomes, to accessible housing, education and transportation.

The federal government shares the view that accessibility includes, but goes beyond, building a ramp. Accessibility impacts so many aspects of peoples' lives - from learning to employment, housing and transportation. It is the difference between poverty and missed opportunity, and the chance for people with disabilities to lead full and rewarding lives.

### **Where We're Going**

Minister Dryden, the Minister for Social Development, has a vision for the future. He wants us all to create an accessible Canada - a truly accessible Canada - - where thanks to new understandings and attitudes, thanks to adaptation, thanks to technology, thanks to supports of various kinds, all people in Canada can live full lives in their communities.

The Government of Canada believes Canadians with disabilities must have the same opportunities as every other citizen to participate in Canada's success and to benefit from it. They need access to the supports that help them to reach their full potential as learners, workers, and family and community members.

This, in turn, demands increased understanding that accessibility is not just limited by physical disability. Overcoming barriers posed by mental and learning disabilities is crucial too. Just as important is recognizing and acknowledging the invisible barriers that exist, including the discomfort or fear that arises when people are confronted by differences they don't understand, or simply don't know

how to respond to. One of the major hurdles people with disabilities have to overcome is outdated attitudes and stereotypes completely out of step with reality.

We all have some way to go to achieve this vision, but we believe that we can get there if we all go together. The federal government is working in partnership with its provincial and territorial partners, the disability community, the voluntary and private sectors, and Aboriginal and immigrant communities on a long-term vision of inclusiveness and accessibility for Canadians with disabilities.

Minister Ken Dryden has committed to working with his federal and provincial colleagues, the disability community and Canadians at large, to ensure that removing barriers to participation in society is understood as a critically important issue to Canada's current and future well-being.

His vision is grounded in the recognition that we need to fully include people with disabilities in all aspects of Canadian society. Not only because this is right and just, but because people with disabilities have vast amounts of knowledge, talent and expertise that can enrich the quality of Canadian life. Our country's prosperity depends on the active participation of all Canadians, to the best of their ability, in our society and economy.

The Government of Canada is committed to the full inclusion of people with disabilities. They must have the same opportunities to participate in and benefit from Canada's success. They need access to supports that help them reach

their full potential as learners, workers, and family and community members.

We are currently examining opportunities to create large, highly visible demonstration projects, such as the Vancouver 2010 Olympic and Paralympics Winter Games, to show how we can achieve this goal. Governments at all levels, stakeholders, and interested others will be needed to help create an environment of possibility - to create the knowledge that this goal can be achieved.

The disability community has often reminded us that the problem isn't so much with a person's disability itself. It's about getting those without a disability to see and think about the challenges that exist, the importance of helping to overcome these, and valuing what people with disabilities can, and *already do*, contribute.

Minister Dryden has said that to create a truly accessible Canada, it is important that this goal be firmly in the minds of people with *and without* disabilities. It requires a genuine conviction among all citizens that an accessible Canada not only must happen, but *can* happen. It requires an environment of possibility and confidence. It requires a country that is committed to improving access and removing barriers as nothing less than a national project.

### **Conclusion**

So you see, improving accessibility and increasing inclusion isn't the exclusive domain of governments. That is why I am pleased to participate in an event like this.

While governments at all levels are making progress in many areas, we all know that major gaps remain. And these needs will only be met if everyone in the community gets involved.

Canadians with disabilities need all the allies and advocates they can get. Despite steady progress in the past few decades, far too many obstacles remain. Individuals with disabilities are still among the poorest members of society. Many continue to face discrimination, as well as the same transportation, accommodation, education and employment barriers they encountered a generation ago. And that's unacceptable in a society like ours.

We have to start thinking beyond building a ramp, although that's a good start. We all need to move much further and much faster in bringing down barriers and opening up opportunities for people with disabilities to ensure accessibility for all and to create an accessible Canada. To do this will require that we produce clearly articulated examples of how this has already happened in some communities, and I am hopeful that Kingston will be one of those communities.

Each of us has a role to play in achieving this goal, whether we are community leaders, employers, policy-makers, co-workers, family members or friends. I am encouraged to know that there are committed Canadians, like you, who are as determined as I am to take action on accessibility. I look forward to working with you to ensure that we succeed.

Thank you.

## **Panel #2: Transportation**

TERI HIBBS- Good afternoon. Welcome to our second panel of the day. Review the access guidelines. I will quickly go through them. One person at a time. If you wish to ask a question, hold it. I will have the panel speak first and then do questions. Please refrain from side conversations, use the microphone and face the audience and introduce yourself and don't cover your mouth and microphone amplifies papers and keep aisles clear, leave dogs alone.

Now my pleasure to introduce the Transportation panel. The three people are all experts and interested in transportation issues. We have Lou Carpentier from Kingston Access Services (bus), Malcolm Morris, Kingston Transit and Diane Revill from Ongwanada. Each will give a presentation and then questions.

DIANE REVILL - (from Ongwanada).

Overview - We are a non-profit organization in Kingston. We offer a wide range of services. 600 individuals and families. We have a volunteer committee. Affiliations with Queens and fully accredited. I am here to talk about Ongwanada's fleet - we have 24 community residences that we operate. In early 1990's they moved to a community based organization - several clients in the home based programs. Primarily vehicles are used to transport clients to the programs. They use our transportation for many visits to Doctors, excursions, leisure activities or special times to Toronto and Ottawa, and maintenance staff have vehicles that do the repairs at the 24 locations in the community.

Resources - One more small vehicle we use for administration. We have 35 vehicles - 10 of them wheelchair accessible. 12 -

ambulatory vehicles. We have housekeeping/cargo vans - 7 and 3 pickups.

We have faced a lot of issues with our fleet. Vehicles are aging - 7 of them over 9 years. 9 of them are 3 to 5 and 7 are under 3 years. They are an aging fleet. Wheelchair vans have less mileage. We have faced a lot of insurance costs. Since 99 - 2000 fiscal year - insurance up 57%. Our accident percentage - a good track record - they are inevitable. Primarily our wheelchair vehicles backing up into things. We have put on sonar backup devices - an audible device, but we still do have accidents. We have looked at the accidents over the years - all have to have a defensive driving course and an in-house course. They have to be trained to take a run on the road to be comfortable with the vehicles. Our maintenance and repair costs are high - \$32000 to maintain the fleet. Rising gas we can't control and this year \$26000 in gas. A significant amount of money to maintain.

Ongwanada bus drivers - No designated drivers. All are part of the direct care staff. Along with driving they need to do direct care and paperwork, so it is a strain on our staff. A lot of physical injuries to staff over the years due to the physical efforts of the jobs involved. Some of the other vans that are more ambulatory vans, there are concerns with clients with behavioural issues. Along comes this with our staff having Doctor's letters saying they can't transport clients. I am part of a transportation committee and looking at replacing our vehicles in the community. We have 10 wheelchair vans - \$58 000 plus tax for them - non-wheelchair van about \$28000 before tax. One of those wheelchair vans consumes about 25% of the funds we have available. My time is up.

MALCOLM MORRIS - I have been with Kingston Transit just over 6 years - our focus has been to provide more transit service to everyone and in September we started doing just that. To put it in perspective - 135,000 hours to be provided next year. So, having that back drop in mind and the focus is on more service on the street - I wanted to look at the past and today and what is planned for tomorrow.

Low floor buses - We first started purchasing low floor buses in '97 - 8 purchased. All since have been low floor accessible - it simply doesn't have steps a low floor bus. It is a redesigned bus to eliminate the steps. It is more than that. It is the interior features that distinguish it - aisle and door widths - some older ones have very narrow doors. There are guidelines that the bus manufacturers follow - 32 inch doors - ample room for a mobility device to clear it. Those are some key features, along with brightly coloured hand rails. There is lots of technical specs as well - 4 inches from the wall. We are continuing to purchase vehicles that have those small things that make a difference - interior lighting is important as well. The disadvantage of those buses is there are fewer seats. New have 33 instead of 53 on the older buses. We have increased that with new buses to 39 seats. That is what we have done in the past in terms of equipment.

Training - We are training our staff as well. We really need the culture and training to make that work - an ambassador training program. It is to provide bus operators with the skills to provide good operator service. We have delivered a "SkillForm" training program which focuses on disability awareness. Sensitivity training on how to accommodate

people. Recently Mike Murphy, from the Independent Living Centre, provided some training as well - we have a group that brings a customer perspective to us. We started last week with Mike who provided sensitivity awareness to the group and understanding some of the terminology and issues.

Present situation - delivering more and better service in the community through a business plan - we want to have some objectives and deliverables and define what we are doing. For today, we have committed to purchasing low floor buses as policy now. We have that now - a statement on the part of the city. Bus stop features - once we commit to transport them, they have to get to the bus stop easily.

Bus stops - We're now looking at the bus stop such as the surface and lighting around the bus stop area. We want to look at over 700 bus stops in the city and of course there has to be level area for those with a mobility device. Only 10% have a shelter now - target over 5 years is 30% - up to 210 - a significant investment. Terminals - one of the things is we need more and better terminals. Kingston Centre just finished - working well. First of many. Cataraqui needs work. Downtown can be better - over the next 2 years being looked at. Accessibility will be looked at.

We are continuing working with Lou Carpentier (Kingston Access Services) - we do that with one of our routes where Lou looks after it. We need to have a service that links well between the two. Sessions like this help us get there. We want to continue to work to fully accessible service. The method we have is to look at specific routes and build from there. We have worked well with the Accessibility Advisory Committee's "transportation" subcommittee to enhance or

accessibility. A public service is a reflection of what the community wants and our job is to seek out what the community wants. We have made incredible strides.

"Easier Access" bus route - The most visible effort underway is to run an accessibility trial service - we have done background work - to understand how many use the service now. We want to attract people to a specific route. The "Easier Access" Trial - next spring for ¾ months. The increased attractiveness of a more accessible service needs to be looked at along with the impact on our service. We are moving ahead with bus card alerting system for those with visual impairments. If not at the bus stop, the bus tends not to stop. That will alert the driver that the bus is to stop. I won't go into detail but, how do we secure mobility devices on a bus - either forward or rearward facing systems. The forward we have - the rearward is superior but the Highway Traffic Act doesn't allow that. We are trying to move forward with that.

I will close with a thought, the worst thing you can do is nothing - we hope to do the right thing. Thank-you.

LOU CARPENTIER - Executive Director for Kingston Access Services

Past - founded in 1967 - oldest in the Province - 38 years committed to transporting door to door on a first come, first serve basis. It was established as a non-profit organization. Began as a one bus operation. Volunteer staff. Firefighters were instrumental in the beginning. Used school bus was the first with a lift at the rear. It was a delivery van lift. We have a booth upstairs with old

pictures of these vehicles. Passengers were charged \$5.00 per trip in 1967. Bookings were 2 weeks in advance. In 1998 started servicing the rural areas of Kingston. So we now service the entire city.

Present - Present mission statement speaks for itself - provide service in a safe and courteous manner. As most of us are aware - Kingston is a catchment for medical treatment in the area and a large number of retirees. A large number are wheelchair users. Harmonized special transit fares to harmonize with Kingston transit - those with disability should not pay more than others - currently \$2.00. We have 20 vehicles - 6 wheelchair passengers and 4 ambulatory passengers. We expect in 2005 - 300 to 350 trips per weekday - a total of 85000 in 2005. Same day are possible for trips if available. We cannot meet all demand. We do track the stats and in 2004 we refused 2685 requests.

Future - estimates of the population with disability - reliance will continue to grow in our community. We anticipate additional requests for transportation over the next few years. Provincially and municipally we are looking at our eligibility criteria. We will continue to work with Malcolm and meeting our unmet demand. By using the gas tax rebate we will continue to work on this. We have a booth upstairs with the contact information and our bus is outside if you would like to look at it.

QUESTION - Focusing on rear facing restraint systems - why are you choosing that as your preference.

TERI - When others are using forward facing, why are Kingston saying they are picking the rear facing?

MALCOLM - Really it's a matter of volume. Lou mentioned last year, 85,000 trips - we did 3.1 million. Rear facing is much quicker for the passenger and bus operator - no operator intervention. There is a back board and then there are lateral supports and it gets away from the four- or five-point securing that takes time. There is independence associated with that. Hamilton, Kitchener and Ottawa all use rear facing.

TERI - That was illegal so how are they using it?

MALCOLM - There have been orders laid against them and they are in contravention of the Highway Traffic Act. We have to step back and look at this. Some good progress.

TERI - Why only one bus on Sunday for wheelchair users? When are the other buses going to be available?

MALCOLM - We are working on an action plan - historically with limited resources we didn't want to duplicate services but we need to do more because of the demand. We need to develop a plan to get there. I think it will lighten the load. We are developing a plan in terms of buying more equipment. We need to run the trial first. Unfortunately, no date, but we are planning to develop it and work towards it.

LOU - one on Sundays - we in fact run 3 until July and then added a 4<sup>th</sup> from the gas tax refund. We are demand driven. If one or two can't get a bus, we can't just put an extra bus on. We have to look at the entire area. You can give it a shot up to the day of.

QUESTION - you are asking - you had a call at Volunteer Kingston from someone who got a subsidized bus pass and can no longer get one because not on ODSP

MALCOLM - I am not sure of the exact details, but there were occasions when passes were issued that should not have been. Now that program is with Kingston Transit, we review all applications - they must be receiving assistance for a physical disability to be eligible.

QUESTION - how do you overcome that?

MALCOLM - She is paying what everyone else is paying. We need to have a defining point - she needs to be receiving some assistance.

TERI - If someone who is on subsidy and has vehicles they would qualify for a pass where someone working part time does not qualify

QUESTION - 238 000 Ontarians are on ODSP - just in terms of rear facing seating - one of the other things was the fact it is being used in a number of different areas is because of speed of access and it is actually safer than the 6 point or 3 or 4 point tie down. Question on how many are accessible and Lou you told us the number of trips \

TERI - narrow criteria of ODSP versus the number disabled and the rear facing seating and you asked for Kingston Transit how many are accessible and then Lou the cost per trip to the service.

MALCOLM - 41 in fleet and 16 are low floor

LOU - The cost to the service is approximately \$16 compared to \$2.00.

QUESTION - IN Comparison to transport on same bus

MALCOLM - \$3.50

QUESTION - (from Jeanette Parsons). Useful information on the Highway Traffic Act - Human Rights Act tends to override the legislation that is discriminatory. Look at where it fits. In B.C. a case that went to the Supreme Court of Canada where a person had trouble with peripheral vision and they denied him a licence. The Court told them they had to find a way to test for this vision and not deny him a licence.

QUESTION - With the Kingston Access bus, do you get a portion of the gas tax refund? I thought it went to the city.

LOU - Yes, when the provincial ministry responsible set this in motion - it was for conventional and special transportation. There is a component of ridership to it. Each municipality got a rebate for conventional and specialized transit. Our municipality shared it with both. 3.1 million versus 85 000 - they got about `1 million to our 43 000\$ refund.

QUESTION - Thanks Lou for last night and the access bus. For Malcolm, how long before accessible transit buses will be up and running so people don't have to wait up to 2 weeks.

MALCOLM - Trial time next spring and then and action plan to phase it in over time. 16 buses are low floor. If successful in convincing the government to change the Highway Traffic Act we will change them to rear facing. What - it seems to me your access is Kingston access Service. I heard you can't get a bus.

QUESTION - Spontaneous is important.

TERI - Thank-you all. We have a gift bag for each of you.

BREAK: 2:00 - 2:15 p.m.

### **Panel #3: Safety**

BONNIE CARTER - I am an employee at Rideaucrest - nurse here. I am happy to speak to you on safety in your home. It's a priority for all of us - I am more familiar with the elderly. I am vertically challenged - shelving is not accessible for me - I can't reach them. I am well balanced physically speaking but for someone with a mobility aid it poses a hazard. Same with countertops - it's about reaching over equipment to work on the countertop. We know about raised toilet seats, but there are many other things like shiny floors which create glare. Our tolerance diminishes as we age and you can't see the differences in floor heights. Someone with a mobility issue before it's a big thing. That can throw someone off. I am not used to sitting still this long. Scatter mats are bad for someone sliding - to get up and stand and have a slide is a hazard. Baby powder is a hazard in the home - it's nice when sweating, but we have found if you spill it on the floor it is slippery. We don't allow it to be used here because of the fall potential. Socks - does anyone sleep in their socks? When you get up in

the night to go to the washroom, the socks will slide - a common hazardous practice with mobility issues. Put on a good slipper instead. We find we don't see pale colours as easily as we age. Staff don't wear the colours they used to because they see them all as beige. If you want something to stand out, use a bold colour. Our hand rails, we are redoing them for that reason. Harsh lighting creates shadows. It is hard to see between shadows and the real object. You may reach for the shadow instead. Good lighting is crucial. Pupils don't respond as quickly and momentarily can be blinded. We think we have a safe house, but when you get out of bed with socks on the scatter mat and the bathroom isn't large enough for mobility equipment. You have to struggle to get into there and those are some things common in the average residential home. If you have to move your crutch you have an increased risk of falling. Round door handles are hard to use. Can you reach the light switches? What happens if you have a fire and you can't hear? How can you find your way out if you can't see? Sometimes we use a vibrating pager here to help. New signage here that glows in the dark. Cognitive challenged people - are sometimes confused with heavily patterned floors and they will try to step over things on the floor. People with no depth perception tend to bump into narrow doors.

ROBB KIDD - I am the Assistant Chief Fire Prevention Officer - Kingston. My expertise is in the field of fire safety. I have my own personal experiences with disability. I went shopping with special glasses to affect my vision. My late wife I learned a lot from her disabilities. Her voice was soft and could only ask for help with great difficulty. They were just as likely as the rest of us to be involved with everyday life experiences. I respect the theme of this

forum. For more than 25 years I have concentrated on getting people out of buildings rather than in. Risk of death from fire is often greater for those with certain disabilities. It may delay prompt recognition of a danger. Where the apartment on fire is not occupied, the fire alarm in new apartments has 75 decibel sound level. How will these people be alerted that can't hear this? A person with poor vision will hear the alarm but will he know where the alternate route is located in trying to exit the building. The instructions on how to may not be visible? What about when the elevator is your normal way in and out? What happens when the stairs are not a viable alternative? It is not viable to have people avoid any egress challenges. They will find themselves in the same situations as others. Smoke detectors and alarm systems employing probes will help awaken people. Fire safety signs - now in Braille. What happens when a fire but I am not mobile to get out? The answer is fire safety planning. Provisions in the plans for those who have disabilities. The systems they live in must to be recognized. There may be access to an area of refuge such as a stairway or stick to the first floor of the building. Planning escape is the key - planned around your capabilities. Know 2 exits from every room. Using a walker - check the doorways to make sure you can get through. Understand ways to protect yourself in the room. If you do smoke, protect your clothing with a flame retardant pad. Don't isolate yourself from a fire safety drill. Practice the plan. Keep a phone near your bed - TTY for hearing impaired. Seek assistance prior to any emergency. Kingston Fire and Rescue can be reached by 911 - available for TTY - staff can meet with you to discuss your concerns. They may send people to review your situation and there is no fee for this. What I have done in the handouts is my phone number.

Contact us at anytime 24 hours a day. There are officers on shift to help you out. Thank-you.

HELENE CORCORAN - I can't possibly hold this. I am French and talk with my hands. I am a Sergeant with the Kingston Police. Almost 2 years ago, Victim Services position created and asked to take over disability issues as well. I am going to share a few things with you. I have a story. I am a trained crisis negotiator. I went to a call of someone who barricaded themselves in a room and they were deaf. It makes for a few difficulties. I wrote a lot of notes. She came out. I went to the Chief and asked if he would support me in American Sign Language and he agreed and sent me for 77 weeks of American Sign Language courses. We often deal with persons with disabilities. We are trying to be as accommodating as possible. When first asked to talk about it, I realized it's such a diverse group with many disabilities. It is pretty difficult to talk to safety issues - different issues. I have brought a couple of pamphlets. It says Ontario Women, but it has a ton of good tips to make sure you aren't a victim of a crime. I brought a home security challenge as well to reflect to level of security of your home. I have a video - For Safety's Sake - put out by the Calgary Police and talks about tips for many disabilities. I have a copy of the summaries of the tips provided in the video. If you have questions later, let me know on that. Although some people will disagree, there is a lot of research to show people with disabilities are more vulnerable. May not be able to protect themselves. So when I looked at the stats they surprised me- quite interesting. Rates of crime for mental disability - 4 times more likely. They are the victims of robbery 12.7 times more than normal. Women - 34% more likely to be assaulted. And 1 1/2 to 2 times

more likely to experience any kind of abuse. 50% report childhood sexual abuse. They tend to be victimized by people they know. Over 70% occurred in their own home or family's home. Different than the general population who are generally people they don't know. 28% were acquaintances. Generally speaking when dealing with a victim of crime, we want to make them as comfortable as possible. This is obviously an issue if that person who is there is actually the offender and they don't disclose everything to the police. The Kingston Police is committed to removing barriers. They have 9 separate policies dealing with disability issues. We have 24 hour access to interpreters. We have officers trained on American Sign Language. In addition, we can make referrals to over 40 organizations that deal with disability. Our current building is wheelchair accessibility- new building is excellent for access. I anticipate some questions about Police or Highway Traffic Act - happy to answer those.

QUESTION - I got a thing on my door - we had a fire drill and the owner was upset that I had a door stopper.

ROBB - The short answer is blocking the door open is illegal and it is unsafe for a good reason - Extencicare fire in 1980 and mostly because the door was left open. Smoke developed so quickly, it filled the corridor. I understand your situation. All I can suggest is if you have lots of money, you can purchase and electric hold open device. It releases when the fire alarm is activated. Rather than a wedge or a carpet, if you use a lightweight string on a hook, they can quickly close the door - that's an acceptable midway.

QUESTION - Say a fire in my place, and no exit to get out, what do I do?

ROBB - To prevent the fire in the first place is the bottom line. You're worried about getting tired. 40% of people who die in fires are using smoking materials. Alcohol is also a factor. Electrical hazards are often fix-it yourself situations - do away with those. Smoke alarms in all your rooms or if you think you can't get out readily then one in each room.

QUESTION - Elevator breaks down almost day or you get stuck in it.

ROBB - There's a lot of components to the answer - would like to talk to you later. In the fire situation, never lose the elevator. In a high rise, firefighters can come to you. You have to identify an area of refuge - wait for assistance there. The firefighters will check to see who needs assistance. Building systems can be effective. You need to get out even in a power failure. How will you get assistance?

QUESTION - Is there anything the City is doing to illuminate public areas in light of the higher incidents against people with disabilities.

HELENE - We would have to identify specific areas of high risk...

QUESTION - Like parking lots where people could be confronted.

HELENE - Yes. The only place I am aware where Emergency "Pull Stations" are available is on-campus at Queens. The City of Kingston hasn't installed these devices on its public property.

BREAK 3:00 - 3:05 p.m.

#### **Panel #4: Accessibility Audits**

BARRY KAPLAN - On the table there are good resources in terms of bricks and mortar assessments and typically communication is one thing we could all work on and there is a booklet called "A Way with Words and Images" there on the table. "Ability" magazine also available - a number of excellent resources - all sorts of information available. For people encountering barriers already.

Okay, onto our panel. What I've asked our Robert to do in general is an overview of the 'bricks and mortar" evaluation of an accessibility audit. Mike will talk about the "training" issues. Jeanette will talk about the "political support" that you need to implement barrier removal.

ROBERT HUNN - Planning consultant from Toronto. Identifying our clients - clarifies with Jeanette what is deaf, deafened and hard of hearing. Mobility impaired covers a whole range of issues. Difficulty in walking, slow ambulation, crutches, walkers, wheelchairs, scooters. Okay, access audits provide the basis for improvement. Since last year every municipality has to have an audit annually. Recommendations must be prioritized. Good to note potential long and short term solutions to problems. Important to survey building staff to know what has been done and what is planned for the future. Measurements must be done by trained individuals.

Every checklist is tailored to the building. Use expertise available in the community. Don't reinvent the wheel. Typically 200 to 400 questions for every building are asked. Some of the key elements - talks about entrances, counters, height for filling out forms, waiting areas, reception areas, signage and way finding and is it clear? Fire and Life Safety - use the stairs. Look for areas of refuge on the same floor. Heritage problems - a unique problem - after the audit has been completed - decide what to do without destroying a portion of the building when designated. Special care needs to be taken. Dignity of people must be respected. New alternative access point must be available to all visitors and new accessible toilets should be close to other. Should be unisex washrooms for caregivers to allow caregiver attendance. When a retrofit is too great, most historic buildings work to accommodate.

MIKE MURPHY - Accessibility Audits from a community perspective. I would like to give you a sense of what I'm going to talk about - it's a tool for change and the need to develop it as a preliminary step. I want to talk about the benefits of being an accessible community and then the next steps to move forward. Accessibility audits are a mechanism to ensure people with disabilities can participate - our goal. Can be used to ensure compliance. That's needed and penalties in the legislation recognize that. Look at it as a community development tool of community standards. Before we can move forward, we need to look at common definitions and understand. They may have different definitions to different people. In order for audits to be effective, the community needs to development common understanding of definitions - what is meant by accessibility? It allows all to participate - all citizens. That's where we need to ensure that

accessibility audits look at all disabilities. We have to define what we mean by barrier free design for all types of disabilities? What does it mean for each disability?

Second, we need to understand what we mean by disability. From my perspective, one cannot participate equally with others in the community. It is not a bio-medical definition. It is a participatory problem. What needs to change is society's attitude towards it. Then we need to talk about the community accessibility standard. You have to develop a rule to allow someone to access the whole process from parking to the walkway - everything. The other accessibility have to be around your policies and procedures - removing barriers. The standard that I guess I promote is not only including people with disabilities advising, but also people with disabilities engaged in rectifying the issue.

Model we developed - just to know that our access guide - a couple of different versions that have developed - it does address - not in a comprehensive way but it address removing barriers for those with disabilities. We talked about what the principles were and standards that worked for everybody with all levels of disabilities. The information should be accurate, consistent and comprehensive and there are times when you need expertise, but it starts and ends with people with disabilities that need access on a daily basis. At the centre, we have went through a staff training on accessibility audits including universal design theory and the legislation and it speaks to the details of the weight of the doors and ramp slopes and there is 3 places to go to get that - the Building Code, Canadian Standards Association and their information is used by most for disability accommodation these days and then moving onto universal design for all people. Once the staff were trained, we then included volunteers and did some training for them to go out

and conduct the audits. We look at the six areas, parking, walking, entranceways, washrooms etc for accessibility. In our guide, we narrowed it down to 3 levels - either accessible or not. For wheelchairs, should be able to access those facilities. We assess them at 3 levels when we do the audit. Technical definitions we audit there. Walkway is it paved and ramped properly? So, if it's accessible and someone could navigate all 6 areas, is it rated accessible. If you had a problem in one area where one person could assist, we talked about that as you would need a friend. The place not accessible we called it G - for bring a group with you - not accessible. An accessible community promotes many things. Next step is for this community to build a strong community audit tool. The community needs to develop the standard. What will work with the private sector? We will all know it is truly accessible when it says so. We need to engage the disability community in a meaningful way. You need to create awareness and buy in. We need to commit to a process that is ongoing.

JEANETTE PARSONS - I am a program coordinator of accessibility at Queens University. Barry asked me to talk about accessibility and how do you get the support you need to further accessibility. I thought I would start off giving you information about Queens - easier to understand this. At Queens 16 432 students, 4000 employees, 650 million \$ a year budgets, 175 departments, 17 faculties/ schools. At Queen's we get a budget and that is dispersed amongst the various departments and they make their own decisions. We develop policy at the top level, but still a lot of implementation across the departments. Over 5.6 million square feet of building space. How do we get more coordinated for dealing with the Ontarians with Disabilities Act at first. Rather

than looking at it from the University level we went to the World Health Organization. We broke down into five categories. There are huge issues at Queen's over attitudes and beliefs - new people every year. New seniors at the top level and they bring a lot of ignorance around accessibility and how it needs to be present in the work on a daily basis. Queens is one of the older universities in the country. However, it doesn't mean that when faced with making building accessible we have to preserve the heritage and offer accessible services. Some policies that evolve - students were missing a midterm and then a full weight applied to a final exam - not a bad thing for everybody but for someone with a disability and that being why they missed the midterm are faced with extra stress. Relationships and support are important and products and technology and website accessibility - 17,000 websites owned at the university. A huge challenge to monitor them and implement guidelines for that. Next 2 slides, some of the goals they have worked on over last 2 years. We discovered over the summer that tour guides were not given information on accessibility at the university. We need to work to make sure it becomes part of how campus is thoughtful. We had a committee before the legislation was in place. These are some of the people that sit on that committee - people who can influence decision are important to be on that committee. Employment equity and principal's office, important to have them. Now in the name of AODA the legislation is there and the Human Rights Code and we still have to be constant in reminding people at the University. Let's say you are a math club and want meetings every couple of weeks, you have to reserve a room - and there was no consideration given to accessibility of these meetings. At the top level where thinking about booking the rooms was an issue, no one thought of making it accessible.

I have to solicit support and go about training - awareness training. Last October I think I hit it right - Queens is a Board of Trustees so it's an impressive group of people who are very influential. We were invited to make a presentation. I didn't feel it was going to make an impact. I am skilled at interviewing people on their strengths. I interviewed seven people on who was most influential in their life. At the end of the legislation presentation to the Board I presented the slides on the people I interviewed. They were there and standing up and saying what their disability was. The message I was trying to get across was if they didn't work harder at accessibility they were going to miss out on those people. By the way, I am deaf with a Cochlear Implant. Without those people with disabilities, the university is going to miss out. Some of my efforts to get to these really highly intelligent people. When deciding on new courses, make sure accessibility is on the table.

QUESTION - When judging accessible in a room - often they only consider one or a few disabilities.

BARRY - A lot of things that aren't inclusive.

ROBERT - There is a problem there. The building code is the standard. The CSA is the one we like to use. The AODA - about two or three years until standards will be in place. The American ones are good as well. A bit of a mess now.

QUESTION - Learn by the mistakes and going ahead with making standards.

BARRY - Ernie Parsons mentioned the standards committee - first two are transportation and client services and I expect

the other built environment and communication and their plan is to recruit people to come up with some system of guidelines that will be thrown back to those sectors for consideration in a particular policy segment. A 20 year time frame.

QUESTION - How much sharing is done now between municipalities of guidelines available? In London and Guelph they have something posted on the internet.

BARRY - A number of cities who have high standards that they impose on the construction of buildings. Is there any sharing or any requirement to share it?

ROBERT - Peterborough has a good plan.

QUESTION - Is there focus on not reinventing the wheel?

BARRY - Ontario Building Code is universal for the Province now. City of Kingston using the CSA guidelines. London, Peterborough, Waterloo have their own variations of that but no consistency at this point. The Province is going to tackle it on these 5 areas mentioned by Mr. Parson. Businesses want a level playing field. What they want to see is a process where all have plans in place to eliminate barriers that are reviewed regularly. After the government says what is going on and they fail to comply, they could be liable of fines up to \$100,000.

QUESTION - Any way to convince my Doctor to have his office accessible?

JEANETTE - At Queens we hate to hit people over the head with a Human Rights Code. We go into meetings over issues at Queens and I reject the Ontario Building Code as a Defence by the Human Rights Commission. I do not refrain from referring to the legal obligation and advise senior people that if they chose to ignore it they may be liable down the road. I sent an e-mail to the new Cineplex Odeon on Gardiners Road asking if they had captioning available. They said they were working on it. I wrote back with the Human Rights information. I didn't know what my rights were because of ignorance. I was denied a position because they thought a TTY user didn't fit with their business. Lay it out on the table.

QUESTION - I went to file a complaint with Human Rights and they were intimidating. I have a lawyer. Speak up. You do have help.

BARRY - She has launched a human rights complaint and initially found it daunting on the advice for support for a lawyer.

QUESTION - I found out through a roundabout way. Human rights can be intimidating.

QUESTION - How do you overcome the attitudinal barriers?

MIKE - Hit them over the head. What we found works is education in terms of someone with a disability you are in that business all the time. Engaging in discussion and communicating and making sure all the information goes forward. Help break down some of that fear. Engagement in the community. I think not being afraid to tell people like

it is. People with negative attitudes their mind is fairly closed.

ROBERT - Be a positive role model.

JEANETTE - It is an ongoing process and it is not going to end. Doing this work for a very long time. Look at the kind of discrimination that women faced for a long time. I remind you at Queens we do lots of things - senior people on wheelchair tours for example. It's an ongoing issue to make sure accessibility is on the table when making decisions.

BARRY - I will call on Tim to close out.

### **Closing Remarks**

TIM - Thank-you. AT least we enjoyed the sunshine. Keep looking at the website. If interested in being involved with the Accessibility Advisory Committee - contact us. Have a safe drive home. Thank-you.