



Accessibility Plan Multi-Year Plan

For a five year period as of January 1, 2015

Updated December 2016

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1.0 Executive Summary

The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation. To this end, the AODA requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public.

This annual plan for 2016-2017 has been prepared by Royal Victoria Regional Health Centre (RVH) staff and reviewed Accessibility Committee of RVH. The plan has been approved by RVH Senior Leadership Team. The plan describes:

- Barriers identified and completed by RVH in the past
- New barriers identified to date
- The measures that RVH will undertake during the year 2016-2017 to address a select number of these barriers

The purpose of this plan is to identify, remove and prevent barriers to people with disabilities who live, work in, or use the facilities and services of RVH, including patients and their family members, staff, healthcare practitioners, volunteers and members of the community.

The Accessibility Committee has identified many barriers to persons with disabilities. This year the specific focus will be on meeting the standards related to Customer Service.

Ontario Regulation 429/07 Accessibility Standards for Customer Service came in to effect in 2008, and Ontario Regulation 191/11, Integrated Accessibility Standards became law in 2011 and included standards for information and communication, employment, and transportation.

2.0 Objectives

RVH is committed to:

- The continual improvement of access to hospital facilities, policies, programs, practices and services for patients and their family members, staff, healthcare practitioners, volunteers and members in the development and review of its annual accessibility plans
- The provision of quality services to all patients and their family members and members of the community with disabilities

This plan includes the following objectives:

- Describe the process by which RVH will identify, address and prevent barriers to people with disabilities
- Review efforts at RVH to address and prevent barriers to people with disabilities over the past year
- Describe measures RVH will take in the coming years to identify, address and prevent barriers to people with disabilities.
- Describe how RVH will make this accessibility plan available to the public

3.0 Accessibility Committee 2015/2016

Last Name	First Name	Title	Department
Burke-Jorasik	Rhonda	Speech-Language Pathologist	Children's Development Services
Caldwell	Don	Network Administrator	ITS
Cocking	Jane	Manager	Corporate Communications
Cerilli	Andrea	Administrative Assistant	Capital Planning and Redevelopment
Dixon	Claudia	Administrative Assistant	Security and Locating
Fagan	Lecia	Project Coordinator	Capital Planning and Redevelopment
Golding	Jon	Hearing Aid Dispenser	Speech and Hearing
Hallman	Dave	Coordinator	Business Development Office
Jay	Dawn	Clerk	Imaging Services
Knight	Lynda	Patient Representative	Patient Safety, Quality and Risk Management
Durand	Christine		
Laycock	Iris	Strategy Team Coordinator	Organizational Development
Mayes	Martha	Manager	Central Outpatient Registration
Norton-Harris	Peggy	Regional Program Manager	Canadian Hearing Society
Osgood	Peter	Director (Committee Chair)	Capital Planning and Redevelopment
Purdy	Rob	Operations Director	Facilities and Food Services
Johnston	Jeanette	Manager of Professional Practice	Interprofessional Practice
Snider	Patti	Quality and Risk Coordinator	Patient Safety, Quality and Risk Management
Walsh	DoDee	Coordinator	Volunteer Resources

4.0 Strategic Plan

Vision

Make each life better. Together

Mission

Exceptional care is our passion.
 People are our inspiration.
 Safety is our promise.

Values

Work Together, Respect All, Think Big, Own It, CARE₂

WORK TOGETHER
RESPECT ALL
THINK BIG
OWN IT
CARE



MY CARE

Patients and their families are at the centre of RVH's Strategic Plan. It is a plan rooted in the belief that every patient will have the best possible experience in our health centre. It is a philosophy we call "**MY CARE**" and it's this focus on patient and their families that drives our entire plan.

What is MY CARE?

RVH will ensure your CARE is the best, safest and centered on you. Our **MY CARE** philosophy means we will think **THING BIG** and exceed your expectations. We will treat you and your loved ones with courtesy, dignity and **RESPECT**, while being responsive to your unique circumstances and cultural needs. We want you to be a partner in your care. We will listen carefully to you and keep you informed about your condition and treatment, so together, we can make the best decisions. We will **WORK TOGETHER** to coordinate your care – inside and outside our facility – and we will **OWN** our decision and behaviours. Our unwavering focus will enable us to Make each life better. Together.

Focus on MY CARE

- With patients and families as partners, develop and implement our **MY CARE** philosophy where patients are at the centre of all we do and are informed and engaged in planning and decision-making
- Smooth transitions for quality, timely care in the right setting
- Support early planning for appropriate and compassionate end-of-life-care
- Ensure integrated, continuity of care for patients with chronic disease
- Improve access, education and engagement of patients and families through technology

Drive Clinical Excellence

- Exceed all safety measures
- Implement previously-approved regional plans for: advanced cardiac, child and youth inpatient mental health and gynecology cancer services
- In partnership, established a new regional clinical strategic plan
- Collaborate on the development of an ambulatory care strategy to contribute to a quality and sustainable health system
- Optimize technology to enhance coordinated, safe care and timely, accurate clinical information



Value People

- Recognize and support our staff, physicians, volunteers and students in achieving their best while sustaining a culture of respect and trust
- Be a healthy workplace to increase engagement and promote work/life balance
- Be an organization with a strong commitment to learning and personal development that supports innovation and creativity

Accelerate Teaching and Research

- Create a comprehensive vision for teaching and research that strengthens our new clinical strategic plan
- Pursue purposeful partnerships to advance our teaching and research mission
- Build on our unique strengths and expertise to provide the highest standards in teaching and training for future generations

5.0 Description of Hospital

RVH is a regional health centre in Barrie, Ontario, located 80 kilometers north of Toronto. As the largest hospital in the region of Simcoe Muskoka, RVH's team of over 350 Physicians, 2,500 employees and 850 volunteers provides exceptional care and specialty services to almost half a million residents, including cancer care, stroke services, orthopedics, intensive care, mental health and interventional radiology. RVH is focused on delivering high quality, safe care that puts patients and their families first.

RVH's \$450 million expansion, which opened in 2012, has doubled the size of the existing hospital and includes:

- The Simcoe Muskoka Regional Cancer Centre
- 101 new inpatient beds, including a dedicated Cardiac Care Unit for critically ill cardiac patients
- The Emergency department has tripled in size and includes a trauma unit, isolation ward and mental health crisis team
- The Imaging Services department has doubled in size to increase patient flow and privacy
- Newly expanded and automated Laboratory
- Two new fully integrated Operating Rooms which are larger than existing suites for complex surgeries, bringing the total to 10 Operating Rooms
- Expansion space for two future patient care units

Also, RVH completed construction of Rotary Place which includes Rotary House, a residential lodge for cancer patients and their families who live outside of Barrie.



6.0 Current Identified Barriers

The plan is to have a process to establish means and ways to identify, quantify, prevent or remove barriers. These barriers can be identified as:

- Physical / Architectural
- Informational / Communicational
- Attitudinal
- Technological
- Policies and practice

6.1 Barrier Identification

Methods available for identifying, tracking and receiving identified barriers:

- Identification of potential accessibility issues will be identified by the patient representative office through the incident Safety Learning System (SLS) reporting software module
- Feedback from volunteer resources, parking, security and business development services
- Interactive feedback via RVH website www.rvh.on.ca
- Identify barrier by completing the facility audit using all the members of the accessibility committee
- Feedback from human resources team and support staff

6.2 Barrier Prioritization

Process to be used in assisting the priority of each identified barrier identified:

- Legislated
- Frequency of stakeholder feedback
- Population affected by the barrier
- Practicality of a solution to be implemented
- Work around to avoid barrier
- Available resources/capacity and remove barrier (cost/construction/phasing/timing)
- Risk posed by barrier
- Coordination with other renovation projects

7.0 Current Identified Barriers and Multi Year Annual Plan (MYAP)

This identifies the list of current barrier by type and proposed resolution to remove each barrier:

Type of Barrier	Description	Strategy	Timeline 2015-2020
Communication	Lack of visual alert to fire alarm in original building	Visual alert to be installed that would function during a fire alarm	New facility has strobe lights interconnected with fire alarm (F/A) system. Include new F/A systems for new Unit Refresh and renovation plans
Policies and Practice	Update Disability Accommodation policy and procedure	Draft policy and procedure in final stages of approval processes.	Completing by 2016-2017. In final stages of approval
Communication	No TTY service in Emergency department. Not available	One TTY at Central Registration only, investigate with Bell about modifying payphone in Emergency to TTY	Contact Bell Canada to request device location revisions for 2016/2017
Physical	Public washrooms without power assisted doors	Prepare a multiyear plan to secure funding to install power operator on an annual basis	Include into annual capital /budget to allocate funding commencing with 2016/17 fiscal
Physical	Public washrooms have manual flush valve mounted perpendicular to wall behind toilet	Retrofit water closets with automatic flush valve	Include into annual capital /budget to allocate funding commencing with Fiscal 2016/17. Include modification as part of unit refresh program
Physical	Missing knee hole space for public when at central registration stations	Plan for accessible modular furniture	Make revisions when the department is located to it final location
Communication	Missing or lack of way finding for accessible facilities	Update signage in areas identified as under serviced	Annual signage review process to include updating or adding required signage 2015-2020
Physical	Patient Services Entertainment System debit machines too high for access	Update system at end of life for contract	Procurement policy updated to include all new kiosk purchases/contracts to meet accessibility standards. 2016/2017

This identifies the list of current barrier by type and proposed resolution to remove each barrier:

Type of Barrier	Description	Strategy	Time Frame 2015-2020
Physical	Coat hooks mounted in original building public washrooms are mounted too high	Itemize list of rooms and place work orders to lower the hooks to compliance height	Include in routine maintenance work plan 2015-2020
Physical	Power door operators on public access areas, including original building public washrooms	Identified locations and commence prioritization plan for upgrades	Include into annual budget strategy to allocate funding commencing with Fiscal 2017/18. Make part of the annual refreshing program
Physical	Missing automatic flush valves on public water closets	When planning updates to public washrooms, include electronic flush	Make modification as part of the annual refreshing program
Communication	Missing or lack of accessible signage identifying Accessible entrances to facility	Update signage in areas identified as under serviced	Annual signage review process to include updating or adding required signage 2015-2020
Physical	Missing tilt mirrors in original building barrier free washrooms	When planning updates to public washrooms	Make modification as part of the annual refreshing program
Facility	Provide textural or bright colour changes at floor levels	Notice or rumble strips to identify stairs or change in floor. Contrasting floor signage for colour blind	Augment additional floor lines to include visual cues rather than colour in 2016/17
Customer Service	Lack of public information systems for way finding for visual or hearing loss	Way finding system uses new technologies to align smart devices and patient portal and RVH way finding app	As part of the new MEDITECH upgrades and related tie ins planned for 2017/18 Cancer Program trialing a bright colour badge for patients with hearing or visual loss.
Communication	Public documents and communication written in plain language and available in accessible format	Include notices on RVH website on methods to access materials in an accessible format	Include messaging at the main screen of the RVH website in 2016/17
Communication	Lack of visual alert to fire alarm system in original building	Visual alert to be installed that would function during a fire alarm	Include modification as part of unit refresh or any new projects.

This identifies the list of current barrier by type and proposed resolution to remove each barrier:

Type of Barrier	Description	Strategy	Time Frame 2015-2020
Physical	Addictions and Detox: Washrooms, shower, kitchen space, sleep facility, reception are not barrier free. Entrances lack power operators	Identified locations and commence prioritization plan for upgrades	Include into annual budget strategy to allocate funding commencing with Fiscal 2017/18.
Architectural	Addictions and Detox lacks elevator access from lower level to main floor	Determine facilities' future use and determine if spaces will be clinically linked	Master Plan/Master program to determine corporate direction Fiscal 2018/19
Informational	Addictions and Detox and off-site Dialysis has an absence of wayfinding or updated signage with braille or tactile	Update signage in areas identified as under serviced	Annual signage review process to include updating or adding required signage 2016-2020
Communicational	No TTY service in Addictions and Detox or off-site Dialysis	A TTY phone or pay phone needs to be installed.	Include into annual budget strategy to allocate funding 2016-2020
Communicational	Television service does not offer closed captioning for those with hearing loss in Addictions and Detox	Review procurement of device capable for closed captioning	Include in annual capital equipment planning process fist 2017/18
Physical	Offsite Dialysis washrooms, clinic space, reception desk and power operators are not barrier free	Identified locations and commence prioritization plan for upgrades	Include into annual budget strategy to allocate funding 2016-2020
Architectural	Offsite Dialysis main entrance vestibule threshold is not compliant with accessibility	Identified locations and commence prioritization plan for upgrades	Include into annual budget strategy to allocate funding 2016-2020
Communication	Lack of visual alert to fire alarm	Visual alert to be installed that would function during a fire alarm	Include into annual budget strategy to allocate funding 2016-2020

8.0 Highlight list of barrier free initiatives completed

This describes the barriers previously identified and removed from the MYAP:

Type of Barrier	Description	Action
Informational	Website was non-compliant with standards	Website updated Jan. 1, 2015 to meet compliance standards
Physical	Public entrance to Foundation office	Power operating device installed Summer 2015
Physical	Lack of barrier free shower facilities in Rehabilitation unit	Constructed two barrier-free compliant three-piece showers in March 2014
Communication	Television service does not offer closed captioning for those with hearing loss	Closed captioning included at all patient bedside entertainment systems and waiting room televisions in 2013
Physical	Lack of power door operators to access Rehabilitation and Stroke Integration Unit	Installed two sets of power door operators to access unit. March 2014
Communication	Television service does not offer closed captioning for those with hearing loss	Closed captioning included at all patient bedside entertainment systems and waiting room televisions in 2013
Communication	Hard of hearing/deaf clients are unable to be alerted when they are being called for a test. Communication pre/post operatively is inconsistent (visual-tactile alert system available in same day surgery and cancer clinic)	Rolled out Hearing Loss Tool Kit to all departments in health centre 2015/2016
Communication	Lack of visual alert to fire alarm in original building	New F/A system was provided during the Specialized Seniors Care inpatient unit refresh 2016
Communication	Availability of amplified telephones and personal amplification system	10 pocket talkers were purchased to be used throughout the facility 2015/2016



9.0 Communication of the plan

Review and Monitoring Process

The Accessibility Committee will meet monthly to review progress. It will be the responsibility of the committee to ensure projects move ahead according to schedule. Members of the group will also be responsible to educate the organization and community of its mandates and promote its activities. The chair will provide the senior leadership team with an annual update. Updates regarding a significant renovation will be provided through quarterly updates from a member of the RVH Capital Planning and Redevelopment team.

Communication of the Plan

- RVH’s Accessibility Plan will be available to the community and staff on the RVH website www.rvh.on.ca
- Comments and feedback can be submitted via the RVH website
- The chair will provide an article to Corporate Communications annually to be included in hospital wide publications (i.e. Royal Review)
- Information regarding accessibility at RVH is also included in the patient and family guide

Education Plan

- RVH provides mandatory training for all new hires. Staff are required to complete orientation which includes an online training module and test
- Accessibility training is a component of RVH’s annual mandatory training modules in order to meet compliance with the Accessibility Standards for Customer Service OFT ref. 492/07

10.0 Appendices

Name of Document	Document
Terms of Reference	 Accessibility Committee Terms of
Customer Service Policy and Procedure	Available upon request
Human Resource Accommodation in Recruitment	Pending endorsement
Accessible website	www.rvh.on.ca
Emergency & Public Safety Plan	Available upon request
Accessibility Training Plan	Available upon request

