



# Accessibility Plan Multi-Year Plan

For a five-year period as of January 1, 2020

Updated December 2021

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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.

Ontario Regulation 429/07 Accessibility Standards for Customer Service came into 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.

This annual update to the multi-year Accessibility Plan for 2020-2024 has been prepared and reviewed by the Royal Victoria Regional Health Centre (RVH) Accessibility Committee.

The plan has been approved by RVH Senior Leadership Team and describes:

- Barriers identified and completed by RVH in the past
- New barriers identified to date
- The measures that RVH will undertake during to address prioritized barriers

The purpose of this plan is to identify, remove and prevent barriers for 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 with a focus on meeting current standards and best practices related to removing barriers to accessing RVH. The plan is to make the family and patient journey accessible from the arriving on the RVH grounds, parking, and travel to the building entrances and internal accessibility.

While the COVID-19 response has diverted time and effort away from directly addressing identified barriers, our organizational culture strongly supports accessibility at RVH and every effort is made to support care that is accessible for patients and staff.

## 2.0 Objectives

RVH is committed to:

- Providing safe, quality services to all patients and their family members and members of the community with disabilities by improving access to health centre facilities, policies, programs, practices and services for patients and their family members
- Engaging patients, staff, professional staff, students, volunteers and members in the development and review of its annual Accessibility Plan

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 2021

Last Name	First Name	Title	Department
Barner	Wendy	Director (Committee Chair)	Capital Planning and Redevelopment
Biggs	Dwight	Leader, Pastoral	Spiritual Care
Laarakkers	Tanya	Coordinator	Organizational Development
Burke-Joraszik	Rhonda	Speech-Language Pathologist	Children's Development Services
Clark	Cathy	Director	Safety, Security & Occupational Health
Cocking	Jane	Manager	Corporate Communications
Golding	Jon	Hearing Instrument Dispenser	Speech and Hearing
Guirguis	David	Manager	Business Development Office
Hart	Ross	Manager	Canadian Hearing Society
Bell	Andrew	Manager	Emergency Management
Jennett	John	Coordinator	Quality and Risk
Mayes	Martha	Manager	Central Outpatient Registration
McCrae	Kelly	Manager	Interprofessional Practice
Cooke	Brittany	Supervisor	Volunteer Resources
Thompson	Troy	Manager	Facilities
<i>Vacant</i>	--	--	Patient, Family Advisory Committee
<i>Vacant</i>	--	--	Human Resources
<i>Vacant</i>	--	--	Information Technology Services

### 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, CARE

**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**

- Provide the best patient care experience
- Ensure patients receive timely care in the most appropriate setting
- Build partnerships to improve the health system and create a healthier community

### **Drive Clinical Excellence**

- Champion a culture of quality and safety
- Address overcrowding and meet the needs of our growing region
- Optimize technology to make care more connected, timely, accessible and safe
- Encourage community investment in the right spaces, tools and technology
- Use every healthcare dollar wisely and advocate for appropriate funding



**RVH**

Royal Victoria  
Regional Health Centre





## Value People

- Hear all voices and perspectives
- Support a culture of equity and inclusion that is violence-free and where people feel safe and valued
- Retain, develop and attract the best and brightest people who reflect RVH's **MY CARE** values

## Accelerate Teaching and Research

- Maintain a strong commitment to learning and development
- Promote innovation and enhance patient care by harnessing TEAM RVH's knowledge and expertise
- As a community-based academic leader, attract, train and retain exceptional learners

## 5.0 Description of Health Centre

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 442 physicians, 3,096 employees and 550 volunteers provide exceptional care and specialty services to almost half a million residents, including regional programs for advanced cardiac care, renal care, cancer care and stroke services, as well as 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, 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 tripled in size including a trauma unit, isolation ward and mental health crisis team
- 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

**RVH**

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Since the expansion, RVH has added the following:

- New 40 Bed Transitional Care Unit in 2017
- New regional Child and Youth Mental Health program in 2017
- New regional heart program, including a Cardiac Intervention Unit, in 2018
- Regional Renal Hub designation in 2018
- A fourth LINAC unit for Radiation Treatment in 2019
- Health and Wellness Clinics at the Rizzardo Health and Wellness Centre in Innisfil in 2019
- Construction of a temporary Regional Pandemic Response Unit in 2020
- Refresh of a former inpatient unit, that was being used as office and meeting space, to patient beds in 2020



RVH has embarked on a Master Plan that works to outline RVH's 20-year graduated infrastructure plan based on a two-campus, integrated model and it is a plan driven by explosive population growth. The Master Plan seeks to double RVH again in size and add a new South Campus with a vision for One System, Two Sites. The work done for this planning is developed with community consultation, data analysis and detailed planning, has been supported by the RVH's Board of Directors. The plan was formally submitted to the Ministry of Health, Health Capital Investment Branch in January 2020. In October 2021, RVH announced the selection of the future site of a new South Campus in Innisfil, ON.

RVH officially launched an emergency pandemic response on March 17, 2020 in response to the spread of COVID-19. Efforts have included numerous changes to normal operations that were in place pre-COVID-19, including modifications to entrances, implementing screening processes, and adding overflow waiting, and also included adding inpatient capacity by fitting out temporary in-centre surge spaces and constructing a 70-bed field hospital Pandemic Response Unit. As part of our COVID-19 response, any modifications to space were completed according to accessibility requirements.



## 6.0 Barrier Identification & Prioritization

The plan establishes a process by which RVH will identify, quantify, prevent or remove barriers to people with disabilities.

### Barrier Identification

These barriers can be categorized as follows:

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

Methods to identify, track and address barriers include:

- Identification of potential accessibility issues by the Patient, Family & Experience Office through the incident Safety Learning System (SLS) reporting software module
- Feedback from volunteer resources, parking, security and business development services
- Interactive feedback with public/community via RVH website [www.rvh.on.ca](http://www.rvh.on.ca)
- Facility audits conducted by members of the Accessibility committee
- Feedback from human resources team, staff and professional staff.

### Barrier Prioritization

Process to be used in assisting the prioritization of each identifiable barrier includes:

- Review of legislated requirements
- Stakeholder feedback
- Assessment of the population affected by the barrier
- Risk assessment posed by barrier
- Practicality of a solution to be implemented
- “Work around” to avoid barrier
- Available resources/capacity assessment (cost/construction/phasing/timing)
- Coordination with other renovation projects and communication at RVH's Space Planning Committee



## 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	Resolution	Timeline 2020-2025
<b>7.1 Communication</b>	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. Visual alarms are updated as spaces are renovated.
<b>7.2 Communication</b>	Missing or lack of wayfinding for accessible facilities	Update signage in areas identified as under serviced	Annual signage review process to include updating or adding required signage 2020-2024.
<b>7.3 Physical</b>	Public washrooms without power assisted doors	Prepare a multi-year plan to install power operator on an annual basis	Some washrooms have been addressed as part of other improvements: Audit of all washrooms deferred to 2021/22.
<b>7.4 Physical</b>	Public washrooms have manual flush valve mounted perpendicular to wall behind toilet	Retrofit water closets with automatic flush valve	Some washrooms have been addressed as part of other improvements: Audit of all washrooms deferred to 2021/22.
<b>7.5 Physical</b>	Public washrooms coat hooks in original building public washrooms are mounted too high	Itemize list of rooms and place work orders to lower the hooks to compliance height	Audit of all washrooms deferred to 2021, and include in routine maintenance work plan 2021/22
<b>7.6 Physical</b>	Public washrooms tilt mirrors in original building barrier free washrooms are missing.	When planning updates to public washrooms	Audit of all washrooms deferred to 2021 and include into annual space planning budget to allocate funding for accessibility projects commencing with fiscal 2021/22.
<b>7.7 Physical</b>	Knee space for public when at central registration stations	Plan for accessible modular furniture.	Make revisions when departments are located to it final location that aligns with long range Master Planning.
<b>7.8 Physical</b>	Crosswalks and sidewalks built before 2012 do not meet the current requirements for the Design of Public spaces.	Some improvements have been made as parking areas are resurfaced. Improve accessibility of public pathways.	Following the recommendations of Parking & Exterior Accessibility Review Report (Hanson + Jung, 2017), continue to make phased improvements throughout 2020-2024.



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

Type of Barrier	Description	Resolution	Timeline 2020-2025
<b>7.9 Facility</b>	Provide textural or bright colour changes at floor levels	Notice or rumble strips to identify stairs or change in floor. Contrasting floor signage for visual cues for colour blind.	Review as part of Master Planning and include upgrades in 2020-2025 that align with long range Master Planning.
<b>7.10 Physical</b>	Offsite Dialysis washrooms, clinic space, reception desk and power operators are not barrier free	Identified locations and commence prioritization plan for upgrades	Review as part of Master Planning and align upgrades with corporate direction for 2020-2024.
<b>7.11 Physical</b>	Addictions and Detox lacks elevator access from lower level to main floor	Determine facilities' future use and determine if spaces will be clinically linked	Review as part of Master Planning and align upgrades with corporate direction for 2020-2024.
<b>7.12 Communication</b>	No Teletypewriter (TTY) service in Addictions and Detox or off-site Dialysis	A TTY phone or pay phone needs to be installed.	Review orientation for staff to alternative to TTY service for off-site locations, for inclusion in orientation and training.

*End of list of Identified Barriers*



## 8.0 Highlight list of barrier free initiatives completed

This describes the barriers previously identified and completed by RVH:

Type of Barrier	Description	Action
<b>8.1 Communication</b>	Need for public information systems for way finding for visual or hearing loss	2020 & 2021 – New electronic wayfinding system uses new technologies to align smart devices and RVH way finding app.
<b>8.2 Physical</b>	Addictions and Detox: Washrooms, shower, kitchen space, sleep facility, reception are not barrier free. Entrances lack power operators	2020 & 2021 Upgrades to washrooms made, and power operators added where possible.
<b>8.3 Informational</b>	Addictions and Detox and off-site Dialysis has an absence of wayfinding or updated signage with braille or tactile	2021 Signs updated to current RVH standard Addictions and Detox
<b>8.4 Physical</b>	Crosswalks and sidewalks built before 2012 do not meet the current requirements for the Design of Public spaces.	2020 - Minor improvements made at pathways from parking to Georgian Entrance to maintain accessibility.
<b>8.5 Communication</b>	Lack of public information systems for way finding for visual or hearing loss	2020 - Pilot version of wayfinding app with visual and audible directions launched in November 2020.
<b>8.6 Communication</b>	Television service does not offer closed captioning for those with hearing loss in Addictions and Detox	2020 - New Televisions support closed captioning
<b>8.7 Communication</b>	No TTY service in Addictions and Detox or off-site Dialysis	2020 – introduced alternate TTY relay Service with Program Managers for trial
<b>8.8 Physical</b>	Current power operator buttons on doors are worn and difficult to see. Replace with touch free, illuminated button with large international pictogram	2019/2020 - RVH Facilities installed 300 auto operators throughout facility in 2018/19 and 2019/20
<b>8.9 Physical</b>	Patient Entertainment System (PES) payment kiosk too high for access	2019 - PES upgraded in 2018/19, and kiosks no longer required.
<b>8.10 Physical</b>	Crosswalks and sidewalks built before 2012 do not meet the current requirements for the Design of Public spaces.	2019 – Improvements to parking stalls and pedestrian pathways made to North Visitor and Rotary lots. Addition of high contrast markings and Tactile Walking Surface Indicators in some areas.
<b>8.11 Policies and Practice</b>	Maintaining adequate funding and project priorities for barrier removals	Fiscal 2018/19, RVH approved dedicated funding reserved for Accessibility projects on an annual basis for following years.
<b>8.12 Communication</b>	Public documents and communication written in plain language and available in accessible format	2018/2019 Updates made to RVH website on methods to access materials in an accessible format

This describes the barriers previously identified and completed by RVH:

Type of Barrier	Description	Action
8.13 Physical	L3 Adult Mental Health Outpatient program entrance too small for power wheelchairs.	2018- Existing door and frame replace with larger door equipped with a power operator. Main entrance doors to Adult Inpatient Program replaced with new doors equipped with power operators
8.14 Physical	L1 Simcoe Parking lot barrier free access was difficult and paved surfaces were uneven to permit safe travel.	2018 – Resurfaced entire public parking area including revamping the barrier free parking to meet the two parking stall sizes Include new level access from parking to sidewalk by providing tactile surface bollards to provide for safe environment for pedestrians. Bollards where also provided to provide for a safe pedestrian environment.
8.15 Communication	Code white buttons in L1 Simcoe and Staff parking lot B were not accessible.	2018 – Curb cuts were provided to permit people with mobility aids to reach the code white buttons (3 locations)
8.16 Physical	Barrier free washrooms in the new building were identified as difficult to use by patients. The original diagonal grab bar made it difficult for patients to transfer.	2018 - L2 Georgian entrance, 2 barrier free washrooms were retrofitted with new L shaped grab bars. L3 Cancer Centre, 3 barrier free washrooms were retrofitted with new L shaped grab bars.
8.17 Physical	Public washroom without power assisted doors	2018 - L3 Cancer Centre, 1 barrier free washroom in the waiting room was retrofitted with a new power door operator.
8.18 Physical	Lacking barrier free accessible registration desk in L2 Central Registration	2018- New barrier free accessible registration replace former non-compliant desk.
8.19 Physical	Replacement of original fixed height grossing station in clinical laboratory	2018- New grossing station equipped with height adjustable workstation that will permit easy access to all staff.
8.20 Communication	Availability of amplified telephones and personal amplification system	2018 – Pocket talkers now rolled out to all patient registration desks 2017- 10 pocket talkers were purchased to be used throughout the facility and rolled out in 2017
8.21 Physical	Barrier free access to Central registration was limited	2018- New barrier free accessible registration replaced former non-compliant desk.
8.22 Physical	Barrier free access for patients at the Central registration was limited	2018- New accessible registration desk replaced a former non-compliant desk.
8.23 Physical	Barrier free access to L3 area not barrier free accessible	2018- Centre for Education and Research main entrance replace with new accessible height vision panel doors complete with power operated doors

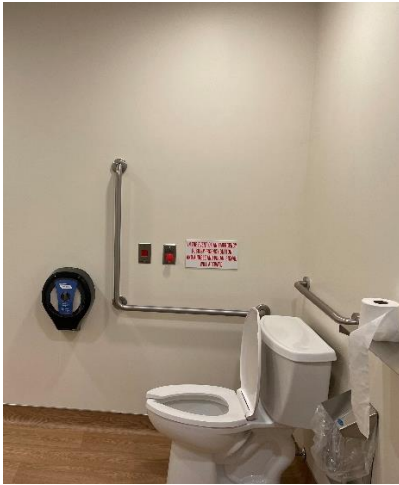
This describes the barriers previously identified and completed by RVH:

Type of Barrier	Description	Action
<b>8.24 Communication</b>	Lack of visual alert to fire alarm in original building	Ongoing work noted above in 7.1 2016 - New F/A system was provided during the Specialized Seniors Care inpatient unit refresh including strobes 2017 - Strobes added to: - new L3 Child + Youth Mental Health - L4 Cardiac Intervention Unit - L1 Cardiorespiratory Treatment Clinic, 2018- Strobes added to: - L3 Centre for Teaching and Research - L4 Transitional Care Inpatient.
<b>8.25 Physical</b>	3SA was original built in 1997 and was not accessible friendly for patient care. During the refreshing program in late 2016 for L3 Specialized Seniors Care, updates were planned.	2017- New barrier free accessible Interprofessional desk and barrier free shower and washroom constructed for patient use, new power operated doors with integrated card access installed. Private patient room water closets have been reconfigured to allow for patient access from both sides for safe transfers.
<b>8.26 Physical</b>	L4 Transitional Care Unit was originally built in 1997 and was not accessible friendly for patient care.	2017- New accessible height vision panel doors complete with power operated doors. New power door operators installed on main entrances interfaced with controlled access
<b>8.27 Physical</b>	Additions: Washrooms, shower, kitchen space	2017- Completed renovations to comply with barrier free access design
<b>8.28 Communication</b>	No TTY service in Emergency department. Not available	2017 - Alternate accommodations to TTY have been implemented
<b>8.29 Communication</b>	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)	2016 - Rolled out Hearing Loss Tool Kit to all departments in health centre 2015/2016
<b>8.30 Informational</b>	Website was non-compliant with standards	2015 - Website updated Jan. 1, 2015 to meet compliance standards
<b>8.31 Physical</b>	Public entrance to Foundation office	2015 - Power operating device installed Summer 2015

*End of list of previously identified and completed Barriers.*



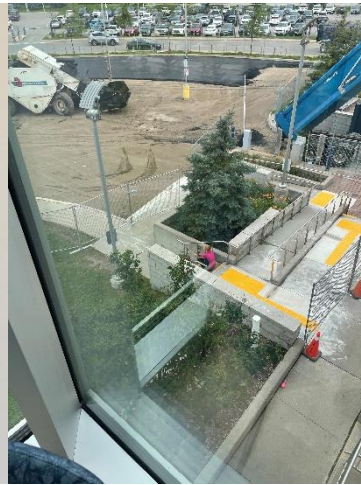




Addictions and Detox  
Washroom Upgrade  
Renovation in Progress  
March 2021



Addictions and Detox,  
and Community Dialysis  
Signage Upgrade, March  
2021



Tactile Directional  
Indicators, August 2021



Public Launch of  
Electronic Wayfinding  
App, May 2021



## 9.0 Communication of the plan

### Review and Monitoring Process

The Accessibility Committee meets bi-monthly to review progress.

The committee is responsible for:

- Ensuring accessibility projects move ahead according to schedule
- Educating the organization and community of its mandates and promote their activities.

The chair is responsible for:

- Updating the senior leadership team annually.
- Providing an article to Corporate Communications annually
- Presenting projects requiring renovations to physical spaces to the Space Planning Committee for review and consideration for inclusion in the prioritized projects of the organization. Once approved the work is then coordinated by the 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](http://www.rvh.on.ca)
- Information regarding the plan will be shared in hospital wide publications (I.e. Royal Review) and in the patient and family guide
- Comments and feedback regarding the Accessibility Plan can be submitted via the RVH website. This feedback is monitored by the RVH Corporate Communications Team and reported to the Accessibility Committee

### Education Plan

- 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. The modules are updated and posted on April 1<sup>st</sup> of each fiscal year.
- As part of orientation new staff are required to complete the modules
- All staff are required to review the modules annually



## 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	Available upon request
Accessible website	<a href="http://www.rvh.on.ca">www.rvh.on.ca</a>
Emergency & Public Safety Plan	Available upon request
Accessibility Training Plan	Available upon request