

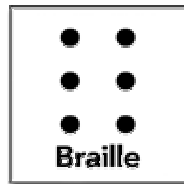


Annual Accessibility Plan

2005-2006



Access for Vision Impairments



Braille



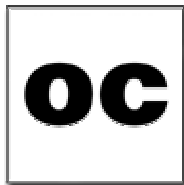
Information



Easier To Read Print Size



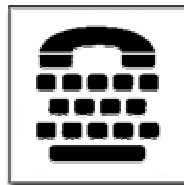
Assistive Listening Systems



Opened Captioning



Volume Control



Telephone Typewriter



Wheelchair Accessible



Audio Description

Submitted by:

Accessibility Working Group
Rouge Valley Health System

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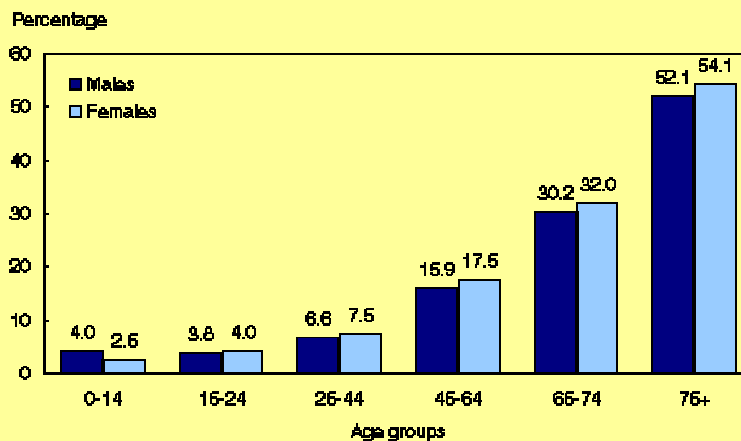
Glossary Information

Common abbreviations or shortened official names used in this document are:

- **RVHS** = Rouge Valley Health System
- **RVAP** = Rouge Valley Ajax and Pickering
- **RVC** = Rouge Valley Centenary
- **ODA** = Ontarians with Disabilities Act
- **AAP** = Annual Accessibility Plan
- **AWG** = Accessibility Working Group
- **CNIB** = Canadian National Institute for the Blind
- **Ministry** = Ministry of Health and Long Term Care

RVHS Accessibility Fact: Accessibility issues will become even more important as the average age of the population in Ontario and Canada increases.

Disability rate by age and gender – Source: Statistics Canada, 2001



* The Canada total excludes the Yukon, Northwest Territories and Nunavut. The sum of the values for each category may differ from the total due to rounding.
Source: Statistics Canada, Participation and Activity Limitation Survey, 2001.

Executive Summary:
**Accessibility for Ontarians
With Disabilities Act**

The purpose of the Act is to benefit all Ontarians by achieving accessibility for people with *disabilities*¹, by developing, implementing and enforcing accessibility standards concerning goods, services, accommodation, facilities, buildings and employment.

Improvements will be phased in, moving toward an accessible Ontario by the year 2025.

The Accessibility for Ontarians with Disabilities Act - legislation aimed at breaking down *barriers*² for people with disabilities - received Royal assent and is now the law. On May 10, 2005, Bill 118

¹ A *disability* is: (a.) any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device, (b.) a condition of mental impairment or a developmental disability, (c.) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language, (d.) a mental disorder, or e. an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

² A *barrier* is anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an informational or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice.

was passed by unanimous vote in the Ontario Legislature.

Standards will be set in both the public and private sectors to address the full range of disabilities - including physical, sensory, mental health, developmental and learning. Standards could include:

- Accessible pedestrian routes and entrances into buildings;
- Lower counter heights at cash registers to accommodate wheelchairs;
- Large print menus in restaurants for the visually-impaired;
- Staff training in serving customers with learning disabilities.

Members of the disability community, representatives of the broader public and private sectors, and government are to develop meaningful, realistic standards collaboratively. The committees will submit proposed standards to the government for adoption as regulations. The standards will include timelines for compliance. The legislation includes penalties for violators. Until standards are in place, the Ontarians with Disabilities Act, 2001 will remain in effect, and government ministries and other affected public sector organizations continue to have planning obligations in accordance with the legislation.

RVHS Accessibility Fact: *The disability rate gradually increases with age. From 3.3% among children aged 0 to 14, it rises to nearly 10% among adults aged 15 to 64 and climbs to more than 40% among persons aged 65 and more. – Statistics Canada*

Accessibility Objective

Rouge Valley Health System (RVHS) is moving forward on a variety of fronts in improving accessibility at its two hospitals and other sites. RVHS is committed to the continual improvement of access to its facilities, policies, programs, practices and services for patients, visitors, staff, physicians, volunteers and the community at large with disabilities.

RVHS' goal in 2005 was to raise the level of disability awareness, improve facilities, update policies to reflect accessibility goals and legislation and offer more accommodating telecommunications options. The goals were achieved in a variety of ways, as outlined in the Progress section and elsewhere.

Under the authority of the Board of Directors, RVHS adheres to the following Accessibility Planning Policy. Rouge Valley Health System is committed to:

- Continuous improvement, within available resources, of access to facilities, policies, programs, practices and services as they relate to patients and their family members, staff, health care practitioners, volunteers and members of the community with disabilities;
- The participation of people with disabilities in the development and review of its annual accessibility plans;
- Ensuring hospital bylaws and policies are consistent with the principles of accessibility; and
- The continuation of the Accessibility Working Group at Rouge Valley Health System.

RVHS Background

Rouge Valley Health System consists of five community health sites, including two hospitals – Rouge Valley Centenary, located in east Scarborough, and Rouge Valley Ajax and Pickering, located in Ajax., plus three mental health sites. Nearly 3,000 staff, including 210 general practitioners, 220 specialist physicians, 1,200 registered nurses, plus many other professionals, provide care for a full range of health conditions, from paediatric to geriatric care. Both hospitals have 24-hour Emergency departments. RVHS provides a wide range of healthcare services across eight key patient care areas: Surgery; Women's and Children's Health Services; Mental Health; Cardiac Care; Medical Care; Emergency Care; Continuing Care and Rehabilitation; Clinical and other Support Services. RVHS is also the Regional Perinatal and Paediatric Centre for east Toronto and west Durham.

RVHS Accessibility Fact: *When planning events involving persons with disabilities, consider their needs ahead of time. If an insurmountable barrier exists, let them know about it prior to the event. – Easter Seals*

Each pre-existing hospital has a several-decades long history of community support, which has continued into the merged system.

RVAP has served residents of West Durham (Ajax, Pickering, Whitby) since 1954 having earned a reputation for its family atmosphere. Starting with 38 patient beds when it opened, to the 144 beds it now offers, the hospital has seen much growth and corresponding community support. New four-story wings were added in 1964 and 1994.

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Demands on RVAP continue to grow. For example, its Emergency Department was designed to accommodate 20,000 visits a year, but now routinely handles 45,000.

RVC has served the residents of Scarborough since 1967. It was built with community support, dating to 1964 when a group of Scarborough residents began a campaign for a second community hospital. The Township of Scarborough purchased property formerly owned by the Boy Scouts of Canada and donated another 25 acres for construction of the Scarborough General Hospital, as it was then called. In addition to the original 15-floor tower, two additional wings have been added, including the Margaret Birch Wing in 1986 and The Court medical suit in 1991.

Both RVHS hospitals, amalgamated in 1998.

Recent Achievements

RVHS has implemented many initiatives during the last few years to improve accessibility at its hospitals.

Among the highlights at both hospitals, in recent years, are:

- Wheelchair accessible washrooms in all renovations at both hospitals;
- Rear-view mirrors installed in elevators
- Braille elevator numbers
- Translated signage and pamphlets at RVC in Tamil and Chinese.
- Accessible parking spaces added, exceeding the standard.

At our RVC hospital, improvements have included: contrasting door frames, floor edges, elevated tubs, wheelchair accessible showers at the Margaret Birch Wing; accessible washrooms, wheelchair accessible tables added in the cafeteria; and wide doorway in the MRI/Breast Centre.

At our RVAP hospital, improvements have included: wheelchair accessible showers and central wheelchair accessible washroom on the Third Floor Rehabilitation; central wheelchair accessible washrooms on the Physiotherapy Unit; and widened door with automated opener at the Ambulatory Care Unit.



Tom Richardson, and his black lab guide dog named Eldridge, made a presentation as part of the RVHS Disabilities Fairs in 2005. For more on the fair, please see the Awareness Program section.

Progress on Accessibility

There was tremendous progress made in 2004-2005 in addressing many barriers throughout the organization.

As documented under the next few headings, achievements in making RVHS more accessible during the last year occurred in the areas of **Facilities, Awareness, Policies/Procedures, Telecommunications, Public Affairs and Communications Relations.**

Facilities Report 2004-2005

Work performed in 2004-05 improving accessibility in our facilities included:

- New and improved lines and aisle markings in parking lots
- Repainted and signed disabled parking spots
- Clearly marked and designated WheelTrans pick-up area
- Direct call WheelTrans and taxi stations
- Lighting upgrades with improved lighting levels
- Repainting projects throughout facility to improve contrast around doorways
- Mirrors in all elevators
- Improved stairwell lighting at Ajax
- Power door opener at Ajax east entrance
- Widened entranceway access to washrooms at RVC main lobby
- Increased use of occupancy sensors (automatic lighting) throughout office and meeting rooms
- Completed and submitted (August 2004) facilities audit for both hospitals, which identified washrooms and signage as priorities
- Lowered soap and towel dispensers in public and patient washrooms at RVC
- Improved signage to accessible washrooms

- Installed hands-free faucets in public washrooms
- Improved and painted curb markings at pedestrian crosswalks
- Family washroom facilities installed.

Awareness Program

The year 2005 was the second year of action for Rouge Valley's Accessibility Working Group, as led by RVHS Vice-President Gloria Zive and including wide representation of staff and community members.

The AWG evaluated access to RVHS, through interviews, focus groups and facility assessments. Hospital community members provided information and participated in facility assessments. The AWG determined the major priority for 2004/05 would be to increase awareness of all RVHS staff, volunteers and physicians to accessibility needs of its communities.

RVHS Accessibility Fact: *It's a myth that people who are blind acquire a sixth sense. In fact, most people who are blind do develop their remaining senses more fully, but they do not have a sixth sense. - Easter Seals*

Awareness: TD Canada Trust Fund

To this end, an application was made to the TD Canada Trust Education Fund to support this initiative. The application was successful, with the awareness event beginning on Jan 25, 2005.

To kick off the awareness campaign, Timothy Andrade of the Ottawa Rehab Hospital spent the morning educating 25 selected RVHS staff and volunteers. The participants became program champions, with the expectation that they would influence attitudes and behaviour of staff, physicians and volunteers.

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The RVHS Disabilities Awareness Program has included:

- A program mascot (Barrier Buster) and tag line;
- Bookmarks of the basic principles to follow in interacting with people with a disability;
- Targeted poster campaigns of specific tips for interacting with people with a visual or hearing disability;
- In-service educational sessions by the CNIB and The Canadian Hearing Society were done at lunchtime at both hospitals;
- News items in the electronic and printed newsletter, The e-Echo and The Echo, flyers to all units and displays at both hospitals;
- Invitations were delivered to all Court offices for staff or physicians to attend in-services;



- A visit by Paralympics Athlete, **Kaley McLean**, who was inspiring in Athens in 2004;
- Training package for all staff and volunteers was presented to the RVHS AWG;
- May 10, 2005, tribute to TD Financial Group was held at Rouge Valley Ajax

and Pickering hospital at the Education Awards;

- May 24-27, 2005 two public Fairs were held, involving the participation of more than 25 community organizations that were anxious to share their information with caregivers. Country Style donated donuts and Dudley Health Care Communications donated green folders for tips for staff;
- Surrounding hospitals were invited to all in-service educational sessions and the two fairs.

Tom Richardson, and his black lab guide dog named Eldridge, did a presentation at the Rouge Valley Centenary Fair on behalf of the Canadian Guide Dogs for the Blind.

People learned not to touch a guide dog while it is working and to wait until the harness is removed. Tom also presented a documentary on the training of guide dogs. CNIB Durham presented Carter, a standard white poodle guide dog, at the Rouge Valley Ajax and Pickering fairs. Anita Neeson, Auxiliary Member at RVAP, also brought in Bandit, her therapy dog-in-training at St. John Ambulance, to the RVAP Fair.

Another story of the use of guide dogs included a guide dog for autistic children.

RVHS Accessibility Fact: 12.4 per cent of Canadians have disabilities, for a total of 3.6 million or one out of eight people. The three most common general types of disabilities: pain; learning; and mobility. – Government of Canada 2004

These dogs are leashed to autistic clients by a waist band and are capable of stopping a child from exiting a school door, before the bell rings by wedging

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themselves in the doorway so the child can't go outside, and barking for help.

The displays remained up at both hospitals for a week after the fairs themselves had ended.

The awareness fairs were a success thanks to many people, including: Carmela Fuoco, Administration RVC; Joy Freemantle, Diagnostic Imaging, RVAP; John Chave, Organizational Effectiveness; Chic Blair, Volunteer Coordinator; Roseann Blake, Clinical Practice Leader Medicine ; Marsha Grey; Employee Relations; Anita Neeson, Auxiliary RVAP; Katie Cronin-Wood and David Brazeau, both of Public Affairs and Community Relations; and staff of the Occupational Health Department.

Telecommunications

The Telecommunications Department of RVHS hasn't had any approved capital funding released this year for proposed improvements to our auto attendant and other systems.

One proposal will allow voice recognition/activated requests for people and departments.

There are three areas of improvement to Telecommunication services:

| Item | Status |
|--|--|
| <i>Assistive devices for hearing impaired patients</i> | The previous manager purchased a quantity of assistive devices to use on telephones for hearing impaired patients. Unfortunately, we are no longer able to purchase these from the previous supplier and have not found an alternative source at this time. The new manager will continue to pursue this, possibly with the help of purchasing agents. |
| <i>Wheel Trans Direct Lines</i> | Direct Line Access to Wheel Trans telephones at lowered heights have been installed at some of the entrances. HandiTransit and Taxi lines installed. |
| <i>Switchboard</i> | Changes to Switchboard operators headsets were implemented to eliminate background noise, improve clarity of voices etc. as well certain personnel moves have created a quieter Switchboard working environment improving clear communication. |

RVHS Accessibility Fact: Stroke is the leading cause of adult disability. Stroke can happen at any age from infancy to the elderly. 50,000 people in Canada have a stroke in a year. – Stroke Survivors Association of Ottawa

Telecommunications

Future Plans

In 2006, Telecommunications is planning to install:

- Bell Pay Phones at a lower height;
- Hands-free phone sets;
- Assistive devices for the hearing impaired.

Public Affairs and Community Relations

Website

The launch of a redesigned RVHS website, as led and implemented by David Brazeau, gave the hospital an opportunity to test its viability with website reader software used by the visually impaired and the blind.

Using a slightly larger than standard font size throughout, the new RVHS website – www.rougevalley.ca – was examined by the CNIB. It determined the site could be easily read aloud by computer software, used by the blind and visually impaired. The site was then announced in a news release and featured in articles in the local media.

Community Releases

All news releases in 2005 went from a standard 10-point font size to a 12-point font size for greater ease of reading, both in the documents and on the web. This AAP report is also in 12-point font size, which is larger than last year's report.

In 2006, Public Affairs plans to ensure its new internal website, the Intranet, is also easily read by computer programs for the blind and visually impaired.

Policies/Procedures

Policies and procedures were reviewed on a quarterly basis. Systemic barriers contained within the policies were removed.

Future Focus of RVHS Accessibility Working Group

Our focus for the future will be in three main areas:

1. Exploring the feasibility of conducting Facility Audits. Accessibility experts would conduct the audits to determine a full list of areas for improvement and a schedule of priorities for the future;
2. Prioritizing capital improvements, assessing financial implications, preparing necessary capital requirements;
3. Continuing our awareness program for staff and the community.

RVHS Accessibility Fact: *If you would like to help someone with a disability, ask if he or she needs it before you act. Please listen to any instructions the person may want to give. – Easter Seals*

RVHS
Accessibility Working Group

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Rouge Valley Health System

This report is posted on our website as a PDF. It is available in other formats upon request.

Our Hospital Sites



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