



Oak Valley Health's
Multi-Year Accessibility Plan
2024-2029

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Executive Summary

The purpose of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is recognizing the history of discrimination against persons with disabilities in Ontario, the purpose of this Act is to benefit all Ontarians by,

- (a) developing, implementing and enforcing accessibility standards in order to achieve accessibility for Ontarians with disabilities with respect to goods, services, facilities, accommodation, employment, buildings, structures and premises on or before January 1, 2025; and
- (b) providing for the involvement of persons with disabilities, of the Government of Ontario and of representatives of industries and of various sectors of the economy in the development of the accessibility standards.

The Act describes “barrier” as 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 information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice; (“obstacle”)

As stated in previous plans, the AODA was created with the purpose of improving opportunities for persons with disabilities, and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province.

Barriers are anything that prevents a person with a disability from fully participating in all aspects of society because of his/her disability. Barriers can be categorized as:

- Attitudinal
- Architectural/Physical
- Information and Communication
- Policies/Practices
- Technology

The AODA sets out clear goals and time frames to make Ontario accessible by 2025. This will be achieved by mandating the development, implementation and enforcement of accessibility standards.

The **Accessibility Standard for Customer Service** (Ontario Regulation 429/07) was the first standard to be released under the AODA. Staff,

physicians, board members and volunteers at Oak Valley Health receive the required customer service training as part of their orientation and credentialing process. The Customer Service training is required upon hire, credentialing or onset of accepting a volunteer position.

The **Integrated Accessibility Standards Regulation (IASR)** (Ontario Regulation 191/11) became law on July 1, 2011 and was most recently revised on January 1, 2024. The current standards within the Regulation are:

- Information and Communications
- Employment Standards
- Transportation Standards
- Design of Public Spaces Standards (accessibility standards for the built environment)
- Customer Service Standards
- Compliance

As a large designated public sector organization, the Government of Ontario has established timelines to comply with the IASR which will be phased in between 2011 and 2025. Please refer to the summary chart below.

Oak Valley Health has acted to comply with the **Design of Public Spaces Standards** outlined in this regulation, where applicable. Oak Valley Health's standards aim to remove and prevent barriers in public spaces. Included in the standards are requirements for: outdoor public-use eating areas, exterior paths of travel, service-related elements like service counters, fixed queuing guides and waiting areas.

Designated public sector organizations must apply the requirements to public spaces that are new or redeveloped on or after January 1, 2016. Contracts entered into by designated public sector organizations before December 31, 2012 are not required to meet the requirements of this part in honouring the existing contract.

Multi-Year Annual Accessibility Updates

Compliance Date	Compliance Updates within the IASR
2012	<ul style="list-style-type: none"> • Workplace Emergency Response Information (compliant with requirement)
2013	<ul style="list-style-type: none"> • Establishment of accessibility policies • Multi-year accessibility plan • Accessibility criteria with procurement or acquiring goods, services, facilities • Accessible formats for education and training materials upon request • Accessibility awareness training to educators
2014	<ul style="list-style-type: none"> • Biannual progress reporting to the Province of Ontario • Training requirements on the IASR and Human Rights pertaining to persons with disabilities • Accessible feedback processes • New internet websites and web content on those sites must conform to WCAG 2.0 level A (excluding live captioning and audio description) • Pre- and post-employment and accommodation processes
2015	<ul style="list-style-type: none"> • Accessible formats and communication supports upon request • Accessible or conversion-ready versions of educational or training materials upon request • Libraries of educational/training institutions to have accessible or conversion ready format of print (digital or multimedia by 2020)
2016	<ul style="list-style-type: none"> • Biannual progress reporting to the province • Design of Public Spaces in Built Environment Standards to address outdoor public –use eating areas, exterior paths of travel, service-related elements like service counters, fixed queuing guides and waiting areas

2017	<ul style="list-style-type: none"> • Elevators – Building A – Voice announcement system • Braille print
2018	<ul style="list-style-type: none"> • Elevators – Building B – Voice announcement system • Braille print
2017/18	<ul style="list-style-type: none"> • B2403C and B2403D Male/Female large individual washrooms at <u>entrance to Diagnostic Imaging-2nd floor</u>). Can accommodate wheelchairs/scooters. Closest point when entering the Link Lobby. Doors need to be pushed in and exit need to be pulled open by a handle.
2017/18	<ul style="list-style-type: none"> • B 4501 and B4514 Male/Female washrooms with multiple stalls with 1-larger stall in each to fit a wheelchair. Located on each side of the <u>4th floor Building B beside elevators</u>. To enter/exit doors have handles on
2020	<ul style="list-style-type: none"> • Double doors at Entrance D adjusted for timing to support users of wheelchairs to pass through.
2021	<ul style="list-style-type: none"> • Breast feeding room available in the Breast Health Clinic, Clinic 4, room A2403.
2023	<ul style="list-style-type: none"> • Missing tilt mirrors in original building barrier free washrooms were updated.
2023	<ul style="list-style-type: none"> • Access to Health Services Building and the Private Dining Room were retrofitted to comply with wheelchair accessibility standards.

This updated multi-year accessibility plan continues to build on previous plans with continued focus on identifying barriers, providing recommendations to remove barriers, organizational awareness and education and creating and monitoring initiatives to ensure compliance with the legislated requirements. The organization will continue to address the standards and issues related to accessibility to improve accessibility for all who visit Oak Valley Health.

Goals

Oak Valley Health’s accessibility planning goals continually identify, remove and prevent barriers for people with disabilities who visit, work in or use the hospital facilities, services, and property. In addition, the Accessibility

Advisory Council (AAC) will bring forward information and make recommendations to ensure compliance with Accessibility Standards. The AAC further advances accessibility through education and training of staff, board appointed professional staff and volunteers to optimize access, care and service at Oak Valley Health.

Objectives

The objectives of this accessibility plan are to describe:

- Current processes by which Oak Valley Health has and will continue to identify barriers
- Achievements by Oak Valley Health to remove and prevent barriers
- The measures Oak Valley Health will take during 2024-2029 to identify, remove and prevent barriers
- The measures Oak Valley Health will take to ensure compliance with the ODA (2001) and AODA (2005) standards
- The process by which the Oak Valley Health plan will be made available to the public
- Oak Valley Health is committed to improving access to facilities, policies, practices and services within the Markham, and Uxbridge sites and the Reactivation Care Centre.
- Provide safe, high-quality care to all patients, family members and members of the community with disabilities visiting the hospital(s)

Description of Oak Valley Health

Oak Valley Health is one of Ontario's leading community health care organizations. Across our two hospitals, [Markham Stouffville Hospital](#) and [Uxbridge Hospital](#), as well as our [Reactivation Care Centre](#), we deliver safe, high-quality care to more than 441,000 patients annually through diagnostic and emergency care services, clinical programs in acute care medicine and surgery, addictions and mental health, and childbirth and children's services. Oak Valley Health is proud to be part of the [Eastern York Region North Durham Ontario Health Team](#). With over 600 professional staff, over 3,300 dedicated staff, and more than 900 active volunteers, we are committed to celebrating our people, fostering connections, and driving innovative growth. We provide integrated care for healthier communities and deliver an extraordinary patient experience through our *honoured to care* culture to residents of Markham, Whitchurch-Stouffville, Uxbridge, and beyond.

VISION

Integrated care for healthier communities

MISSION

Deliver an extraordinary patient experience through our *honoured to care* culture

VALUES

Integrated care is dependent on us living our values. Our values represent the culture, norms, and attitudes we see reflected wherever we go with our patients, our partners, and each other. By living our values every day, we demonstrate our honoured to care culture in action.

RESPECT We embrace equity, diversity, and inclusion and treat everyone with dignity.	TRUST We are reliable and show integrity in everything we do.	COMMITMENT We are accountable to follow through and to foster collaboration and partnerships.
	COMPASSION We approach all relationships with empathy, sensitivity, and understanding.	COURAGE We stand up for what is right, take ownership of our actions, and responsibility for solving problems. We encourage bold creativity for positive impact.

The Accessibility Advisory Council

The membership of the Council represents a diverse cross-section of multidisciplinary staff from both inpatient and outpatient clinical areas as well as support services and community resources. There are representatives from management and frontline staff including members with disabilities. We are also fortunate to have a Council member who coordinates the Community Living York South partnership.

Many of our Council members have a professional or personal connection with supporting people with disabilities. These connections make our commitment even stronger for advocating for accessibility.

The Council reports to senior management through the Vice President, People and Chief Human Resources Officer. The Accessibility Advisory Council has been charged with the following responsibilities:

- Ensure ongoing organizational commitment to and understanding of accessibility planning
- Develop accessibility plans
- Ensure each plan includes, but is not restricted to:
 - A review of recent initiatives and successes in identifying, removing and preventing barriers
 - The identification and prioritization of barriers to be addressed and processes to address interim deficiencies when identified
 - The solicitation of feedback from staff, physicians, volunteers and the community regarding priorities and strategies to address barrier removal and prevention
 - A process to review, monitor, and evaluate the plan
 - Ensure ongoing organizational compliance with legislative requirements under Ontarians with Disability Act, 2001 (ODA) and the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) including newly identified requirements
 - Increase knowledge and awareness of accessibility among staff, physicians, Board members and volunteers as it relates to improving customer service, programs and clinical practice
 - Increase integration of accessibility planning principles into existing processes and cycles
 - Communicate the plan to staff, physicians, the Board of Directors, volunteers, the public and all users of the hospital premises

Members of the Accessibility Advisory Council

The following members make up the Accessibility Advisory Council:

Director, Human Resources and Occupational Health & Safety

Senior Director, Facilities and Corporate Services

Director, Capital Planning, Infrastructure and Plant Maintenance

Digital Communications Specialist, Communications & Public Affairs

Director, Engagement and Culture

Patient Relations Specialist

Coordinator, York South Community Living

Manager, Patient Scheduling and Registration

Manager, Occupational Health & Safety

Therapeutic Recreation Specialist

Patient Experience Participant

Executive Assistant

Commitment to Accessibility Planning

Oak Valley Health is firmly committed to supporting the rights and dignity of all persons with disabilities by providing safe and equal access to our facilities, services and programs. We demonstrate organizational commitment to accessibility by complying with the Ontarians with Disabilities Act, 2001 and the Accessibility for Ontarians with Disabilities Act, 2005.

Accessibility needs will be met in a respectful and timely manner, and we will continue to provide knowledge and awareness to advance accessibility throughout the organization.

Existing Processes for Identifying Barriers

The Council continually advances accessibility through barrier identification at regular meetings to review and to monitor the status of new and ongoing initiatives.

In addition to the specific work of the Council, methods by which accessibility barriers may be identified and addressed on an ongoing basis are integrated into the daily operations of Oak Valley Health. Below is a summary of these methods:

- Quality, risk and patient relations investigate and address patient, visitor and staff incidents as well as patient complaints related to risk and barrier issues.
- Patient feedback is obtained by random surveys being sent out to a selection of patients following discharge to assess their satisfaction with all of our services. As well, comment cards are available to all patients and visitors and include questions pertaining to accessibility.
- As a function of the employee hiring process, candidates are invited to present opportunities to the employer to support their accessibility.
- New hire health assessments are conducted by Occupational Health and Safety and are required for all staff. Employees are able to bring forward health issues requiring temporary or ongoing accommodation.
- Ergonomic assessments and accommodation requests are available for all

staff by contacting the Occupational Health and Safety department.

- Return-to-work accommodations are available to support accessibility in the disability management process.
- As a function of performance management, including attendance support, employees may wish to identify barriers to work accessibility.
- Updates are provided as-required to the Senior Leadership Team, Patient Services Operations Committee, Patient Services Executive Team, Operations Committee or Medical Advisory Committee, and the Human Resources staff meetings which include Occupational Health and Safety. The meetings provide an opportunity for feedback from the members.
- The Joint Health & Safety Committee which includes representation from management and front-line staff meets regularly to identify and address staff related concerns which can include accessibility issues.
- The organization ensures adherence to all current barrier free standards as per legislation, including ODA and AODA, for all construction and renovation projects.

The AAC will continue to consult and connect with organizations supporting individuals with disabilities as opportunities are presented.

Barrier Removal and Prevention for 2024 to 2029

Type of Barrier	Description	Strategy	Timeline 2024-2029
Physical	Uxbridge site to be rebuilt	Site-wide compliance with accessibility requirements	2029
Training	Revision of training for accessibility compliance	Updated e-learning platform capable of audio playback	2024
Communication	Website improvement from A to AA guidelines	Alt tags for more recent images	2025
Communication	Wayfinding	All new wayfinding to be AODA compliant	2023-2025

Physical	Pedestrian walkways	Installed tactile plates	2024
Physical	Pedestrian walkways	Install tactile plates Lot #1,2&6	2026
Physical	Pedestrian walkways	Upgrade walkways with improved accessibility	2026
Physical	Not all wheelchair accessible washrooms do not have tilt mirrors, lowered sinks and call bells	Washrooms to be retrofitted to meet standard.	2027
Physical	Assess all walkways and entrance to meet AODA	Hire a code consultant to assess property walkways through out	2026
Policies and Practice	Funding available for projects related to accessibility	Maintaining adequate funding and project priorities for barrier removals	2025-2029

Review and Monitoring Process

The AAC will review and monitor the status of the identified objectives outlined in this plan. An annual summary will be prepared and submitted to the province along with any other reporting that may be required.

Communication of the Plan

This approved Multi-year Accessibility Plan will be communicated to staff, physicians, Board members and volunteers, and the community through a variety of communication vehicles:

- Electronically via the intranet and the Oak Valley Health website: www.oakvalleyhealth.ca
- Printed copies, including large print and braille, can be made available upon request.

For further information regarding the Oak Valley Health Corporation Accessibility Plan, or to obtain a printed (including large print and braille) copy contact:

Markham Site: Public Relations

Markham Stouffville Hospital – Markham Site 381

Church Street, PO Box 1800

Markham, Ontario L3P 7P3

Voice: 905-472-7373

Fax: 905-472-7086

E-mail: corpcomms@oakvalleyhealth.ca

Website: www.oakvalleyhealth.ca

Appendix

Definitions

“accessible formats” may include, but are not limited to, large print, recorded audio and electronic formats, Braille and other formats usable by persons with disabilities

“barrier” means 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 information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice

“career development and advancement” includes providing additional responsibilities within an employee’s current position and the movement of an employee from one job to another in an organization that may be higher in pay, provide greater responsibility or be at a higher level in the organization or any combination of them and, for both additional responsibilities and employee movement, is usually based on merit or seniority, or a combination of them

“communication supports” may include, but are not limited to, captioning, alternative and augmentative communication supports, plain language, sign language and other supports that facilitate effective communications;

“communications” means the interaction between two or more persons or entities, or any combination of them, where information is provided, sent or received

“conversion-ready” means an electronic or digital format that facilitates conversion into an accessible format

“designated public sector organization” means the Legislative Assembly and the offices of persons appointed on the address of the Assembly, every ministry of the Government of Ontario, every municipality and every person or organization listed in Schedule 1 or described in Schedule 2 to this Regulation [429/07]

“disability” means,

- 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; (“handicap”)

“educators” means employees who are involved in program or course design, delivery and instruction, including staff of school boards

“extranet website” means a controlled extension of the intranet, or internal network of an organization to outside users over the Internet

“guide dog” under the Blind Persons’ Rights Act, which states that: a guide dog is a dog that has been trained as a guide for a blind person at one of the facilities listed in Ontario Regulation 58 under the Blind Persons’ Rights Act

“information” includes data, facts and knowledge that exists in any format, including text, audio, digital or images, and that conveys meaning

“internet website” means a collection of related web pages, images, videos or other digital assets that are addressed relative to a common Uniform Resource Identifier (URLI) and is accessible to the public

“intranet website” means an organization’s internal website that is used to privately and securely share any part of the organization’s information or operational systems within the organization and includes extranet websites

“kiosk” means an interactive electronic terminal, including point-of-sale devices, intended for public use that allows users to access one or more services or products or both

“medical aid” means an assistive device, including respirators and portable oxygen supplies

“mobility aid” means a device used to facilitate the transport, in a seated posture, of a person with a disability

“mobility assistive device” means a cane, walker or similar aid

“new internet website” means either a website with a new domain name or a website with an existing domain name undergoing a significant refresh

“new intranet website” means either an intranet website with a new domain name or an intranet website with an existing domain name undergoing a significant refresh

“performance management” means activities related to assessing and improving employee performance, productivity and effectiveness, with the goal of facilitating employee success

“provider of goods or services” means a person or organization to whom this Regulation [429/07] applies

“redeployment” means the reassignment of employees to other departments or jobs within the organization as an alternative to layoff, when a particular job or department has been eliminated by the organization

“regulations” means the regulations made under this Act, unless the context indicates or requires otherwise

“service animal” means an animal that is used by the person for readily apparent reasons relating to his or her disability, or the person has a letter from a physician or nurse verifying that the animal is required for reasons relating to his or her disability, or an identification card from the Ministry of the Attorney General

“support person” means, in relation to a person with a disability, another person who accompanies the person with a disability in order to help with communication, mobility, personal care or medical needs or with access to goods, services or facilities

“Web Content Accessibility Guidelines” means the World Wide Web Consortium Recommendation, dated December 2008, entitled “Web Content Accessibility Guidelines (WCAG) 2.0”

“web page” means a non-embedded resource obtained from a single Uniform Resource Identifier (URI) using Hypertext Transfer Protocol (HTTP) and any other resources that are used in the rendering or intended to be rendered together with it by a user agent

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References:

Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, Chapter 11

Accessibility for Ontarians with Disabilities Act, 2005, Ontario Regulation 191/11, Integrated Accessibility Standards

Ontarians with Disabilities Act, 2001, S.O. 2001, Chapter 32

² Participation and Activity Limitation Survey 2006, Statistics Canada

³ Ontario Population Projections 2008-2036, Fall 2009 Ministry of Finance Report