



# Stevenson Memorial Hospital

## Multi-Year Accessibility Plan 2025-2029

### Table of Contents

- 1.0 Executive Summary
- 2.0 Objectives
- 3.0 Strategic Plan
- 4.0 About Stevenson Memorial Hospital
- 5.0 Barrier Identification & Prioritizations
- 6.0 Current Identified Barriers & Multi-Year Plan
- 7.0 Highlights of Barrier-Free Initiatives Completed
- 8.0 Review and Monitoring Process
- 9.0 Communication of the Plan

## 1.0 Executive Summary

Stevenson Memorial Hospital (SMH) is committed to ensuring that staff, patients, visitors and volunteers are able to access the hospital safely. The hospital highly values and strives to follow all accessibility standards to ensure that all individuals, including those with disabilities, can access healthcare services without barriers.

Patient experience is a top priority at SMH, as it is always our goal to provide positive, high quality health care services for patients. Reducing barriers to accessing care is an important way that the patient experience is prioritized and addressed at the hospital. It is imperative that patients and visitors with disabilities receive equal treatment and can navigate hospital services with ease, experiencing an inclusive and supportive environment.

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.

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.

We are pleased to provide a five-year Accessibility Plan that outlines our strategic direction with regards to accessibility that highlights current barrier-free initiatives that have been completed and future plans that embrace the Integrated Standards of the AODA.

## 2.0 Objectives

This plan includes the following objectives:

- Describe the process by which SMH will identify, prevent, reduce and/or remove barriers to persons with disabilities.
- Outlines the process by which the status of each barrier is reviewed and monitored.
- Outlines the process by which new barriers are identified and included in future plans.
- Describes how SMH will make this accessibility plan available to the public.

## 3.0 Strategic Plan

This is a pivotal time in the evolution of our hospital, marked with current and forecasted growth in our community and a newly redeveloped hospital on the horizon. As a community hospital that provides compassionate, high quality patient care, we live by our vision, mission and values everyday.

**Vision:** Setting A New Standard in Community Hospital Care

**Mission:** Promising Progress, Pursuing Perfection

**Values:**

I.C.A.R.E.

**Integrity** – We adhere to the highest ethical standards.

**Compassion** – We respond to our patients' needs with empathy.

**Accountability** – We are accountable to one another and to our community.

**Respect** – We embrace the diversity of our patients, staff and community.

**Excellence** – We support a culture of distinction.

At SMH, we will bring our vision of patient-centered care to life through the following four pillars:

**People**

Creating a work environment that values and recognizes the contribution of every staff member in creating a positive patient care experience. Creating and upholding a culture of continuous learning, focused on collaboration and teamwork.

**Care**

Keeping the patient at the center of every care discussion and decision. Ensuring that patient values inform every aspect of delivery.

**Partnerships**

Working collaboratively with local and community health care providers to continue to develop our care network and availability to offer a seamless care experience for our patients.

**Investments**

Operating appropriately within fiscal constraints to maximize investments in staff, equipment, infrastructure and improvement to provide high quality care for present and future patients.

## 4.0 About Stevenson Memorial Hospital

Stevenson Memorial Hospital is community hospital located in Alliston, in the Town of New Tecumseth, Ontario. Situated one hour north of Toronto, the hospital offers 38 inpatient beds, a 24/7 Emergency Department, Laboratory, Diagnostic Imaging, Maternal Health & Obstetrics, Surgery and a wide range of outpatient services, including Dialysis and Mental Health.

SMH serves a catchment area that includes Adjala-Tosorontio, Canadian Forces Base Borden, Essa, Innisfil and New Tecumseth (Alliston, Beeton and Tottenham). New Tecumseth is the seventh fastest growing municipality in Canada as per the 2021 Census and has seen a 28 per cent growth in population since 2016.

In fiscal year 2023/24, SMH reported:

- 408 employees, 158 physicians, dentists and midwives, 70 volunteers & 25 student volunteers
- 31,278 Emergency Department visits
- 24,246 Outpatient Clinic visits
- 4,210 surgical procedures
- 459 births
- 3,510 dialysis treatments
- 36,298 diagnostic imaging tests
- 13,410 inpatient days

The hospital's Emergency Department was built to manage 7,000 visits a year and now sees almost 35,000. Originally built in 1964, the hospital's current facility is in much need of an expansion, and we are pleased to share that preliminary site preparations are underway to support the construction of a new 146,200 square foot facility that will wrap around the current hospital building, supported by the Ministry of Health. Construction of the new facility is anticipated to begin in late 2025 and be complete in 2028.

The new expansion will triple the size of the hospital and will revitalize many clinical areas, including:

- **Emergency Department:** The Emergency Department will triple in size and include a separate entrance, as well as enclosed Ambulance Bays.
- **Laboratory:** Expanded laboratory space to meet the needs of a growing patient population.
- **Medical/Surgical (Inpatient Unit):** Increased inpatient bed capacity (20% more beds) and 100% single occupancy rooms.
- **Diagnostic Imaging:** Expanded diagnostic imaging space, including the addition of an MRI suite for advanced imaging.
- **Surgical Suite:** Three new, state-of-the-art operating rooms to provide timely surgical services.
- **Obstetrics (Birthing Unit):** Third floor of new facility is dedicated to the Obstetrics Unit. Will feature bright, new patient rooms with family-friendly spaces.
- **Pharmacy:** Expanded pharmacy space to support patient care.
- **Medical Device Reprocessing:** Enhanced space for reprocessing of medical devices for safe and efficient patient care.
- **Environmental Services:** Increased space for environmental services to support hospital operations.
- **Materials Management:** Expanded space to improve materials management and hospital logistics.

The design features significant use of natural light, modern features, new and enhanced parking lots and refreshed gardens and green space. A new, elevated helipad will also be a part of the project.

The new facility will be based on best practice standards and meet all accessibility requirements, as extensive planning took place with accessibility and design consultants.

Our goal as a community hospital is to provide quality patient care that meets the needs of our growing community.

We are developing a strong vision for the future of Stevenson Memorial Hospital, centered on a revitalized hospital, cutting-edge equipment, and comfortable, modern space for patients and families to receive health care close to home.

## **5.0 Barrier Identification & Prioritization**

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

### **Barrier Identification**

These barriers can be categorized as follows:

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

Methods to identify, track and address barriers include:

- Identification of potential accessibility issues by the Patient Experience Office through an incident
- RL6 incident reporting software module
- Feedback from the SMH Auxiliary (Volunteer Services) and Patient and Family Advisory Council
- Occupational Health & Safety reviews/audits
- Feedback from the public/community via SMH website or email: [communications@smhosp.on.ca](mailto:communications@smhosp.on.ca) or [patientexperience@smhosp.on.ca](mailto:patientexperience@smhosp.on.ca)
- Facility reviews conducted by members of the Facilities Department and Senior Friendly Committee
- Feedback from Human Resources team, staff and professional staff
- Joint Health & Safety Committee recommendations.

### **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
- A way to avoid a barrier i.e. "work around"
- Available resources/capacity assessment (cost/construction/phasing/timing)

- Coordination with other renovation projects and communication at SMH's Space Committee and EDI Committee

## 6.0 Current Identified Barriers & Multi-Year Plan

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

Type of Barrier	Description	Resolution	Timeline
Physical/Architectural	Hospital has equipment in hallways.	New hospital facility will have widened hallways and designated storage for equipment for each clinical department.	To be completed by June, 2029
Physical/Architectural	Only 1 public washroom has undergone renovations for accessibility purposes. (i.e. power-operated door, call system, wheelchair turn radius).	All washrooms in new facility will meet accessibility standards.  All public washrooms will include handrail supports/grab bars in current facility.  Lower level public washroom to undergo renovation to add grab bars and a power-assisted door.	To be complete by June, 2029.  To be complete by June, 2025.  To be complete by June, 2025.
Physical/Architectural	Entry to staff change rooms is not accessible (narrow doorway).  Various hospital doorways (other than in patient rooms) are narrow, too small for wheelchairs.	All staff change rooms in new facility will meet accessibility standards.  All doorways in new facility will meet accessibility standards.	To be complete by June, 2029.  To be complete by June, 2029.
Policy/Practice	Ensure all hospital policies and emergency plans are reviewed to ensure accessibility is reflected.	Create Accessibility Committee to include facilities, occupational health, human resources, communications, IT, patient experience/ quality & risk staff as well as SMH Auxiliary and patient & family	To be complete by June, 2025

		advisory council representation for annual review.	
Information/Communication	Patient Handbook isn't available in various alternate formats.	Ensure all promotional material, public documents are provided in alternative formats for accessibility purposes.	To be complete by June, 2025.
Technological	A (TTY) Teletypewriter is not available for hearing or speech-impaired patients.	Purchase a TTY for patient/staff use to communicate/make a phone call as needed in the hospital.	To be complete by 2029.

### 7.0 Highlights of Barrier-Free Initiatives Completed

Type of Barrier	Description	Action
Physical/Architectural	Walkway to staff entrance not accessible.	2019 - New staircase and accessible ramp constructed.
Physical/Architectural	Dated elevator with functional challenges.	2019 – New elevator installed with lowered buttons (accessible by individuals in wheelchair), including Braille on buttons to support blind/visually impaired persons, as well as voice/audio command.
Physical/Architectural	Emergency Department (ED) washroom with closest proximity to waiting room not fully accessible.	2020 - ED washroom was outfitted with power-assisted door, automatic flush, handrail supports and emergency distress call function.
Physical/Architectural	Evacuation plan/tool needed for those with mobility needs.	2020 – Stryker evacuation chair installed on second floor of hospital and training provided for use in evacuating patients with mobility limitations.
Physical/Architectural	Dated lighting throughout the hospital not supportive of visually impaired persons.	2022 - All hospital patient rooms, hallways and common areas were replaced with new LED lights, creating brighter spaces. External parking lot LED lights were also installed.
Information/Communication	Patients/visitors having difficulty navigating hospital clinical areas.	2023 - New wayfinding enhancements were installed including directional floor decals, hanging signage and wall signage with colour contrast for

		ease of readability for colour blind.
Information/Communication	Captioning on TVs in common areas and patient rooms to support those with hearing impairments.	Captioning is available on TVs in common areas. A TV upgrade for patient rooms will be complete in March 2025, which will include enhancements, including captioning.
Information/Communication	Dated overhead paging system.	2023 - Overhead paging system has been upgraded to ensure clear, audible messaging is delivered throughout the hospital.
Physical/Architectural	Dated wheelchairs to transport patients with mobility limitations.	2024 – Thanks to the SMH Auxiliary, six new Staxi chairs were purchased, ergonomically built to provide comfort and ease of transfer for patients with mobility limitations.
Information/Communication	Website enhancements to meet all accessibility standards.	2025 - New website launched in 2025 that meets WCAG 2.0 Level AA requirements, with ongoing updates to PDF documents to ensure all are accessible.

### 8.0 Review and Monitoring Process

An Accessibility Committee will be created in 2025 with a plan to meet quarterly. Relevant updates will be brought forward to the Equity, Diversity and Inclusion (EDI) Committee, Senior Friendly, Emergency Planning and Space Committees.

The committee will be responsible for ensuring the accessibility plan is reviewed annually and that accessibility projects move forward on a timely basis.

The Executive Leadership Team will be updated annually on accessibility projects and progress.

### 9.0 Communication of the Plan

SMH’s Multi-Year Accessibility Plan will be posted on the hospital’s external website [www.stevensonhospital.ca](http://www.stevensonhospital.ca). Hard copies are available in the Human Resources office. Copies of the plan in an accessible format will be made available on request by contacting Corporate Communications: [communications@smhosp.on.ca](mailto:communications@smhosp.on.ca). Comments and feedback regarding the plan may be submitted via SMH website Feedback Form, monitored by Patient Experience or by emailing Patient Experience directly: [patientexperience@smhosp.on.ca](mailto:patientexperience@smhosp.on.ca).