



### **Renovation and/or Expansion of a Facility**

A significant or material renovation should be reported to the CVBC office as per Bylaw 3.6(9b).

Every facility undergoing a renovation/expansion will have different circumstances. Please inform the office of the general details of your renovation and/or expansion including any scopes of practice you may be adding.

**The facility may start using the new space as soon as the designated registrant (DR) feels satisfied that the relevant accreditation standards are met. The facility does not need to wait for CVBC approval prior to offering the new services.**

Please promptly communicate to the office of any significant updates or delays relating to your renovation and/or expansion and when it is completed.

#### General process:

1. The office is notified by the DR of the facility regarding the upcoming renovation and/or expansion.
2. If the renovation and/or expansion includes the addition of new services, then provide an updated Annual Declaration that includes the new scope(s) of practice (SoP).
3. If the project is complex with multiple SoP changes/increase, the CVBC office will present these materials to the PFAC who will likely direct an inspection once completed.
4. If it is a less significant renovation, the CVBC office will request items and/or photos relevant to the renovation once and/or expansion once complete to evaluate compliance with the standards. This may or may not include the following:
  - a. Broad view photos of the new area
  - b. Any equipment that's going to be used in the new area
  - c. Certificates of Safety, dosimeters, template for log(s), and shielding assessments for equipment that produces ionizing radiology
  - d. Appropriate PPE where applicable.
  - e. Other submissions as requested.
5. The Senior Inspector (Facilities) will review the submissions and generate an inspection report.

6. The notification and if applicable, the inspection report, will be presented to the PFAC, which may result in either:
  - a. The PFAC is satisfied that the relevant standards are met, and no further actions is needed from the practice facility; OR
  - b. Pursuant to bylaw 3.18(1), the PFAC will direct an inspection, with a related fee, to determine if the relevant standards are met.
7. If the decision was 6b, then the practice facility will be assigned to an inspector, and the office may request further documents/photos.
  - a. The inspector will generate inspection notes and outcome form.
  - b. The inspection outcome form will be shared with the designated registrant of the facility. This may include post-inspection submissions, if necessary.
  - c. The facility will be presented back to PFAC.
8. The office will convey any further PFAC direction to the DR of the facility.