

Ministry for Seniors and Accessibility

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2019 Accessibility Compliance Report



You must complete the mandatory fields on each page before you can move to the next page. Mandatory fields are marked with an asterisk (*).

To start, save the form on your computer. Be sure to open the form with Adobe Reader 10 or higher. You can save the form at any point in the process and return to it later. You may distribute the form within your organization for input before submitting.

You need the following to file your accessibility compliance report:

- · organization legal name
- 9-digit business number (BN9). This is the number that Canada Revenue Agency uses to identify your organization. You can find it on your federal or provincial tax return. If your organization does not have a business number (BN9), contact us to receive an AODA identifier to be used in place of a business number (BN9).
- · organization category (OPS/OLA, Designated Public Sector, Business/Non-profit)
 - if you are a business or a non-profit, your Organization category is Business/Non-profit
 - if you are a municipality, or a hospital, college, university, school board, public transportation provider (under Schedule 1 of Ontario Regulation 191/11), or an agency, board or commission (under Column 1 of Table 1 of Ontario Regulation 146/10), your Organization category is Designated Public Sector

Note: If you select the wrong organization category, you may see questions that do not apply to you. You will need to correct the category and enter your data again to successfully submit your report.

- number of employees in your organization in Ontario
- name and contact information of your certifier (a director or senior officer with legal authority to say that the report is complete and accurate)

File for up to 20 organizations at once

You can use one form to file a report for up to 20 organizations. To do so, you need each organization's:

- · legal name
- · business number (BN9) or AODA identifier
- · number of employees in Ontario
- address

Each organization must have the same:

- · organization category
- number of employees range (e.g. 20-49, 50+)
- · certifier
- answers to all of the accessibility compliance questions

If not, you will need to complete a separate form for each organization.

Note: Users of assistive technology should pull up a list of buttons to get a list of the links on the form.

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Begin your report

Follow these steps to complete your form:

1. Download and save the form

- · Download and save the form on your computer
- · Open the form with Adobe Reader 10 or higher

2. Enter your organization's information

Enter your organization's information then select Next

3. Understand your requirements

• If you need information about the requirements, select the website link in section B: Understand your accessibility requirements. This will bring you to our website where you can see your past, current and future requirements.

4. Answer the questions

- The questions on the form are based on the requirements that apply to your:
 - organization category
 - number of employees range
- Select **Yes** (if you are in compliance) or **No** (if you are not in compliance) for each question. You may add comments in the comment box below each question.
- · Each report question has links to:
 - the regulation section that is related to that question
 - helpful resources to help you understand and comply with the requirements
- · Once you have answered all of the questions, select Save form at the bottom of the page before selecting Next
- · Review the accessibility compliance report summary.

5. Certify and submit your report

- Complete the Certifier Information section
- The certifier must:
 - make sure all information on the form is complete and accurate
 - check all three boxes to show they have authority to certify your organization
 - enter the certification date or select it from the drop down calendar
- Enter your organization's primary contact. This is the person to be contacted if more information is needed. This person may be the certifier or a different person.
- You may save the form at any time by selecting the Save form button. When you are ready to submit your report, select the Save and Submit button. You will be prompted to save the form on your computer first and then it will be submitted.
- · Wait for a confirmation prompt with a confirmation number that either confirms submission or indicates any problems.
- Once the report is received, an email will be sent to the Certifier and the Primary Contact. This email will include:
 - a confirmation number
 - an accessible PDF copy of your report

If you have not received a confirmation number upon successfully submitting the form or have any questions please contact the AODA Contact Centre (ServiceOntario) at:

Toll free phone: 1-866-515-2025

TTY Toll free: 1-800-268-7095

Phone: 416-849-8276

TTY: 416-325-3408

Email: accessibility@ontario.ca

Accessible alternate formats

If you need the accessibility compliance report in an accessible format, please email accessibility@ontario.ca.



Instructions

Ministry for Seniors and Accessibility

2019 Accessibility Compliance Report

information	ou provide is subj	ect to the Fre	edom of Informa	tion and Protec	tion of Privacy A	ct.
Fields marked v	vith an asterisk (*)	are mandator	ry.			_
A. Organizati	on information					
Organization cate	egory *			Number of emplo	oyees range *	Reporting year
Designated Po	Pesignated Public Sector 50+ employees		es	2019		
Business deta	ils					
Organization lega	al name *				Number	of employees in Ontario * Help
The Corporati	on of the Town o	f South Bruc	e Peninsula		145	
Business number 868033135	(BN9) * Help		box if you have red Seniors and Acces		identifier from the	
✓ Check if opera	ating/business name	is same as leg	al name			
Organization ope	rating/business nam	е			Language	preference for communications *
The Corporation	on of the Town o	f South Bruc	e Peninsula		English	
Sector that best of	lescribes your organ	ization's princip	al business activity	y *	Help	
91 - Public ad	ministration					
Subsector (if pos	•			Industry group (
913 - Local, municipal and regional public administration 9139 - Other local, municipal and regional public adm					al and regional public administr	
Mailing addres	s					
Address where le	tters can be sent to t	he person resp	onsible for coordin	ating the organization	ation's AODA com	pliance activities.
Country *) Canada		USA	(◯ International	
Type of address	Street addr	ess (Street address s	served by route (Other	
hit number	Street number *	Street name	*			
Box310	315	George				
Street type	Street direction		City *			Province *
Street			Wiarton			ON (Ontario)
Postal code * N0H 2T0						
Business addr	ess					
(Address at which	letters can be sent	to the company	director/officer ac	countable for the	organization's cor	mpliance with the AODA.)
✓ Check if busin	ess address is same	as mailing add	dress			
Country *) Canada) USA	(International	
Type of address *			Street address s	erved by route (Other	
Unit number Box310	Street number * 315	Street name	*			
Street type	Street direction		City *			Province *
Street			Wiarton			ON (Ontario)
Postal code * N0H 2T0						

Use the "Add new organization" button to add additional organizations to which this accessibility report is to be applied (maximum 20).

Note: All organizations must have the same organization category, number of employees range, compliance answers and certifier, and have different business numbers, in order to file under the same form.

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2019 Accessibility compliance report

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Organization category Designated Public Sector	Number of employees range 50
Filing organization legal name The Corporation of the Town of South Bruce Per	ninsu
Filing organization business number (BN9) 868033135	
Fields marked with an asterisk (*) are mandatory.	
B. Understand your accessibility requirements	
Before you begin your report, you can learn about your accessibility requirements at ont	ario.ca/accessibility
Additional accessibility requirements apply if you are: • a library board	
 a producer of education material (e.g. textbooks) 	
 an education institution (e.g. school board, college, university or school) 	
• a municipality	
C. Accessibility compliance report questions	
Instructions	
Please answer each of the following compliance questions. Use the Comments box if you wish to	comment on any response.
If you need help with a specific question, click the help links which will open in a new browser wind relevant AODA regulations and the link on the right to view relevant accessibility information resources.	
. oundation requirements	
Does your organization have written accessibility policies and a statement of commitment? *	
Read O. Reg. 191/11 s. 3: Establishment of accessibility policies Learn mo	re about your requirements for question
Comments for https://www.southbrucepeninsula.com/en/townhall/accessibility.aspagestion 1	p
 Has your organization established, implemented and maintained a multi-year accessibility plans posted it on your organization's website? * 	and Yes No
Read O. Reg. 191/11 s. 4: Accessibility plans	re about your requirements for question
Comments for https://www.southbrucepeninsula.com/en/townhall/accessibility.aspquestion 2	o O
3. Has your organization completed a review of its progress implementing the strategy outlined in accessibility plan and documented the results in an annual status report posted on the organizal website? *	
	re about your requirements for question
Comments for https://www.southbrucepeninsula.com/en/townhall/accessibility.aspagestion 3	
4. Did your organization consult with people with disabilities when establishing, reviewing and updated multi-year accessibility plan? *	ating its Yes No
	re about your requirements for question
Comments for We consulted with individuals with different disabilities (vision, mobilestion 4	oility, physical)

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Does your or Regulation a	Yes	○ No		
Read O. Reg.	191/11 s. 7: Training	Learn more about your re	equirements for	question 5
Comments for estion 5	http://www.ohrc.on.ca/en/learning/working-toge	ther-code-and-aoda		
how its good	ganization established and documented a process to receive Is or services are provided to persons with disabilities, include will take when a complaint is received? *		Yes	○ No
Read O. Reg. 1	191/11 s. 80.50: Feedback process required	Learn more about your re	equirements for	question 6
Comments for question 6	https://www.southbrucepeninsula.com/en/townh	nall/accessibility.asp		
providing or the public of	rganization ensure that its feedback processes are accessib arranging accessible formats or communication supports, u this accessible feedback policy? *		Yes	○ No
Read O. Reg. 1	191/11 s. 11: Feedback	Learn more about your re	equirements for	question 7
Comments for question 7	https://www.southbrucepeninsula.com/en/townh	nall/accessibility.asp		
Information	and communications			
persons with	rganization have a process to provide accessible formats an disabilities in a timely manner and at no more than the cost ormation, and do you notify the public of this accessible info	for other persons who ask for	Yes	○ No
Read O. Reg. 1	191/11 s. 12: Accessible formats and communications support	<u>Learn more about your re</u>	equirements for	question 8
Comments for question 8	https://www.southbrucepeninsula.com/en/townh	all/accessibility.asp		
nployment				
	rganization notify its employees and the public about the avant process? *	ailability of accommodations in	Yes	○ No
Read O. Reg. 1	191/11 s. 22-24; Recruitment	Learn more about your re	equirements for	question 9
Comments for question 9	https://southbrucepeninsula.civicweb.net/filepro.https://www.southbrucepeninsula.com/en/townh	•		
	organization notify successful applicants of its policies for ac during offers of employment? *	commodating employees with	Yes	○ No
Read O. Reg. 1	191/11 s. 24: Notice to successful applicants	Learn more about your re	quirements for	question 10
Comments for question 10				
	organization develop and have in place a written process for d individual accommodation plans for employees with disab		Yes	○ No
Read O. Reg. 1	191/11 s. 28: Documented individual accommodation plans	Learn more about your re	equirements for	question 11
Comments for question 11	https://southbrucepeninsula.civicweb.net/filepro.https://southbrucepeninsula.civicweb.net/filepro.https://www.southbrucepeninsula.com/en/townhto-2	documents/33329?preview=33	480	2018-

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* Transportation				
	anization provide transportation services? * Il be required to answer an additional question.)			No
	/11 Part IV: Transportation standards	Learn more about your re	equirements for	r question 12
	ur organization conduct employee and volunteer accessibility training illity equipment and features of your transportation vehicles? *	on the safe use of	○ Yes	O WAS
	191/11 s. 36: Accessibility training	Learn more about your re	quirements for	r question 12.a
Comments for question 12.a				
Design of publ	ic spaces		_	
new or redeve	panization last reported on its accessibility compliance, has your orga eloped existing off-street parking facilities that it intends to maintain? " Il be required to answer an additional question.)		○ Yes	No
	/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements for	r question 13
to mainta	Instructing new or redeveloping off-street parking facilities that your oran, does it ensure that the off-street parking facilities meet the accessed in sections 80.32 – 80.37 of the IASR? *		○ Yes	O No
Read O. Reg. Comments for question 13.a	80.32-37: Accessible parking	Learn more about your re	equirements for	r question 13.a
new or redeve (If Yes, you wi Read O. Reg. 191 14.a. When co consult w you repre- where or	panization last reported on accessibility compliance, has your organization last reported on accessibility compliance, has your organizatioped existing outdoor public spaces that it intends to maintain? * If the required to answer additional questions.) If the required to answer additional questions are standards If the required to answer additional questions. If the required to answer additional questions.) If the required to answer additional questions.) If the required to answer additional questions.) If the required to answer additional questions.)	Learn more about your re r organization and caregivers, and if advisory committee	YesYesYes	No r question 14 No
Regulation Read O. Reg.	on? * 191/11 <u>s. 80.19: Outdoor play spaces</u>	Learn more about your re	equirements for	question 14.a
Comments for question 14.a				
emergen temporai	ur organization's multi-year accessibility plan include procedures for pacy maintenance of the accessible elements in public spaces, and for ry disruptions when accessible elements required under the Integrated Regulations Part IV are not in working order? *	dealing with	Yes	○ No
Read O. Reg.	191/11 s. 80.44: Maintenance of accessible elements	Learn more about your re	quirements for	question 14.b
Comments for question 14.b	Included in our Customer Service Policy https://southbrucepeninsula.civicweb.net/filepro/docum Included in our Multi Year Plan https://www.southbrucepeninsula.com/en/townhall/reso Plan-2018-to-2022.pdf			
Customer serv	<u>'</u>			
15. In your policies keep their sen third parties, e	s, practices and procedures, does your organization permit persons with vice animals with them on the parts of your premises that are open to except where the animal is excluded by law? If excluded by law, does aways for people with service animals to access and use your goods,	the public or other your organization	Yes	○ No
	/11 s. 80.47(1-3): Use of service animals and support persons	Learn more about your re	quirements for	question 15
	ttps://southbrucepeninsula.civicweb.net/filepro/documenttps://southbrucepeninsula.civicweb.net/filepro/documen			

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General requirements			
16. Other than the requirements cited in the above questions, is your organi applicable requirements for the information and communications stated Integrated Accessibility Standards Regulation? *		Yes	○ No
Pead O. Reg. 191/11 Part II: Information and communications standards	Learn more about your r	equirements for	question 16
mments for question 16 https://www.southbrucepeninsula.com/en/townh-https://southbrucepeninsula.civicweb.net/filepro/		1978	
17. Other than the requirements cited in the above questions, is your organi applicable requirements for the employment standards in effect under Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part III: Employment standards	Learn more about your r	equirements for	question 17
Comments for question 17			
18. Other than the requirements cited in the above questions, is your organi applicable requirements for the transportation standards in effect under Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part IV: Transportation standards	Learn more about your r	equirements for	question 18
Comments for question 18 19. Other than the requirements cited in the above questions, is your organic		(iii) Yes	○ No
applicable requirements for the design of public spaces standards in Accessibility Standards Regulation? *	effect under the Integrated	0	0
Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards	Learn more about your r	equirements for	question 19
Comments for question 19			
Other than the requirements cited in the above questions, is your organia applicable requirements for the customer service standards under the Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part IV.2: Customer service standards	Learn more about your n	equirements for	question 20
Comments for question 20			
21. Other than the requirements cited in the above questions, is your organize general requirements in effect under the Integrated Accessibility Standar		Yes	○ No
Read O. Reg. 191/11 Part I: General requirements	Learn more about your re	equirements for	question 21
Comments for question 21			

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2019 Accessibility Compliance Report

Organization catego	ry Desi	gnated Public Sector		Number of	Number of employees range 50+			
Filing organization le	gal nam	ne The Corporation of	the Town of South Bruce Po	eninsu				
Filing organization b	usiness	number (BN9) 86803	3135					
Fields marked with an	asterisk	(*) are mandatory.						
D. Accessibility co	mplianc	e report summary						
Your responses to the o			ort indicate that your organizat	ion is in complia	nce with AODA standards.			
		e report certification						
Section 15 of the Access	ibility for C	Ontarians with Disabilities A	ct, 2005 requires that accessibility igned by a person with authority to					
Note: It is an offence und	der the Ac	t to provide false or mislead	ling information in an accessibility	report filed under	the AODA.			
The certifier may designa will be the main contact.	ate a prima	ary contact for the Ministry f	for Seniors and Accessibility to cor	ntact the organizat	tion(s); otherwise the certifier			
Certifier: Someone who	can legall	y bind the organization(s).						
Primary Contact: The pe	erson who	will be the main contact for	r accessibility issues.					
cknowledgement								
✓ I certify that I have the	e authority	to bind all organizations sp	pecified in Section A of this form, *					
✓ I certify that all the re-	quired info	rmation has been included	in this report, and, *					
✓ I certify that the inform	nation in tl	his report is accurate. *						
Certification date (yyyy-n	nm-dd) *	2019-12-13						
Certifier information								
Last name * Cathrae			First name * Angela					
Position title * Other		Position title other * Clerk	Business phone numbe 519 534-1400	Extension 122	Check here if TTY			
Email * angie.cathrae@southbrucepeninsula.com			Alternate phone numbe	r Extension	Fax number 519 534-4862			
Primary contact for t	he organ	ization(s)						
✓ Check if the primary of	contact is	same as the certifier						
Last name * Cathrae			First name * Angela					
Position title * Other		Position title other * Clerk	Business phone number 519 534-1400	Extension 122	Check here if TTY			
Email * ngie.cathrae@southbrucepeninsula.com			Alternate phone numbe	r Extension	Fax number 519 534-4862			