

Ministry for Seniors and Accessibility

2021 Accessibility Compliance Report

Dec 1,2021

odon website

Completing your 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)

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

a 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.

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. Certify your report

- Complete the Certifier Information section
- · The certifier must:
 - make sure all information on the form is complete and accurate
 - check the box 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.

5. 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.

6. Submit your report

- 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

Accessible alternate formats

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



structions

All information you provide is subject to the Freedom of Information and Protection of Privacy Act.

If you are a public sector organization with **20 or more employees** that is not designated under the <u>Integrated Accessibility Standards Regulation (IASR)</u> you are to comply with the IASR as a private/not-for-profit organization and complete the appropriate Accessibility Compliance Report. If you are a public sector organization with **fewer than 20 employees** that is not designated under the <u>IASR</u>, you are to comply with the IASR as a small business/non-profit organization and are exempt from the requirement to submit a report.

Fields marked with an asterisk (*) are mandatory.

A. Organizatio	n information					
Organization cate	egory *			Number of employees	s range *	Reporting year
Designated Put	olic Sector			50+ employees		2021
Business deta	ils					
Organization lega						of employees in Ontario * <u>Help</u>
	n of the Town of S				142	
Business number 868033135	r (BN9) * <u>Help</u> [ve received an AODA iors and Accessibility	identifier	
Check if opera	ating/business name	e is same a	s legal name			
Organization ope	rating/business nar	ne				
	n of the Town of S					
Sector that best of - Public adm	lescribes your orga inistration	nization's p	rincipal business	activity *	<u>Help</u>	
ubsector (if pos				Industry group (if pos	ssible)	
913 - Local, mu	nicipal and regior	al public a	dministration			
Mailing addres	SS					
Address where le	tters can be sent to	the person	responsible for o	coordinating the orgar	nization's A	ODA compliance activities.
Country *						
The fields below	will change based o	n your sele	ction.			
Canada	\bigcirc U	JSA		⊖ Internatio	nal	
Type of address '	 Street addre 	ss C) Street address	served by route	Other	
Unit number Box310	Street number * 315	Street nam George	ne *			
Street type	Street direction	1	City *		1	Province *
Street			Wiarton		(ON (Ontario)
Postal code (e.g. N0H 2T0	A1A 1A1) *					
Business addr	ess					
(Address at which	letters can be sent	to the comp	any director/office	er accountable for the	organizatio	n's compliance with the AODA.)
Check if busin	ess address is sam	e as mailing	g address			
Country *						
The fields below	will change based o	n your sele	ction.			
Canada	\bigcirc U	JSA		⊖ Internatio	nal	
Type of address '	Street addre	ss C) Street address	served by route	Other	

Unit number Box310	Street number * 315	Street name * George		Street type Street	Street direction
City * Wiarton			Province * ON (Ontario)	P	ostal code (e.g. A1A 1A1) * 0H 2T0



2021 Accessibility compliance report

Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name The Corporation of the Town of South Bruce Peninsu

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 ontario.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

If you are a municipality submitting this report, and submitting on behalf of local boards, please indicate which boards below. Police Services Board Miarton BIA

C. Accessibility compliance report certification

Section 15 of the Accessibility for Ontarians with Disabilities Act, 2005 requires that accessibility reports include a statement certifying that all the required information has been provided and is accurate, signed by a person with authority to bind the organization(s).

Note: It is an offence under the Act to provide false or misleading information in an accessibility report filed under the AODA.

The certifier may designate a primary contact for the Ministry for Seniors and Accessibility to contact the organization(s); otherwise the certifier will be the main contact.

Certifier: Someone who can legally bind the organization(s).

Primary Contact: The person who will be the main contact for accessibility issues.

Acknowledgement

I certify that all the information is accurate and I have the authority to bind the organization *

Certification	ı date	(yyyy-mm-dd)	*	2021-12-01
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Certifier information

Last name *		First name * Angela			
Director	Business phone number * 519-534-1400	Extension Check here 122 if TTY			
Email * angie.cathrae@sout	hbrucepeninsula.com	Alternate phone number Extension Fax number			

Primary contact for the org	ganization(s)						
Check if the primary contact Last name * Cathrae	is same as the certifier		First nan Angela	ne *			0
Position title * Director	Business phone number * 519-534-1400	Ext 122	ension	Check he if TTY	re		
Email * angie.cathrae@southbrucep	eninsula.com		Alternate	e phone number	Extension	Fax numbe	r
D. Accessibility complian	nce report questions		· · · ·				
Instructions							
Please answer each of the follow If you need help with a specific of view the relevant AODA regulation	question, click the help links	whic	h will ope	n in a new brows	ser window. L	Jse the link o	
Municipal Accessibility Ad	visory Committees						
1. Is your organization a munic (If Yes, you will be required Read Accessibility for Ontarians	to answer additional question	ns.)) or more	? * Learn more abo	out your requ	⊖Yes irements for	No question 1
2005, c. 11, s. 29: Municipal Ac	cessibility Advisory Committe	ees					
1.a. Has your organization outlined in section 29 ((If Yes, you will be reg				nittee as		⊖Yes	() No
Read Accessibility for Ontar 2005, c. 11, s. 29: Municipal	ians with Disabilities Act, 20	05, S	.0.	Learn more abo	<u>out your requ</u>	irements for	question 1.a
Comments for question 1.a							0
2. Are the majority of the memb	ers of the committee persons	s with	n disabilit	ies? *		() Yes	() No
Read Accessibility for Ontarians 2005, c. 11, s. 29 (3): Municipal	s with Disabilities Act, 2005,	S.O.		Learn more ab	out your requ	Ŷ	\bigcirc
Comments for question 2							
3. Has the committee provided (as described in S.41 of the requirements and implement	Planning Act) as well as adv	vice o	on the	awings		() Yes	⊖ No
Read Accessibility for Ontarians 2005, c. 11, s. 29 (4): Municipal	with Disabilities Act, 2005,	S.O.		Learn more ab	out your requ	iirements for	question 3
Comments for question 3							
Foundational requirement	S						
 Does your organization have commitment? * 	e written accessibility policie	s tha	t include	a statement of		• Yes	⊖ No
Read O.Reg. 191/11 s. 3: Estat	blishment of accessibility poli	cies		Learn more ab	<u>out your requ</u>	irements for	question 4
-	outhbrucepeninsula.com/e Plan-2018-to-2022.pdf	en/to	wn-hall/	resources/Acce	essibility/Mul	lti-Year-	

Read O. Reg.	191/11 s. 3 (3): Establishment of accessibility policies	Learn more about your re	equirements for	question 5
mments for yuestion 5	https://www.southbrucepeninsula.com/en/town-ha	all/accessibility.aspx		
	rganization established, implemented, maintained and p y plan on your organization's website? *	osted a multi-year	• Yes	⊖ No
Read O. Reg.	<u>191/11 s. 4: Accessibility plans</u>	Learn more about your re	equirements for	question 6
Comments for question 6	https://www.southbrucepeninsula.com/en/town-ha	all/accessibility.aspx		
in its acces	rganization completed a review of its progress implements ibility plan and documented the results in an annual state on's website? *		• Yes	⊖ No
Read O. Reg.	<u>191/11 s. 4 (1), 4(3): Accessibility plans</u>	Learn more about your re	equirements for	question 7
Comments for question 7	https://www.southbrucepeninsula.com/en/town-harenoval-of-barriers-to-accessibility	all/accessibility.aspx#Annua	al-reports-on-t	he-
	ganization consult with people with disabilities when esta s multi-year accessibility plan? *	ablishing, reviewing and	• Yes	⊖ No
Read O. Reg.	<u>191/11 s. 4 (2): Accessibility plans</u>	Learn more about your re	equirements for	question 8
Comments for question 8				
	organization provide the appropriate training on the Integ Regulation and the Human Rights Code as it pertains to ? *		Yes	⊖ No
Read O. Reg.	<u>191/11 s. 7: Training</u>	Learn more about your re	equirements for	question 9
Comments for question 9	We provide our policies along with the online train http://www.ohrc.on.ca/en/book/export/html/8843 http://accessforward.ca	ning		
the Integrat all persons who partici	ersons that require training trained as soon as practicable ted Accessibility Standards Regulation, the following per who are an employee of, or a volunteer with, the organiz pate in developing the organization's policies; and (c) all ods, services or facilities on behalf of the organization. *	sons require training: (a) zation; (b) all persons	• Yes	⊖ No
Read O. Reg.	<u>191/11 s. 7 (3): Training</u>	Learn more about your re	quirements for	question 10
Comments for question 10				
	organization provide training in respect of any changes t an ongoing basis? *	o your accessibility	• Yes	⊖ No
			quiromonto for	question 11
policies on	<u>191/11 s. 7 (4): Training</u>	Learn more about your re	quirements for	question 11

12. Does your organization keep a record of the training provided, includi the training is provided and the number of individuals to whom it is pro-		• Yes	⊖ No
<u>Read O. Reg. 191/11 s. 7 (5): Training</u>	Learn more about your requir	ements for	question 12
Comments for question 12			0
13. Does your organization ensure that its public feedback processes are persons with disabilities by providing or arranging accessible formats supports, upon request, and do you notify the public of this accessible Note: "public" can include customers, clients, third parties, or busines	or communication e feedback policy?	• Yes	⊖ No
Read O. Reg. 191/11 s. 11: Feedback	Learn more about your requir	rements for	question 13
Comments for https://www.southbrucepeninsula.com/en/town-hall. question 13 removal-of-barriers-to-accessibility	/accessibility.aspx#Annual-re	ports-on-th	e-
Information and communications			
14. As of January 1, 2021, do all your organization's internet websites co Web Consortium Web Content Accessibility Guidelines 2.0 Level AA and pre-recorded audio descriptions)? Please indicate in the commer complete names and addresses of your publicly available web conter social media pages, and apps *	(except for live captions nt box provided the	• Yes	() No
Read O. Reg. 191/11 s. 14 (4): Accessible websites and web content	Learn more about your requi	rements for	question 14
Publicly www.southbrucepeninsula.com available web content and comments for question 14 www.southbrucepeninsula.com			0
Employment			
15. Does your organization notify successful applicants of its policies for employees with disabilities during offers of employment? *	accommodating	• Yes	⊖ No
Read O. Reg. 191/11 s. 24: Notice to successful applicants	Learn more about your requi	rements for	question 15
Comments for https://www.southbrucepeninsula.com/en/town-hall question 15 Accessibility-Standards.pdf	/resources/Accessibility/ACC	_Integrated	1-
16. Does your organization develop and have in place a written process documented individual accommodation plans for employees with disa		• Yes	⊖ No
Read O. Reg. 191/11 s. 28: Documented individual accommodation plans	Learn more about your requi	rements for	question 16
Comments for https://www.southbrucepeninsula.com/en/town-hall question 16 Accessibility-Standards.pdf	/resources/Accessibility/ACC	_Integrate	
Transportation	·····		
 Does your organization provide transportation services? * (If Yes, you will be required to answer an additional question.) 		⊖Yes	No
Read O, Reg. 191/11 Part IV: Transportation standards	Learn more about your requi	rements for	question 17
17.a. Does your organization conduct employee and volunteer acces safe use of accessibility equipment and features of your transpo	ortation vehicles? *	⊖ Yes	⊖ No
Read O. Reg. 191/11 s. 36: Accessibility training Comments for question 17.a	<u>Learn more about your requi</u>	rements for	question 17.a

Design of public spaces			
18. Since your organization last reported on its accessibility compliance constructed new or redeveloped existing off-street parking facilities to maintain? *		⊖ Yes	No
(If Yes, you will be required to answer an additional question.)			
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements for	question 18
18.a. When constructing new or redeveloping off-street parking facil organization intends to maintain, does it ensure that the off-stre the accessibility requirements as outlined in the Design of Pub	eet parking facilities meet	⊖ Yes	⊖ No
Read O. Reg. 80.32-37: Accessible parking	Learn more about your re	quirements for	question 18.a
Comments for question 18.a			
 Since your organization last reported on accessibility compliance, ha constructed new or redeveloped existing outdoor play spaces that it (If Yes, you will be required to answer an additional question.) 		• Yes	⊖ No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements for	question 19
19.a. When constructing new or redeveloping existing outdoor play so organization consult with the public and persons with disabilitie children and caregivers, and if you represent a municipality did consult with the municipal advisory committee where one was in s. 80.19 of the Integrated Accessibility Standards Regulation	es on the needs of I your organization established as outlined	Yes	⊖ No
Read O. Reg. 191/11 s. 80.19: Outdoor play spaces	Learn more about your red	quirements for	question 19.a
Comments for question 19.a			
Does your organization's multi-year accessibility plan include proced and emergency maintenance of the accessible elements in public sp with temporary disruptions when accessible elements required unde Accessibility Standards Regulations Part IV are not in working order	paces, and for dealing r the Integrated	Yes	⊖ No
Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements	Learn more about your red	quirements for	question 20
Comments for guestion 20			
Confirmation questions			
 Other than the requirements cited in the above questions, is your or complying with all other requirements for the Information and Complying with all other requirements for		• Yes	⊖ No
Standards under the Integrated Accessibility Standards Regulation?			
		quirements for	question 21
Standards under the Integrated Accessibility Standards Regulation? Read O. Reg. 191/11 Part II: Information and	? * ⁻	quirements for	question 21
Standards under the Integrated Accessibility Standards Regulation? Read O. Reg. 191/11 Part II: Information and communications standards Comments for	Learn more about your red	Quirements for	question 21
Standards under the Integrated Accessibility Standards Regulation? Read O. Reg. 191/11 Part II: Information and communications standards Comments for question 21 2. Other than the requirements cited in the above questions, is your org complying with all other requirements for the Employment Standard	Learn more about your red	• Yes	⊖ No
Standards under the Integrated Accessibility Standards Regulation? Read O. Reg. 191/11 Part II: Information and communications standards Comments for question 21 22. Other than the requirements cited in the above questions, is your org complying with all other requirements for the Employment Standard Integrated Accessibility Standards Regulation? *	ganization ds under the	• Yes	⊖ No

23. Other than the requirements cited in the above questions, is your organization complying with all other requirements for Transportation Standards under the Integrated Accessibility Standards Regulation? *		⊖Yes	⊖ No
Read O. Reg. 191/11 Part IV: Transportation standards	Learn more about y	our requirements for	question 23
Comments for question 23			
24. Other than the requirements cited in the above questions, is your org complying with all other requirements for the Customer Service Star the Integrated Accessibility Standards Regulation? *		• Yes	⊖ No
Read O. Reg. 191/11 Part IV.2: Customer service standards	<u>Learn more about y</u>	our requirements for	question 24
Comments for question 24			
25. Other than the requirements cited in the above questions, is your org complying with all other requirements for the Design of Public Spac under the Integrated Accessibility Standards Regulation? *		• Yes	⊖ No
Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards	Learn more about y	our requirements for	question 25
Comments for question 25			

X,

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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 Peninsu
 50+

 Filing organization business number (BN9)
 868033135
 5

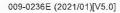
 Fields marked with an asterisk (*) are mandatory.
 50+
 50+

E. Accessibility compliance report summary

Your responses to the questions on your accessibility report indicate that your organization is in compliance with AODA standards.

Your organization may be audited to verify compliance.





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