

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, 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 <u>Schedule 1 of Ontario Regulation 191/11</u>), or an agency, board or commission (under <u>Column 1 of Table 1 of Ontario Regulation 146/10</u>), 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.

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:

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.

009-0236E (2019/04)[V4.0] Page 2 of 8



Ministry for Seniors and Accessibility

2019 Accessibility Compliance Report

Instructions

All information you provide is subject to the *Freedom of Information and Protection of Privacy Act*. Fields marked with an asterisk (*) are mandatory.

A. Organizatio	on information						
Organization category *			Number of employee	es range *	Reporting year		
Designated Public Sector					2019		
Business detail	ls						
Organization legal	l name *				employees in Ontario * <u>Help</u>		
Corporation of	the County of We	ellington		900			
Business number 106975485	(BN9) * Help	Check this box if you have Ministry for Seniors and Ac		itifier from the			
Check if opera	ting/business name is	s same as legal name					
Organization oper	ating/business name			Language p	reference for communications *		
County of Well	ington			English	English		
Sector that best de	escribes your organiz	ation's principal business acti	vity *	<u>Help</u>			
Subsector (if poss	ible)		Industry group (if p	p (if possible)			
913			9139				
Mailing address	S		<u>.</u>				
Address where lett	ters can be sent to th	e person responsible for coor	dinating the organizatio	n's AODA compl	liance activities.		
Country *	Canada	USA		International			
Type of address *	Street addres	ss Street addres	s served by route	Other			
Unit number	Street number *	Street name *					
Street type	Street direction	City *		F	Province *		
Postal code *							
Business addre		the company director/officer	accountable for the org	ganization's comp	pliance with the AODA.)		
Check if business address is same as mailing address							
Country *	Canada	○ USA		International			
Type of address * Street address							
Unit number	Street number *	Street name *					
Street type	Street direction	City *		F	Province *		
Postal code *				<u> </u>			

009-0236E (2019/04)[V4.0] Page 3 of 8

2019 Accessibility compliance report

Organization category Designated Public Sector	Number of employees ra	ange 50+
Filing organization legal name Corporation of the County of Wellington	No.	
Filing organization business number (BN9) 106975485		
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 onta	ario.ca/accessibility	
Additional accessibility requirements apply if you are: • <u>a library board</u>		
a producer of education material (e.g. textbooks)		
 an education institution (e.g. school board, college, university or school) 		
• <u>a municipality</u>		
C. Accessibility compliance report questions		
Instructions		
Please answer each of the following compliance questions. Use the Comments box if you wish to o	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 resource.		iew the
Foundation requirements		
1. Does your organization have written accessibility policies and a statement of commitment? *	Yes	○ No
Read O. Reg. 191/11 s. 3: Establishment of accessibility policies Learn mor	re about your requirements for	question 1
Comments for question 1		
2. Has your organization established, implemented and maintained a multi-year accessibility plan a posted it on your organization's website? *	and	○ No
Read O. Reg. 191/11 s. 4: Accessibility plans	re about your requirements for	question 2
Comments for question 2		
3. Has your organization completed a review of its progress implementing the strategy outlined in it accessibility plan and documented the results in an annual status report posted on the organizative website? *		○ No
	re about your requirements for	question 3
Comments for question 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 4
Comments for question 4		

009-0236E (2019/04)[V4.0] Page 4 of 8

5. Does your organization provide the appropriate training on the Integrated Accessibiling Regulation and the Human Rights Code as it pertains to persons with disabilities? *	ty Standards	Yes	○ No
Read O. Reg. 191/11 s. 7: Training	Learn more about your	requirements for	question 5
Comments for question 5			
6. Has your organization established and documented a process to receive and respon how its goods or services are provided to persons with disabilities, including actions organization will take when a complaint is received? *		Yes	○ No
Read O. Reg. 191/11 s. 80.50: Feedback process required	Learn more about your i	requirements for	question 6
Comments for question 6			
7. Does your organization ensure that its feedback processes are accessible to person providing or arranging accessible formats or communication supports, upon request, the public of this accessible feedback policy? *		Yes	○ No
Read O. Reg. 191/11 s. 11: Feedback	Learn more about your i	requirements for	question 7
Comments for question 7			
Information and communications			
8. Does your organization have a process to provide accessible formats and communic persons with disabilities in a timely manner and at no more than the cost for other per the same information, and do you notify the public of this accessible information police.	ersons who ask for	Yes	○ No
Read O. Reg. 191/11 s. 12: Accessible formats and communications supports	Learn more about your i	requirements for	question 8
Comments for question 8			
Employment			
 Does your organization notify its employees and the public about the availability of a its recruitment process? * 	ccommodations in	Yes	○ No
Read O. Reg. 191/11 s. 22-24: Recruitment	Learn more about your i	requirements for	question 9
Comments for question 9			
10. Does your organization notify successful applicants of its policies for accommodating disabilities during offers of employment? *	ng employees with	Yes	○ No
Read O. Reg. 191/11 s. 24: Notice to successful applicants	Learn more about your	equirements for	question 10
Comments for question 10			
11. Does your organization develop and have in place a written process for the develop documented individual accommodation plans for employees with disabilities? *	oment of	Yes	○ No
Read O. Reg. 191/11 s. 28: Documented individual accommodation plans	Learn more about your i	requirements for	question 11
Comments for question 11			

009-0236E (2019/04)[V4.0] Page 5 of 8

Transportation		
12. Does your organization provide transportation services? *		No
(If Yes, you will be required to answer an additional question.) Read O. Reg. 191/11 Part IV: Transportation standards Learn more about you	our requirements for	auestion 12
12.a. Does your organization conduct employee and volunteer accessibility training on the safe use of	· _	•
accessibility equipment and features of your transportation vehicles? *	○ Yes	○ No
Read O. Reg. 191/11 s. 36: Accessibility training Learn more about you	ur requirements for	question 12.a
Comments for question 12.a		
·		
Design of public spaces		
13. Since your organization last reported on its accessibility compliance, has your organization constructed new or redeveloped existing off-street parking facilities that it intends to maintain? * (If Yes, you will be required to answer an additional question.)	○ Yes	No
Read O. Reg. 101/11 Part IV.1: Design of public spaces standards Learn more about your space of the space of	ur requirements for	question 13
13.a. When constructing new or redeveloping off-street parking facilities that your organization intends to maintain, does it ensure that the off-street parking facilities meet the accessibility requirements as outlined in sections 80.32 – 80.37 of the IASR? *		○ No
Read O. Reg. 80.32-37: Accessible parking Learn more about your	our requirements for	question 13.a
Comments for		
question 13.a		
14. Since your organization last reported on accessibility compliance, has your organization constructed new or redeveloped existing outdoor public spaces that it intends to maintain? * (If Yes, you will be required to answer additional questions.) Read O. Reg. 191/11 Part IV.1: Design of public spaces standards Learn more about your properties of the properties of the public spaces.	○ Yes	No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards Learn more about your organization 14.a. When constructing new or redeveloping existing outdoor play spaces, did your organization	ur requirements for	question 14
consult with the public and persons with disabilities on the needs of children and caregivers, and if you represent a municipality did your organization consult with the municipal advisory committee where one was established as outlined in s. 80.19 of the Integrated Accessibility Standards Regulation? *	Yes	○ No
Read O. Reg. 191/11 s. 80.19: Outdoor play spaces Learn more about you	ur requirements for	question 14.a
Comments for question 14.a		
14.b. Does your organization's multi-year accessibility plan include procedures for preventative and emergency maintenance of the accessible elements in public spaces, and for dealing with temporary disruptions when accessible elements required under the Integrated Accessibility Standards Regulations Part IV are not in working order? *	○ Yes	○ No
Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements Learn more about you	ur requirements for	question 14.b
Comments for question 14.b		
Customer service		
15. In your policies, practices and procedures, does your organization permit persons with disabilities to keep their service animals with them on the parts of your premises that are open to the public or other third parties, except where the animal is excluded by law? If excluded by law, does your organization have alternate ways for people with service animals to access and use your goods, services or facilities?	Yes	○ No
Read O. Reg. 191/11 s. 80.47(1-3): Use of service animals and support persons Learn more about your	ur requirements for	question 15
Comments for question 15		

009-0236E (2019/04)[V4.0] Page 6 of 8

General requirements				
40. Other than the manifestation				

6. Other than the requirements cited in the above questions, is your organization complying with all applicable requirements for the information and communications standards in effect under the Integrated Accessibility Standards Regulation? *			○ No
Read O. Reg. 191/11 Part II: Information and communications standards	Learn more about you	ur requirements for	question 16
Comments for question 16			
17. Other than the requirements cited in the above questions, is your organization applicable requirements for the employment standards in effect under the In Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part III: Employment standards	Learn more about you	ur requirements for	question 17
Comments for question 17			
18. Other than the requirements cited in the above questions, is your organization applicable requirements for the transportation standards in effect under the Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part IV: Transportation standards	Learn more about you	ur requirements for	question 18
Comments for question 18			
19. Other than the requirements cited in the above questions, is your organization applicable requirements for the design of public spaces standards in effect Accessibility Standards Regulation? *		Yes	○ No
Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards	Learn more about you	ur requirements for	question 19
Comments for question 19			
20. Other than the requirements cited in the above questions, is your organization applicable requirements for the customer service standards under the Integ Standards Regulation? *		Yes	○ No
Read O. Reg. 191/11 Part IV.2: Customer service standards	Learn more about you	ur requirements for	question 20
Comments for question 20			
21. Other than the requirements cited in the above questions, is your organization general requirements in effect under the Integrated Accessibility Standards R		Yes	○ No
Read O. Reg. 191/11 Part I: General requirements	Learn more about you	<u>ur requirements for</u>	question 21
Comments for question 21			
			<u>.</u>

009-0236E (2019/04)[V4.0] Page 7 of 8



2019 Accessibility Compliance Report

Organization category Designated Public Sector		Number of employees range 50+		
Filing organization legal name Corporation of the Cour	nty of Wellington			
Filing organization business number (BN9) 106975485	5			
Fields marked with an asterisk (*) are mandatory.				
D. Accessibility compliance report summary				
Your responses to the questions on your accessibility report in	ndicate that your organization	is in compliand	ce with AODA standards.	
Your organization may be audited to verify compliance.				
E. Accessibility compliance report certification				
Section 15 of the Accessibility for Ontarians with Disabilities Act, 20 the required information has been provided and is accurate, signed				
Note: It is an offence under the Act to provide false or misleading in	nformation in an accessibility rep	oort filed under th	ne 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 acce	essibility issues.			
Acknowledgement				
✓ I certify that I have the authority to bind all organizations specifie	ed in Section A of this form, *			
✓ I certify that all the required information has been included in this	s report, and, *			
✓ I certify that the information in this report is accurate. *				
Certification date (yyyy-mm-dd) * 2019-12-20				
Certifier information				
Last name * Farrelly	First name * Susan			
	xtension	Glicok field if 111		
Email * susanf@wellington.ca	Alternate phone number	Extension	Fax number 519 837-8882	
Primary contact for the organization(s)				
Check if the primary contact is same as the certifier				
Last name * Carbone	First name * Christine			
· · · · · · · · · · · · · · · · · · ·	xtension	TY		
Email * christinec@wellington.ca	Alternate phone number	Extension	Fax number 519 837-8882	

009-0236E (2019/04)[V4.0] Page 8 of 8