

Organization category [Ontario Public Service / Ontario Legislative Assembly](#) | Number of employees range [50+](#)
 Filing organization legal name [Office of the Legislative Assembly of Ontario](#)

Fields marked with an asterisk (*) are mandatory.

Filing organization AODA identifier [AD100010](#)

B. Understand your accessibility requirements

For enquiries related to the AODA obligations of the Ontario Public Service (OPS) or offices appointed under the Ontario Legislative Assembly (OLA), please contact AODA Contact Centre (ServiceOntario) at:

Phone: 416-849-8276 or

Toll-free: 1-866-515-2025

TTY: 416-325-3408 or

Toll-free: 1-800-268-7095

Email : aoda.assistance@ontario.ca

You have indicated that you are OPS/OLA, if you are submitting this report on behalf of any agencies, authorities, and/or boards of commissions, please list which ones below.

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 date (yyyy-mm-dd) * [2022-12-15](#)

Certifier information

Last name *		First name *	
Decker		Todd	
Position title *	Business phone number *	Extension	<input type="checkbox"/> Check here if TTY
Chief Executive Officer	416-325-7341		
Email *	Alternate phone number	Extension	Fax number
tdecker@ola.org			

Primary contact for the organization(s)

Check if the primary contact is same as the certifier

Last name *

Decker

First name *

Todd

Position title *

Chief Executive Officer

Business phone number *

416-325-7341

Extension

Check here
if TTY

Email *

tdecker@ola.org

Alternate phone number

Extension

Fax number

D. 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 window. Use the link on the left to view the relevant AODA regulations and the link on the right to view relevant accessibility information resources.

Foundational requirements

1. Does your organization have policies, practices and procedures on providing goods or services to persons with disabilities? * Yes No

[Read O. Reg. 191/11 s. 3: Establishment of accessibility policies](#)

[Learn more about your requirements for question 1](#)

Comments for
question 1

2. Has your organization established, implemented, maintained and posted a multi-year accessibility plan? * Yes No

[Read O. Reg. 191/11 s. 4: Accessibility plans](#)

[Learn more about your requirements for question 2](#)

Comments for
question 2

3. Does your organization provide the appropriate training on the Integrated Accessibility Standards Regulation and the Human Rights Code as it pertains to persons with disabilities? * Yes No

[Read O. Reg. 191/11 s. 7: Training](#)

[Learn more about your requirements for question 3](#)

Comments for
question 3

4. Does your organization ensure that its feedback processes are accessible to persons with disabilities by providing or arranging accessible formats or communication supports upon request? * Yes No

[Read O. Reg. 191/11 s. 11: Feedback](#)

[Learn more about your requirements for question 4](#)

Comments for
question 4

General

5. Does your organization incorporate accessibility features into its procurement or acquisition of goods, services or facilities, or provide an explanation if doing so is not practicable? * Yes No

[Read O. Reg. 191/11 s. 5: Procuring or acquiring goods, services or facilities](#)

[Learn more about your requirements for question 5](#)

Comments for question 5

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6. Does your organization design, procure or acquire self-service kiosks (e.g. interactive electronic terminals, point-of-sale devices, etc.)? * Yes No
(If Yes, you will be required to answer an additional question.)

[Read O. Reg. 191/11 Part I: General](#)

[Learn more about your requirements for question 6](#)

- 6.a. Does your organization incorporate accessibility features into its design, procurement or acquisition of self-service kiosks? * Yes No

[Read O. Reg. 191/11 s. 6: Self-service kiosks](#)

[Learn more about your requirements for question 6.a](#)

Comments for question 6.a

Information and communications

7. Does your organization have a process to provide accessible formats and communication supports to people with disabilities in a timely manner and at no extra cost? * Yes No

[Read O. Reg. 191/11 s.12 \(1\): Accessible formats and communication supports](#)

[Learn more about your requirements for question 7](#)

Comments for question 7

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8. Does your organization prepare emergency procedures, plans or public safety information and make the information available to the public? * Yes No
(If Yes, you will be required to answer an additional question)

[Read O. Reg. 191/11 Part II: Information and communications standards](#)

[Learn more about your requirements for question 8](#)

- 8.a. Does your organization provide its publicly available emergency procedures, plans or safety information in accessible formats to people with disabilities upon request? * Yes No

[Read O. Reg. 191/11 s. 13: Emergency procedure, plans or public safety information](#)

[Learn more about your requirements for question 8.a](#)

Comments for question 8.a

Employment

9. Do you have employees with a disability who receive individualized workplace emergency response information that require assistance? * Yes No
(If Yes, you will be required to answer additional questions.)

[Read O. Reg. 191/11 Part III: Employment standards](#)

[Learn more about your requirements for question 9](#)

9.a. With the employee's consent, does your organization provide the workplace emergency response information to the person designated to provide assistance to the employee? * Yes No

[Read O. Reg. 191/11 s. 27 \(2\): Workplace emergency response information](#) [Learn more about your requirements for question 9.a](#)

Comments for question 9.a

9.b. Does your organization review individualized workplace emergency response information when: * Yes No

- an employee moves to a different location in the organization;
- an employee's overall accommodations are reviewed; and
- when your organization's general emergency policies are reviewed?

[Read O. Reg. 191/11 s. 27 \(4\): Workplace emergency response information](#) [Learn more about your requirements for question 9.b](#)

Comments for question 9.b

10. Does your organization have a written process for the development of documented individual accommodation plans for employees with disabilities that ensures that individual accommodation plans: * Yes No

- if requested, include any information regarding accessible formats and communications supports provided;
- if required, include individualized workplace emergency response information;
- identify any other accommodation that is to be provided?

[Read O. Reg. 191/11 s. 28 \(3\): Documented individual accommodation plans](#) [Learn more about your requirements for question 10](#)

Comments for question 10

Design of public spaces

11. Since your organization submitted its most recent accessibility compliance report, has your organization constructed new or redeveloped existing recreational trails? * 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 requirements for question 11](#)

11.a. Where applicable, does your organization ensure that its new or redeveloped recreational trails meet the technical requirements as outlined in s.80.9 of the IASR? * Yes No

[Read O. Reg. 191/11 s. 80.9: Technical requirements for recreational trails](#) [Learn more about your requirements for question 11.a](#)

Comments for question 11.a

12. Since your organization submitted its most recent accessibility compliance report, has your organization constructed new or redeveloped existing beach access routes? * 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 requirements for question 12](#)

12.a. Where applicable, does your organization ensure that its new or redeveloped beach access routes meet the technical requirements as outlined in IASR s.80.10? * Yes No

[Read O. Reg. 191/11 s. 80.10: Technical requirements for beach access routes](#)

[Learn more about your requirements for question 12.a](#)

Comments for question 12.a

13. Since your organization submitted its most recent accessibility compliance report, has your organization constructed new or redeveloped existing recreational trails and/or beach access routes that are equipped with a boardwalk? * 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 requirements for question 13](#)

13.a. Where new or redeveloped recreational trails and/or beach access routes are equipped with a boardwalk, does the boardwalk meet the technical requirements as outlined in IASR s. 80.12? * Yes No

[Read O. Reg. 191/11 s. 80.12: Boardwalks](#)

[Learn more about your requirements for question 13.a](#)

Comments for question 13.a

14. Since your organization submitted its most recent accessibility compliance report, has your organization constructed new or redeveloped existing recreational trails and/or beach access routes that are equipped with a ramp? * 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 requirements for question 14](#)

14.a. Where new or redeveloped recreational trails and/or beach access routes are equipped with a ramp, does the ramp meet the technical requirements as outlined in IASR s. 80.13? * Yes No

[Read O. Reg. 191/11 s. 80.13: Ramps](#)

[Learn more about your requirements for question 14.a](#)

Comments for question 14.a

15. 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 are not in working order as outlined in s.80.44 of the IASR? * Yes No

[Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements](#)

[Learn more about your requirements for question 15](#)

Comments for question 15

Customer Service

16. Does your organization ever require a person with a disability to be accompanied by a support person while on premises? * Yes No
(If Yes, you will be required to answer an additional question.)

[Read O. Reg. 191/11 Part IV.2: Customer service standards](#)

[Learn more about your requirements for question 16](#)

16.a. When your organization requires a person with a disability to be accompanied by a support person when on premises, is this decision made only after: * Yes No

- consulting the person with a disability;
- determining that a support person is necessary to protect the health and safety of the person with a disability or the health and safety of others on the premises;
- confirming there is no other reasonable way to protect the health and safety of the person with a disability or others on premises?

[Read O. Reg. 191/11 s. 80.47: Use of service animals and support persons](#)

[Learn more about your requirements for question 16.a](#)

Comments for question 16.a

17. Do you ensure that every person who deals with the public or other third parties on behalf of your organization, and every person who participates in developing your policies, practices and procedures on providing goods or services, receives training about providing goods or services to people with disabilities? * Yes No

[Read O. Reg. 191/11 s. 80.49: Training for staff](#)

[Learn more about your requirements for question 17](#)

Comments for question 17

18. Does your organization provide, upon request, information in an accessible format that takes into account an individual's disability in a timely manner and at no more than the cost for other persons who ask for the same information? * Yes No

[Read O. Reg. 191/11 s. 80.51: Format of documents](#)

[Learn more about your requirements for question 18](#)

Comments for question 18

Confirmation questions

19. Other than the requirements cited in the above questions, is your organization complying with the requirements of the **Customer Service** standards? * Yes No

[Read O. Reg. 191/11 Part IV.2: Customer service standards](#)

[Learn more about your requirements for question 19](#)

Comments for question 19

20. Other than the requirements cited in the above questions, is your organization complying with the requirements of the **Employment** standards? * Yes No

[Read O. Reg. 191/11 Part III: Employment standards](#)

[Learn more about your requirements for question 20](#)

Comments for question 20

21. Other than the requirements cited in the above questions, is your organization complying with the requirements of the **Design of public spaces** standards? * Yes No

[Read O. Reg. 191/11 Part IV.1: Design of public spaces standards](#)

[Learn more about your requirements for question 21](#)

Comments for question 21