

Ministry for Seniors and Accessibility

2021 Accessibility Compliance Report

Instructions

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

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

Fields marked with an asterisk (*) are mandatory.

A. Organization information	nrormation	
Organization category * Designated Public Sector	Sector	Number of employees range * Reporting year 1-49 employees 2021
Business details	9,	
Organization legal name * Corporation of Smooth Rock Falls	name * nooth Rock Falls	Number of employees in Ontario * Help 33
Business number (BN9) * 106983950	Help 🗆	Check this box if you have received an AODA identifier from the Ministry for Seniors and Accessibility
☐ Check if operation	Check if operating/business name is same as legal name	same as legal name
Organization operating/busine Town of Smooth Rock Falls	Organization operating/business name Town of Smooth Rock Falls	
Sector that best describes y 91 - Public administration	scribes your organiza istration	Sector that best describes your organization's principal business activity * Help 91 - Public administration
Subsector (if possible) 913 - Local, municip	ole) cipal and regional p	Subsector (if possible) 913 - Local, municipal and regional public administration 9139 - Other local, municipal and regional public administration
Mailing address		
Address where lette	ers can be sent to the	Address where letters can be sent to the person responsible for coordinating the organization's AODA compliance activities.
Country *		
The fields below wi	The fields below will change based on your selection.	our selection.
Canada	OUSA	△ International
Type of address *	Street address	○ Street address served by route ○ Other
Unit number S	Street number * Str 142 Fir	Street name * First
Street type S	Street direction	City * Province * ON (Ontario)
Postal code (e.g. A1A 1A1) * P0L 2B0	1A 1A1) *	
Business address	Ś	
(Address at which le	etters can be sent to the	(Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.)
Check if busines	Check it business address is same as mailing address	as mailing address
Country *		
The fields below wi	The fields below will change based on your selection	your selection.
Canada	OUSA	A Onternational
Type of address *	O Street address	○ Street address served by route ● Other

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PO Box	Route type	Route number
249		
Delivery installation type	Delivery installation identifier	City *
		Smooth Rock Falls
Province *	Postal code (e.g. A1A 1A1) *	
ON (Ontario)	POL 2BO	



2021 Accessibility compliance report

er Extension Fax number 705-338-2584	Alternate phone number 705-338-7102		email * vdion@townsrf.ca
	Extension Check here 7 if TTY	Business phone number * 705-338-2717	Position title * Other
	First name * Veronique		Last name * Dion
			Certifier information
		-dd) * 2021-12-15	Certification date (yyyy-mm-dd) *
zation *	authority to bind the organiz	$\overline{f arphi}$ I certify that all the information is accurate and I have the authority to bind the organization	I certify that all the inform
			Acknowledgement
	for accessibility issues.	Primary Contact: The person who will be the main contact for accessibility issues	Primary Contact: The person
	•	Certifier: Someone who can legally bind the organization(s).	Certifier: Someone who car
ty to contact the organization(s);	/ for Seniors and Accessibilit	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.	The certifier may designate a primary contact otherwise the certifier will be the main contact.
ssibility report filed under the AODA.	ading information in an acces	Note: It is an offence under the Act to provide false or misleading information in an accessibility report filed	Note: It is an offence under
Section 15 of the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> 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).	Act, 2005 requires that acce and is accurate, signed by a	<i>ity for Ontarians with Disabilities</i> d information has been provided	Section 15 of the <i>Accessibili</i> certifying that all the require organization(s).
		Accessibility compliance report certification	C. Accessibility comp
please indicate which hoards helow	on hehalf of local hoards in	mitting this report and submitting	◆ <u>a municipality</u>
	ege, university or school)	an education institution (e.g. school board, college, university or school)	 an education in
	(\$)	a producer of education material (e.g. textbooks)	 a producer of s
rio.ca/accessibility	ssibility requirements at <u>onta</u>	Before you begin your report, you can learn about your accessibility requirements at <u>ontario.ca/accessibility</u> Additional accessibility requirements apply if you are: • <u>a library board</u>	Before you begin your report, you can learn about yo Additional accessibility requirements apply if you are a library board
		B. Understand your accessibility requirements	B. Understand your ac
		erisk (*) are mandatory.	Fields marked with an asterisk (*) are mandatory
		ss number (BN9) 106983950	Filing organization business number (BN9)
	Rock Falls	ame Corporation of Smooth Rock Falls	Filing organization legal name
Number of employees range 1-49		signated Public Sector	Organization category Designated Public Sector

Primary contact for the organization(s)
☐ Check if the primary contact is same as the certifier Last name * Denault First name * Luc
Position title * Business phone number * Extension
Email * Alternate phone number Extension Fax number luc.denault@townsrf.ca 705-338-7240 705-338-2584
D. Accessibility compliance report questions
Instructions
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.
Municipal Accessibility Advisory Committees
1. Is your organization a municipality with a population of 10,000 or more? * (If Yes, you will be required to answer additional questions.) Read Accessibility for Ontarians with Disabilities Act. 2005. S.O. Learn more about your requirements for question 1 2005. c. 11. s. 29: Municipal Accessibility Advisory Committees
 1.a. Has your organization established an accessibility advisory committee as outlined in section 29 of the AODA? * (If Yes, you will be required to answer additional questions.)
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. Learn more about your requirements for question 1.a 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees Comments for question 1.a question 1.a
the majority of the members of the committee persons with disabilitie
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29 (3); Municipal Accessibility Advisory Committees Comments for question 2
3. Has the committee provided advice to council about site plans and drawings (as described in S.41 of the <i>Planning Act</i>) as well as advice on the requirements and implementation of accessibility standards? *
Read Accessibility for Ontarians with Disabilities Act. 2005, S.O. 2005, c. 11, s. 29 (4): Municipal Accessibility Advisory Committees Comments for question 3 question 3
Foundational requirements 4. Does your organization have written accessibility policies that include a statement of
Read O.Reg_191/11 s_3: Establishment of accessibility policies Learn more about your requirements for question 4 Comments for question 4

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ת	Does your organization have a document or documents of your accessibility policies publicly			:
(D	available and, on request, provide them in an accessible format? * Read O. Reg. 191/11 s. 3.(3): Establishment of accessibility policies	<u>vur require</u>	ments for qu	Jestion 5
Con	Comments for question 5			
R C	your o	id a multi-year Learn more about vour requiren	Yes ments for au	○ No
Comme question	Read O. Reg. 191/11 S. 4: Accessibility plans Comments for question 6	Learn more about your requirements for question o	nents for qu	Les(ion o
.7	Has your organization completed a review of its progress implementing the strategy outlined in its accessibility plan and documented the results in an annual status report posted on the organization's website? *		Yes	O No
Read O. Comme question	Read O. Reg. 191/11 s. 4 (1). 4(3): Accessibility plans Comments for question 7	Learn_more_about your requirements for question 7	nents for qu	uestion 7
.8	Did your organization consult with people with disabilities when establishing, reviewing and updating its multi-year accessibility plan? *		Yes	O No
Rea Cor que	Read Q, Reg. 191/11 s. 4 (2): Accessibility plans Comments for question 8	Learn more about your requirements for question 8	nents for q	uestion 8
	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? *		∀es	O No
Rea Cor que	Read O. Reg. 191/11 s. 7: Training Comments for question 9	Learn more about your requirements for question 9	ments for g	uestion 9
10.	all pentegrantegrantegrans	Jnder Section 7(1) of (s require training: (a) on; (b) all persons er persons who	• Yes	
Cor que	Read O. Reg. <u>191/11.s. 7. (3): Iraining</u> Comments for question 10	Learn more about your requirements for question 10	ments for a	uestion 10
11. Rea Cor	 Does your organization provide training in respect of any changes to your accessibility policies on an ongoing basis? * Read O. Reg. 191/11.s. 7 (4): Training Comments for question 11 	хоиt. уоиг require	Yes ments for a	○ No guestion 11
	A COMMISSION OF THE PERSON OF			

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12. Does your organization keep a record of the training provided, including the dates on which the training is provided and the number of individuals to whom it is provided? * Read O. Reg. 191/11 s. 7 (5): Training Learn more about your requireme		Yes ONo
Comments for question 12		
13. Does your organization ensure that its public feedback processes are accessible to persons with disabilities by providing or arranging accessible formats or communication supports, upon request, and do you notify the public of this accessible feedback policy? Note: "public" can include customers, clients, third parties, or businesses. *	Yes	O NO
Read O. Reg. 191/11 s. 11: Feedback Comments for question 13 question 13	ements for q	uestion 13
Information and communications 14. As of January 1, 2021, do all your organization's internet websites conform to World Wide Web Consortium Web Content Accessibility Guidelines 2.0 Level AA (except for live captions and pre-recorded audio descriptions)? Please indicate in the comment box provided the complete names and addresses of your publicly available web content, including websites, social media pages, and apps *	• Yes	O NO
Publicly available web content and comments for question 14	ements for q	juesnon 14
Employment 15. Does your organization notify successful applicants of its policies for accommodating employees with disabilities during offers of employment? * Read O. Reg. 191/11 s. 24: Notice to successful applicants Comments for question 15 Comments for question 15	Yes ements for c	○ No question 15
16. Does your organization develop and have in place a written process for the development of documented individual accommodation plans for employees with disabilities? * Read O. Reg. 191/11 s. 28: Documented individual accommodation plans Comments for question 16	Yes ements for c	O No nestion 16
Transportation 17. Does your organization provide transportation services? * (If Yes, you will be required to answer an additional question.) Read O. Reg. 191/11 Part IV: Transportation standards 17. a. Does your organization conduct employee and volunteer accessibility training on the	Yes	No Ruestion 17
17.a. Does your organization conduct employee and volunteer accessibility training on the safe use of accessibility equipment and features of your transportation vehicles? * Read O. Reg. 191/11 s. 36: Accessibility training Learn more about your requirements for question 17 question 17.a	Yes	O No

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		Comments for guestion 22
question 22	quirements for	Read O. Reg. 191/11 Part III: Employment standards Learn more about your requirements for question 22
O No		22. Other than the requirements cited in the above questions, is your organization complying with all other requirements for the Employment Standards under the Integrated Accessibility Standards Regulation? *
		Comments for question 21
question 21	aguirements for a	Read O. Reg. 191/11 Part II: Information and Learn more about your requirements for question 21 communications standards
0 N		21. Other than the requirements cited in the above questions, is your organization complying with all other requirements for the Information and Communications Standards under the Integrated Accessibility Standards Regulation? *
		Confirmation questions
		Comments for question 20
question 20	quirements for c	Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements Learn more about your requirements for question 20
O N0	Yes	20. 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? *
		Comments for question 19.a
question 19,	quirements for c	Read O. Reg. 191/11 s. 80.19: Outdoor play spaces Learn more about your requirements for question 19
O N	○Yes	19.a. When constructing new or redeveloping existing outdoor play spaces, did your organization 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? *
Juestion 19	quirements for c	Read O. Reg. 191/11 Part IV.1: Design of public spaces standards Learn more about your requirements for question 19
⊚ No	○Yes	19. Since your organization last reported on accessibility compliance, has your organization constructed new or redeveloped existing outdoor play spaces that it intends to maintain? * (If Yes, you will be required to answer an additional question.)
		Comments for question 18.a
uestion 18.	quirements for a	Read O. Reg. 80.32-37; Accessible parking Learn more about your requirements for question 18.
O No	○Yes	18.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 the Design of Public Spaces standards? *
uestion 18	quirements for q	Read O. Reg. 191/11 Part IV.1: Design of public spaces standards Learn more about your requirements for question 18
		(If Yes, you will be required to answer an additional question.)
● No	○Yes	18. 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? *
		Design of public spaces

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Comments for question 25	Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards	25. Other than the requirements cited in the above questions, is your organization complying with all other requirements for the Design of Public Spaces Standards under the Integrated Accessibility Standards Regulation? *	Comments for question 24	Read O. Reg. 191/11 Part IV.2: Customer service standards	24. Other than the requirements cited in the above questions, is your organization complying with all other requirements for the Customer Service Standards under the Integrated Accessibility Standards Regulation? *	Comments for question 23	Read O. Reg. 191/11 Part IV: Transportation standards	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? *
		questions, is your organization sign of Public Spaces Standar gulation? *			questions, is your organization stomer Service Standards und on? *			questions, is your organization portation Standards under the *
	Learn more about your requirements for question 25	ds • Yes		Learn more about your requirements for question 24	er • Yes		Learn more about your requirements for question 23	○Yes
	question 25	O No		question 24	O No		question 23	ONO

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2021 Accessibility Compliance Report

Filing organization legal name Corporation of Smooth Rock Falls Organization category Designated Public Sector Number of employees range 1-49

Fields marked with an asterisk (*) are mandatory.

Filing organization business number (BN9)

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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