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 the latest version of Adobe Reader. 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 (Ontario Public Service/Ontario Legislative Assembly, Designated Public Sector, Business or Non-profit)

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 the latest version of Adobe Reader

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 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:

Phone: 416-849-8276 TTY: 416-325-3408

Alternate formats

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



Fields marked with an asterisk (*) are mandatory.

2023 Accessibility Compliance Report

Instructions

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 Integrated Accessibility Standards Regulation (IASR) 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 IASR, you are to comply with the IASR as a small business/non-profit organization and are exempt from the requirement to submit a report.

A. Organization information Reporting year Number of employees range * Organization category * 50+ employees 2023 Designated Public Sector **Business details** Number of employees in Ontario * Organization legal name * 350 Loyalist Township Check this box if you have received an AODA identifier Business number (BN9) * Help from the Ministry for Seniors and Accessibility 873299499 Check if operating/business name is same as legal name Organization operating/business name Loyalist Township Sector that best describes your organization's principal business activity * Help 91 - Public administration Subsector (if possible) 913 - Local, municipal and regional public administration Industry group (if possible) 9139 - Other local, municipal and regional public administration **Mailing address** Address where letters can be sent to the person responsible for coordinating the organization's AODA compliance activities. Country * The fields below will change based on your selection. International Canada O USA Street address Other Street address served by route Type of address * Street name * Unit number Street number * 263 Main Province * City * Street type Street direction ON (Ontario) Odessa Street Postal code (e.g. A1A 1A1) * **K0H 2H0 Business address** (Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.) ✓ Check if business address is same as mailing address

Country *					
The fields below	will change based	on your sele	ection.		
Canada	\bigcirc (JSA	○ Internal	tional	
Type of address	* Street addre	ess (Street address served by route	Other	
Unit number	Street number * 263	Street nan Main	ne *		
Street type Street	Street direction		City * Odessa		Province * ON (Ontario)
Postal code (e.g K0H 2H0	. A1A 1A1) *	1 1 1014			The Landson of the Control of the Co



2023 Accessibility compliance report

Organization category Designated Public Sector	
Number of employees range 50+	
Filing organization legal name Loyalist Township	
Filing organization business number (BN9) 873299499	
Fields marked with an asterisk (*) are mandatory.	
B. Understand your accessibility requirements	
Before you begin your report, you can learn about your accessible	lity requirements at ontario.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)
• a municipality	
If you are a municipality submitting this report, and submitting on	behalf of local boards, please indicate which boards below.
C. Accessibility compliance report certification	
Section 15 of the <i>Accessibility for Ontarians with Disabilities Act</i> , certifying that all the required information has been provided and organization(s).	2005 requires that accessibility reports include a statement is accurate, signed by a person with authority to bind the
Note: It is an offence under the Act to provide false or misleading	g information in an accessibility report filed under the AODA.
The certifier may designate a primary contact for the Ministry for otherwise the certifier will be the main contact.	Seniors and Accessibility to contact the organization(s);
Certifier: Someone who can legally bind the organization(s).	
Primary Contact: The person who will be the main contact for a	ccessibility issues.
Acknowledgement	
✓ I certify that all the information is accurate and I have the auth	hority to bind the organization *
Certification date (yyyy-mm-dd) * 2024-12-27	
Certifier information	
Last name * Kantharajah	First name * Anne

Email * akantharajah@loyalist.ca	Alternate phone number	Extension	Fax number	
Primary contact for the or	ganization(s)	48 C 25 C 25 TE	ri. mal	Sale - Production
Check if the primary contact Last name * Kantharajah	is same as the certifier	First name * Anne		
Position title * Other	Position title other * Municipal Clerk	Business phone number * 613-386-7351	Extension 121	Check here if TTY
Email * akantharajah@loyalist.ca		Alternate phone number	Extension	Fax number
D. Accessibility complian	ice report questions	the first of the second		er no a vince more type of
Instructions				
Please answer each of the follow	ving compliance questions. l	Jse the Comments box if you w	ish to comm	ent on any response.
If you need help with a specific oview the relevant AODA regulation	question, click the help links ons and the link on the right	which will open in a new browso to view relevant accessibility in	er window. L formation re	Jse the link on the left to sources.
General		-10.70 T-	-	e i i i i i i i i i i i i i i i i i i i
Has your organization create accessibility by meeting all a	ed and implemented written pplicable accessibility requir	policies on how to achieve ements in the IASR? *		Yes
Read O. Reg. 191/11, s. 3 (1): E	stablishment of accessibility	policies Learn more abo	ut your requ	irements for question 1
administration 2. Has your organization establ	/accessibility.aspx ished and implemented a m	s website https://www.loyalis	t.ca/en/cou	● Yes
(If Yes, please answer additi Read O. Reg. 191/11, s. 4 (1): A		Learn more abo	ut vour requi	irements for question 2
2.a. Does your organization		<u>Loan more abo</u>	at your requ	Yes
(If Yes, please answer				
Read O. Reg. 191/11, s. 4 (1): Accessibility plans	Learn more about	ut your requi	irements for question 2.a
question 2.a December Committee	11, 2023 and it was devel	ed the 2024-2028 Multi-Year loped in consultation with the dand monitored by an international the Plan.	Joint Acce	essibility Advisory
2.a.i Is your organizati	on's accessibility plan poste	d on your organization's website	e? *	Yes No
Read O. Reg. 191/11,	s. 4 (1): Accessibility plans	Learn more about	your require	ements for question 2.a.i
Comments for In acc question 2.a.i	ordance with the O. Reg	191/11 the Plan is available	on the Tow	nship website.

			r organization pro uested? *	ovide the acce	ssibility plan in ai	n accessible forma	it	Yes	○ No
		•	91/11, s. 4 (1): A	Accessibility pla	<u>ans</u>	Learn more abou	ıt your require	ments for qu	uestion 2.a.ii
	Commen question					ble. Staff will con: Plan available in t			
	2.b Does you	ır orga	nization update t	he accessibilit	y plan at least on	ce every 5 years?	*	Yes	○ No
	Read O. Reg.	191/11	, s. 4 (1): Access	sibility plans		Learn more abou	ut your require	ments for q	uestion 2.b
	Comments for question 2.b		Plan will be reversely emented the 20			newly approved f	Plan, Loyalist	Township	had
3.	Does your orga	anizatio	on provide appro	priate training	on: *				
Re	ead O. Reg. 191	/11, s.	7 (1): Training			Learn more abo	out your requir	ements for	question 3
	3.a. The AOD	A Inte	grated Accessibi	lity Standards	Regulation? *			Yes	○ No
	Read O. Reg.	191/11	, s. 7 (1): Trainin	g		Learn more abo	out your requir	ements for	question 3.a
	Comments for question 3.a	Res Volu kept ched	ources Division inteers, and co i. In 2025, staff	. The same t mmunity mer will also be tr ting staff repo	raining is provid nbers who assis raining on creati orts, and guidar	n and onboarding and to elected off st with the election in accessible do not now to engine on how to engine the control of th	icials, Livesto on. A record o ocuments, be	ock Valuers of the traini provided a	s, ng is a
	3.b The Hum	an Rig	jhts Code as it po	ertains to peop	le with disabilitie	s? *		Yes	○ No
	Read O. Reg.	191/11	, s. 7 (1): Trainin	g		Learn more abou	ut your require	ments for q	uestion 3.b
	Comments for question 3.b	The	onboarding ori	entation proc	ess includes a s	segment on the H	luman Right	s Code.	
Int	formation and	d com	munications					7 .	12.1
4.	that is accessible Note: This request on your premise	ole to p uireme es	people with disab	oilities? * regardless of w	and responding hether customer		•	Yes 🔘	No
Re	ead O. Reg. 191	/11, s.	11 (1): Feedbac	<u>k</u>		Learn more abo	out your requir	ements for	question 4
	and comr	munica is requ	ations supports w uirement is applic	ith respect to	the feedback pro	accessible format cess? * tomers are permitt		Yes	○ No

question 4.a

Comments for Loyalist Township has a process for receiving and responding to feedback about accessibility. The methods include in-person, email, online form, or simply calling the Clerk's Division. Through the Accessible Customer Service Policy, staff aim to address and respond to the feedback within a practical timelines. We have notified the public about the availability of accessible formats and communication supports with the feedback process.

5. Does your organization have one (or more) website(s) which it controls directly or indirectly ('controls' means that your organization is able to add, remove and/or modify content and functionality of the website)? * (If Yes, please answer an additional question)

Yes

O No

Read O. Reg. 191/11, s. 14: Accessible websites and web content

Learn more about your requirements for question 5

5.a. 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)? In the comments box, please list the complete names and addresses of your publicly available web content, including websites, social media pages, and apps. *

Yes

 \bigcirc No

Read O. Reg. 191/11, s. 14: Accessible websites and web content

Learn more about your requirements for question 5.a

question 5.a

In 2024, staff have undertaken a review of all uploaded documents to the Township website; removed documents which are no longer active or required; conducted accessibility checks on remaining documents using Adobe Pro Accessibility Checker; following accessibility checks, many documents were remediated and replaced on the website. A form link for an accessible alternative document was added to any remaining documents that were not able to be remediated. In 2025 the Township will be changing to a new website content management system where we will continue to optimize the accessibility of the Township website.

loyalist.ca

loyalist.civicweb.net

https://www.instagram.com/explorelovalist/

https://www.facebook.com/LOYTWP

https://www.linkedin.com/company/loyalisttownship/

https://www.youtube.com/@LoyalistTownshipGov

engage.lovalist.ca

Customer Service

6. Does your organization provide training about providing goods, services or facilities to persons with disabilities to the following? *

Yes

○ No

- Staff and volunteers
- People involved in developing accessibility policies
- People providing goods, services or facilities on behalf of the organization

(If Yes, please answer an additional question)

Read O. Reg. 191/11, s. 80.49: Training for staff, etc.

Learn more about your requirements for question 6

o.a.	Does the	training include all of the following: *			Yes	○ No
	A revie	ew of the purposes of the AODA?				
	A revie	ew of the purposes of the Customer Se	ervice Standards?	>		
	• How to	o interact and communicate with perso	ns with various ty	pes of disability?		
		o interact with persons with disabilities sistance of a guide dog or other servicen?				
	provid	o use equipment or devices available of led by the provider that may help with t es to a person with a disability?				
		to do if a person with a particular type on sing the provider's goods, services or f		ring difficulty		
Read	O. Reg. 1	91/11, s. 80.49: Training for staff, etc.		Learn more about your r	equirements for q	uestion 6.a
	ments for tion 6.a	Included as part of the new staff of the customer service standards, hodisabilities, how to interact with so equipment provided, and what to de-	ow to interact a meone who is ι	nd communicate with pusing an assistive device	people who live wee, how to use	
	, ,	nization provide information in an acce answer additional questions)	ssible format? *			lo
Read O.	Reg. 191/	11, s. 80.51 (1): Format of documents		Learn more about your r	equirements for q	uestion 7
		vision of information in accessible form account the individual's disability? *	at done so in a ti	mely manner that	Yes	○ No
Read	O. Reg. 1	91/11, s. 80.51 (1): Format of document	<u>nts</u>	Learn more about your r	equirements for q	uestion 7.a
	ments for tion 7.a	A person may request a documen requester to determine the format practically timely manner and with	that is accessib	le to the requester's ne		ne in
	TT-00	vision of information in accessible form ar cost charged to other persons? *	at at a cost no m	ore than	Yes	○ No
	O. Reg. 1	91/11, s. 80.51 (1): Format of document	<u>nts</u>	Learn more about your r	equirements for q	uestion 7.b
Read						
Comi	ments for tion 7.b	There is no cost.				
Comi		There is no cost.		x		

5	Does your organization ever require a person with a disability to be support person when on your premises? * If Yes, please answer an additional question)	e accompanied by a	○ Yes	No
	d O. Reg. 191/11, s. 80.47 (5): Use of service animals and port persons	Learn more about your re	equirements for	question 8
8	 B.a. Does your organization do all of the following before requiring disability to be accompanied by a support person on your pre Consult with the person with a disability? 		○Yes	○No
	 Determine a support person is necessary to protect the h person with a disability or others on premises? 	ealth or safety of the		
	 Determine that there is no other way to protect the health with a disability or others on premises? 	or safety of the person		
1	191/11, s. 80.47 (5): Use of service animals and support persons	Learn more about your re	equirements for	question 8.a
Em	ployment	ACCOMPANIES OF THE		U = 3
i	Does your organization employ any persons with disabilities for whole and individualized workplace emergency response information? * If Yes, please answer additional questions)	om you have provided	○Yes	No
	d O. Reg. 191/11, s. 27 (1): Workplace emergency response rmation	Learn more about your re	equirements for	question 9
Ş	P.a. Does your organization review the individualized workplace e information for all of the following? *	emergency response	○Yes	○ No
	 When the employee moves to a different location in the or 	rganization?		
	 When the employee's overall accommodation needs or p 	lans are reviewed?		
	 When your organization reviews its general emergency p 	olicies?		
	Read O. Reg. 191/11, s. 27 (4): Workplace emergency response nformation	Learn more about your re	equirements for	question 9.a
	Comments for question 9.a			

9.b.	Do any of the employees for whom your organization had workplace emergency response information require as (If Yes, please answer additional questions)		○ Yes	○No
Rea	d O. Reg. 191/11, s. 27 (2): Workplace emergency resp	onse Learn more about your requ	irements for	question 9.b
infor	rmation			
	mments for			
que	estion 9.b			
	9.b.i Has your organization, with the employee's coremergency response information to the person assistance to the employee? *		○ Yes	○ No
	Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information	Learn more about your requir	ements for o	uestion 9.b.i
	Comments for			
	question 9.b.i			
	9.b.ii Was the individualized workplace emergency re soon as practicable after your organization bec accommodation due to the employee's disabilit	ame aware of the need for	○ Yes	○ No
	Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information	Learn more about your requir	ements for o	uestion 9.b.ii
	Comments for			
	question 9.b.ii			
Design	n of public spaces	and the second second		
	ce January 1, 2017, has your organization constructed n wing items? *	new or redeveloped any of the	Yes	No
•	Outdoor public use eating areas			
•	Outdoor play space			
	Off-street parking			
•	Service counter			
	Fixed queuing guides			
•	Waiting areas			
(If Y	es, please answer additional questions)			
Read O	. Reg. 191/11 Part IV.1: Design of public spaces standar	rds Learn more about your requ	irements for	question 10

	ents as outlined in the Design of Public Spaces Stand		Yes	O NO
	91/11 Part IV.1: Design of public spaces	Learn more about your requ	irements for	question 10.a
Comments for question 10.a	Outdoor Play Spaces: 2023 - Briscoe Park installation of new two bay and engineered wood fiber surface.	swing system that includes o	one inclusiv	e seat
	Off-Street Parking: 2023 - One accessible spot added in front of the 2023 - Two accessible spots added at Willie Pra		sview	
preventati spaces, a	r organization's multi-year accessibility plan include p ive and emergency maintenance of the accessible ele nd for dealing with temporary disruptions when acces king order? *	ments in public	Yes	○ No
Read O. Reg. 1	91/11, s. 80.44: Maintenance of accessible elements	Learn more about your requ	irements for	question 10.b
Comments for question 10.b	Notice of Temporary Disruptions is included in to out of service, staff immediately place signage barricaded depending on what the infrastructure would prioritize the repair(s). If it cannot be repairmediately to make the repair. For instance, if door will be propped open during business hour	or out of order or with caution is and the Facility Maintena aired internally a contractor want automatic door opener re	ned tape/ ance Attend vould be cal equires repa	ants lled in air the
ODA	71.7 66	THE RESERVE	7	
	ation a municipality with population of 10,000 or more answer additional questions)	? *	Yes	○ No
	for Ontarians with Disabilities Act, 2005, S.O. Municipal Accessibility Advisory Committees	Learn more about your requ	irements for	question 11
Section 2	organization established an accessibility advisory cor 9 of the AODA? * ease answer additional questions)	nmittee as described in	Yes	○ No
Read Accessib	ility for Ontarians with Disabilities Act, 2005, S.O. 29: Municipal Accessibility Advisory Committees	Learn more about your requ	irements for	question 11.a
Comments for question 11.a	Loyalist Township established a Joint Accessib Lennox and Addington and its lower-tier munici		the County	of
	the majority of members in the committee persons wi		Yes	○ No
	essibility for Ontarians with Disabilities Act, 2005, 5, c. 11, s. 29: Municipal Accessibility Advisory es	Learn more about your require	<u>ements for q</u> ı	uestion 11.a.i
Commen question	, , , , , , , , , , , , , , , , , , , ,			

11.a.ii Has the committee provided advice to council about site plans and drawings (as described in Section 41 of the *Planning Act*) as well as advice on the requirements and implementation of accessibility standards? *

Yes

 \bigcirc No

Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees

Learn more about your requirements for question 11.a.ii

Comments for question 11.a.ii example, in 2023, the Joint Accessibility Advisory Committee provided feedback on the drawings and site plans for the WJ Henderson Recreation Centre Renewal, a new roundabout, washroom and customer service/main reception area renovations.



2023 Accessibility Compliance Report

Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name Loyalist Township

Filing organization business number (BN9) 873299499

Fields marked with an asterisk (*) are mandatory.

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.**