

Organization category Business or Non-profit

Number of employees range 20-49

Filing organization legal name The Orillia Public Library Board

Filing organization business number (BN9)

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:

- <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 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) * 2023-08-08

Certifier information

		First name * Bessie			
Position title * Chief Executive Officer	Business phone number * 705-325-2573	Extension Check here if TTY			
Email * bsullivan@orilliapubliclibrary.ca		Alternate phone number	Extension	Fax number 705-327-1744	

Primary contact for the organization(s)

Check if the primary contact is same as the certifier	
	First name * Bessie

Position title * Chief Executive Officer	Business phone number * 705-325-2573	Extension	Check her if TTY	е		
Email * bsullivan@orilliapubliclibrary.ca			phone number	Extension	Fax numbe 705-327-1	
D. Accessibility complia	ance report questions					
Instructions						
Please answer each of the foll	lowing compliance questions.	Use the Comm	ents box if you v	vish to comm	ent on any re	esponse.
If you need help with a specific view the relevant AODA regula						n the left to
Customer Service						
 Does your organization propersons with disabilities to Staff and volunteers 		goods, service	s or facilities to		 Yes 	⊖ No
 People involved in dev 	eloping accessibility policies					
 People providing good 	s, services or facilities on beha	alf of the organi	zation			
(If Yes, please answer an	additional question)					
Read O. Reg. 191/11, s. 80.49	9: Training for staff, etc.		Learn more abo	out your requ	irements for	<u>question 1</u>
1.a. Does the training inc	lude all of the following: *				• Yes	◯ No
 A review of the p 	urposes of the AODA?					
 A review of the purposes of the Customer Service Standards? 						
 How to interact and communicate with persons with various types of disability? 						
 How to interact with persons with disabilities who use an assistive device or require the assistance of a guide dog or other service animal or the assistance of a support person? 						
 How to use equipment or devices available on the provider's premises or otherwise provided by the provider that may help with the provision of goods, services or facilities to a person with a disability? 						
	erson with a particular type of o ovider's goods, services or fac		ing difficulty			
<u>Read O. Reg. 191/11, s. 8</u>	0.49: Training for staff, etc.		Learn more abo	<u>out your requ</u>	irements for	question 1.a

Comments for question 1.a

 If there is a temporary disruption of goods, services or facilities used by persons with disabilities, does your organization give a notice of the disruption to the public? * (If Yes, please answer an additional question) 			• Yes	⊖ No	
Re	ead O. Reg. 191/11, s. 80.48 (1): Notice of temporary disruptions	Learn more about your	requirement	s for question 2	
	2.a. Does the notice of the disruption include all of the following? *		 Yes 	◯ No	
	The reason for the disruption?				
	Its anticipated duration?				
	A description of available alternative facilities or services (if a	any)?			
disruptions			<u>requirement</u>	<u>s for question 2.a</u>	
	Comments for question 2.a				
<u></u>	Does your organization ever require a person with a disability to be ac		⊖Yes	(•) No	
0.	a support person when on your premises? * (If Yes, please answer an additional question)		U Tes		
_	ead O. Reg. 191/11, s. 80.47 (5): Use of service animals and	<u>Learn more about your</u>	requirement	<u>s for question 3</u>	
<u>su</u>	pport persons				
	3.a. Does your organization do all of the following before requiring a disability to be accompanied by a support person on your premi		⊖ Yes	◯ No	
	 Consult with the person with a disability? 				
 Determine a support person is necessary to protect the health or safety of the person with a disability or others on premises? 					
	• Determine that there is no other way to protect the health or person with a disability or others on premises?	safety of the			
	Read O. Reg. 191/11, s. 80.47 (5): Use of service animals and support persons	Learn more about your	<u>requirement</u>	<u>s for question 3.a</u>	
	Comments for question 3.a				

Sa	ve	form	

Print form **Clear certification**

Clear all questions responses

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