

### How to complete 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 local computer and be sure to open it with 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:

- Nine-digit **Business number (BN9)**, that identifies your organization with the Canada Revenue Agency (found on federal and provincial tax returns). In the rare case that an organization doesn't have a Business number (BN9), an AODA identifier (assigned by the Accessibility Directorate of Ontario) would be used in its place.
- Your Organization category
  - 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 the regulation 191/11</u>), or an agency, board or commission (<u>under 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
- A person with authority to bind your organization (e.g. a director or senior officer) must certify your organization's accessibility compliance report as complete and accurate.

You are able to file on behalf of up to 20 organizations using one form. To do so you will need each organization's business number (BN9) or AODA identifier, number of employees and address. All organizations filing under the same form must have the same **Organization category** (e.g. Business/Non-profit), **Number of employees range** (e.g. 20-49, 50+), **certifier**, and all answers to the accessibility compliance questions must be the same. If not, you will need to complete a separate form for each organization.

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

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:

- Download and open the form
- Save the form on your computer and open it with Adobe Reader.
- · Enter your organization's information then select Next.
- If you need information about your organization's requirements, click on the appropriate 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.
- The questions you will see on the form are based on the accessibility requirements that apply to your **Organization** category (e.g. Business/non-profit) and **Number of employees range** (e.g. 20-49, 50+).
- Click **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, click Save form at the bottom of the page before clicking Next.
- Review the accessibility compliance report summary.

### Certify and submit your report

- Complete the information in the Certifier Information section
- The certifier must:
  - Review all information entered on the form for completeness and accuracy.
  - Check the three boxes to indicate their authority as a certifier in your organization.
- Enter information for a primary contact in your organization. This person may be the certifier or a different person.
- You may save the form at any time by clicking the Save form button.
- When you are ready to submit your report, click the Save and submit button. You will be prompted to save the form on your local computer first and then it will be submitted.
- Wait for a confirmation prompt that either confirms submission or indicates any problems.
- Once you have successfully submitted your certified report, an email will be sent to the Certifier and the Primary Contact with a confirmation number and an accessible PDF copy of your organization's accessibility compliance report.

If you have any questions please contact the AODA Contact Centre (ServiceOntario) at:

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



#### **Accessibility Directorate of Ontario**

# 2017 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. Organization	on information						
Organization cate	anization category *			Number of employees range *		Reporting year	
Business / non-profit 5			50+ employees		2017		
Business detai	ls						
Organization legal	name *				Number o	f employees in Ontario * Help	
Guelph Public					150		
Business number	(BN9) * Help						
889091245							
Check if opera	ting/business name i	enal se ames s	al name				
	ating/business name	s same as lega	ii name		I anguage	preference for communications *	
Guelph Public	-				English		
Sector that best de	escribes your organiz	ation's principa	al business activity	, *	Help		
51 - Informatio	n and cultural ind	ustries					
Subsector (if poss	ible)			Industry group (if p	ossible)		
519 - Other info	ormation services	}		5191 - Other int	formation se	rvices	
Mailing address Address where let	ters can be sent to th	e person respo	onsible for coordin	ating the organization	on's AODA com	npliance activities.	
	Canada		) USA		International		
Type of address *	Street addre	ss C	) Street address se	erved by route	Other		
Unit number	Street number * 100	Street name * Norfolk					
Street type	Street direction		City *			Province *	
Street			Guelph			ON (Ontario)	
Postal code * N1H 4J6							
<u> </u>	-			countable for the or	ganization's cor	mpliance with the AODA.)	
Country *	Canada	$\subset$	) USA	$\circ$	International		
Type of address *	Street addre	ss C	) Street address se	erved by route	Other		
Unit number	Street number * 100	Street name * Norfolk					
Street type	Street direction	•	City *			Province *	
Street			Guelph			ON (Ontario)	
Postal code * N1H 4J6							

Use the "Add new organization" button to add additional organizations to which this accessibility report is to be applied (maximum 20). Note: All organizations must have the same organization category, number of employees range, compliance answers and certifier, and have different business numbers, in order to file under the same form.

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## **Accessibility Directorate of Ontario**

# 2017 Accessibility compliance report

Organization category Business / non-profit	Number of employees range 50+				
Filing organization legal name Guelph Public Library					
Filing organization business number (BN9) 889091245					
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	rio ca/accessibility				
Additional accessibility requirements apply if you are:	no.ca/accessionity				
a municipality					
• an education institution (e.g. school board, college, university or school)					
<ul> <li>a producer of education material (e.g. textbooks)</li> </ul>					
• a library board					
C. Accessibility compliance report questions					
Instructions Please answer each of the following compliance questions. Use the Comments box if you wish to compliance questions are the Comments box if you wish to compliance questions. Use the Comments box if you wish to complete the comments become the comments box if you wish to	ow. Use the link on the left to view the				
<ol> <li>Does your organization notify its employees and the public about the availability of accommodate during the recruitment process? *</li> </ol>	ons     Yes    No				
Read O. Reg. 191/11 s.22 - 24: Recruitment Learn r	more about your requirements for question 1				
Comments for question 1					
<ol> <li>Does your organization provide employees with updated information about its policies to support employees with disabilities? *</li> </ol>	● Yes				
Read O. Reg. 191/11 s.25: Informing employees of supports  Learn r	more about your requirements for question 2				
Comments for question 2					
<ol> <li>When requested, does your organization provide employees with disabilities information in an action or with communication supports? *</li> </ol>	ccessible				
Read O. Reg. 191/11 s.26: Accessible formats and communication supports for employees Learn r	more about your requirements for question 3				
Comments for question 3					

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<ol> <li>Does your organization prepare individualized workplace emergency response information for employees with disabilities? *</li> </ol>			○ No
Read O. Reg. 191/11 s.27: Workplace emergency response information	Learn more about yo	our requirements	for question 4
Comments for question 4			
Make new or redeveloped public spaces accessible  5. Since January 1, 2017, has your organization constructed new or redeveloped existin that you intend to maintain? *  (if Yes, you will be required to answer additional questions)	ng recreational trails	○ Yes	No
Read O. Reg. 191/11 Part IV.1: Design of Public Spaces Standards - Definitions	Learn more about yo	our requirements	for question 5
5.a. Did your organization consult with the public and persons with disabilities prior or redeveloping existing recreational trails as outlined in the s.80(8) of the Integ Standards Regulation (IASR)? *		○ Yes	○ No
Read O. Reg. 191/11 s.80(8): Consultation, recreational trails	Learn more about you	r requirements fo	or question 5.a
Comments for question 5.a			
5.b. Does your organization ensure that its new or redeveloped recreational trails m requirements as outlined s.80(9) of the IASR? *	eet the technical	○ Yes	○ No
Read O. Reg. 191/11 s.80(9): Technical requirements for trails	Learn more about you	r requirements fo	or question 5.b
Comments for question 5.b			
6. Since January 1, 2017, has your organization constructed new or redeveloped existir routes that you intend 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 - Definitions		○ Yes	No
	Learn more about yo		_
6.a. Does your organization ensure that its new or redeveloped beach access router requirements as outlined in IASR s.80(10)? *	s meet the technical	( ) Yes	○ No
Read O. Reg. 191/11 s.80(10): Technical requirements for beach access routes	Learn more about you	r requirements fo	or question 6.a
Comments for question 6.a			
7. Do your new or redeveloped recreational trail and/or beach access routes include bo (if Yes, you will be required to answer additional questions)	ardwalks? *	○ Yes	○ No
7.a. Where new or redeveloped recreational trails and/or beach access routes have the boardwalk meet the technical requirements as outlined in s.80(12) of the IA		○ Yes	○ No
Read O. Reg. 191/11 s.80(12): Boardwalks	Learn more about you	r requirements fo	or question 7.a
Comments for question 7.a			

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<ol> <li>Do your new or redeveloped recreational trails and/or beach access routes include ramps? *     (if Yes, you will be required to answer additional questions)</li> </ol>		○ No
Read O. Reg. 191/11 s.80(13): Ramps  Learn more about yo	ur requirements	for question 8
8.a. Where new or redeveloped recreational trails and/or beach access routes have a ramp, does the ramp meet the technical requirements as outlined in s.80(13) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(13): Ramps  Learn more about your	requirements for	or question 8.a
Comments for question 8.a		
9. Since January 1, 2017, has your organization constructed new or redeveloped existing outdoor public use eating areas that you intend to maintain? *  (if Yes, you will be required to answer additional questions)	<ul><li>Yes</li></ul>	○ No
Read O. Reg. 191/11 s.80(17): Outdoor public use eating areas, general requirements  Learn more about your property of the control of the con	ur requirements	for question 9
9.a. Does your organization ensure that where they construct or redevelop outdoor public use eating areas that they meet the requirements as outlined in s.80(17) of the IASR? *	Yes	○ No
Read O. Reg. 191/11 s.80(17): Outdoor public use eating areas, general requirements Learn more about your	requirements for	or question 9.a
Comments for question 9.a		
10. Since January 1, 2017, has your organization constructed new or redeveloped existing outdoor play spaces that you intend to maintain? * (if Yes, you will be required to answer additional questions)	○ Yes	<ul><li>No</li></ul>
10.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 as outlined in s.80(19) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(19): Outdoor play spaces, consultation requirements  Learn more about your requirements	equirements for	question 10.a
Comments for question 10.a		
10.b. Did your organization incorporate accessibility features when constructing a new or redeveloping an existing play space as outlined in s.80(20a) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(20a): Outdoor play spaces, accessibility in design  Learn more about your r	equirements for	question 10.b
Comments for question 10.b		
10.c. Does your organization's new or redeveloped play spaces have a firm ground surface as outlined in s.80(20b) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(20b): Outdoor play spaces, accessibility in design  Learn more about your results of the control of t	requirements for	question 10.c
Comments for question 10.c		
11. Since January 1, 2017, has your organization constructed new or redeveloped existing exterior paths of travel that you intend to maintain? *  (if Yes, you will be required to answer additional questions)	○ Yes	No
11.a. Where applicable, do your newly constructed or redeveloped exterior paths of travel meet the technical and general requirements as outlined in s.80(21) – 80(31) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s. 80(21) - 80(31): Exterior Paths of Travel  Learn more about your r	requirements for	question 11.a
Comments for question 11.a		

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parking facilities that you intend to maintain? *  (if Yes, you will be required to answer additional questions)	○ Yes	<ul><li>No</li></ul>
12.a. When constructing new or redeveloping off-street parking facilities that you intend to maintain, do you ensure that the off-street parking facilities meet the accessibility requirements as outlined in s.80(32) – 80(37) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(32) - 80(37): Accessible Parking  Learn more about your relationship.	equirements for	question 12.a
Comments for question 12.a		
13. Since January 1, 2017, has your organization constructed a new or replaced an existing service counter? * (if Yes, you will be required to answer additional questions)	<ul><li>Yes</li></ul>	○ No
13.a. Does your organization ensure that new or redeveloped service counters meet the technical requirements as outlined in s.80(41) of the IASR? *	Yes	○ No
Read O. Reg. 191/11 s. 80(41): Service counters  Learn more about your research.	equirements for	question 13.a
Comments for question 13.a		
14. Since January 1, 2017, has your organization constructed new fixed queuing guides? * (if Yes, you will be required to answer additional questions)	○ Yes	<ul><li>No</li></ul>
14.a. Does your organization ensure that new fixed queuing guides for obtaining services meet the technical requirements as outlined in s.80(42) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(42): Fixed queuing guides  Learn more about your recommendation.	equirements for	question 14.a
Comments for question 14.a		
15.Since January 1, 2017, has your organization constructed new or redeveloped existing waiting areas? * (if Yes, you will be required to answer additional questions)	○ Yes	No
15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? *	○ Yes	○ No
Read O. Reg. 191/11 s.80(43): Waiting areas  Learn more about your relationships to the second secon	equirements for	question 15.a
Comments for question 15.a		
16. Does your organization's public spaces have accessible elements in place as required under the Design of Public Spaces Standard of the IASR? *  (if Yes, you will be required to answer additional questions)	Yes	○ No
Read O. Reg. 191/11 Part IV. 1: Design of public spaces standards  Learn more about you	r requirements f	for question 16
16.a. 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 results.	equirements for	question 16.a
Comments for question 16.a		

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17. Other than the requirements cited in the above questions, is your organization complying with all other requirements in effect under the Integrated Accessibility Standards Regulation? \*

Yes

○ No

Read O. Reg. 191/11: Integrated Accessibility Standards

Learn more about your requirements for question 17

Comments for question 17

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## **Accessibility Directorate of Ontario**

# 2017 Accessibility compliance report

Organization category Busin	Number of employees range 50+				
Filing organization legal nam	e Guelph Public Library	/			
Filing organization business i	number (BN9) 8890912	245			
Fields marked with an asterisk (*	r) are mandatory.				
D. Accessibility compliance	e report summary				
Your responses to the questions	on your accessibility repor	t indica	ate that your organization	is in compliand	ce with AODA standards.
Your organization may be audited	to verify compliance.			·	
E. Accessibility compliance	e report certification				
Section 15 of the <i>Accessibility for O</i> the required information has been p					
Note: It is an offence under the Act	to provide false or misleading	g inform	nation in an accessibility repo	ort filed under th	e AODA.
The certifier may designate a primar main contact.	ry contact for the Accessibility	y Direct	orate to contact the organiza	ation(s); otherwi	se the certifier will be the
Certifier: Someone who can legally	bind the organization(s).				
Primary Contact: The person who	will be the main contact for a	ccessib	ility issues.		
Acknowledgement					
✓ I certify that I have the authority	to bind all organizations spec	cified in	Section A of this form, *		
✓ I certify that all the required info	rmation has been included in	this rep	oort, and, *		
✓ I certify that the information in the	nis report is accurate. *				
Certification date (yyyy-mm-dd) *	2019-03-19				
Certifier information					
Last name * Atkins			First name * Dan		
Position title * Director	Business phone number * 519 824-6220	Exten 313	sion Check here if T	ТҮ	
Email * datkins@guelphpl.ca			Alternate phone number	Extension	Fax number
Primary contact for the organizat	ion(s)				
Check if the primary contact is s	ame as the certifier				
Last name * First name *					
Lynn Megan					
Position title * Manager, Human Resources	Business phone number * 519 824-6220	Exten 234	Onesk here ii 1		T
Email * mlynn@guelphpl.ca  Alternate phone number Extension Fax number					

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