

2021 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.

Fields marked with an asterisk (*) are mandatory. A. Organization information Number of employees range * Organization category * Reporting year **Designated Public Sector** 1-49 employees 2021 **Business details** Organization legal name * Number of employees in Ontario * Help The Municipality of The Township of Joly Business number (BN9) * Help Check this box if you have received an AODA identifier 108089459 from the Ministry for Seniors and Accessibility Check if operating/business name is same as legal name Organization operating/business name The Municipality of The Township of Joly Sector that best describes your organization's principal business activity * Help 91 - Public administration Subsector (if possible) Industry group (if possible) 913 - Local, municipal and regional public administration 9139 - Other local, municipal and regional public administr 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. Canada () USA International Street address Type of address * Street address served by route Other Unit number Street number * Street name * 871 Forest Lake Rd, Box 519 Street direction City * Street type Province * Sundridge ON (Ontario) Postal code (e.g. A1A 1A1) * P0A 1Z0 **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 The fields below will change based on your selection. Canada USA International Other Type of address * Street address Street address served by route

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Unit number	Street number * 28	Street name * Municipal Lane		Street type		Street direction	
City * Sundridge			Province * ON (Ontario)		Posta P0A	al code (e.g. A1A 1A1) * . 1Z0	

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Organization category Design	gnated Public Sector			1	Number of e	mployees range 1-49
Filing organization legal nam	e The Municipality of The	e Tov	vnship of J	oly		
Filing organization business	number (BN9) 10808945	59				
Fields marked with an asteri	sk (*) are mandatory.					
B. Understand your acce	essibility requirement	3				
Before you begin your report, you	ou can learn about your acc	essib	lity requiren	nents at <u>ontario</u>	o.ca/accessit	pility
Additional accessibility requiren a library board	nents apply if you are:					
 a producer of edu 	ucation material (e.g. textboo	oks)				
 an education inst 	titution (e.g. school board, co	ollege	university	or school)		
 a municipality 						
If you are a municipality submit	ting this report, and submitti	na or	behalf of lo	cal boards inle	ease indicate	which boards below
C. Accessibility complia	nce report certificatio	n				
		-	2005		.:	include a statement
Section 15 of the <i>Accessibility</i> a certifying that all the required in organization(s).						
Note: It is an offence under the	Act to provide false or misle	eadin	g informatio	n in an accessi	ibility report f	iled under the AODA.
The certifier may designate a potherwise the certifier will be the		ry for	Seniors and	d Accessibility	to contact the	e organization(s);
Certifier: Someone who can le	gally bind the organization(s	s).				
Primary Contact: The person	who will be the main contact	t for a	ccessibility	ssues		
Acknowledgement						
✓ I certify that all the informati	on is accurate and I have th	e aut	nority to bine	the organizat	ion *	
Certification date (yyyy-mm-dd) 2021-12-22					
Certifier information						
Last name * Martin			First name Jennifer	*		
Position title * Other	Business phone number * 705-384-5428	Ex	tension	Check he if TTY	re	
Email * office@townshipofjoly.com			Alternate p	hone number	Extension	Fax number
AND ADDRESS (SASTING)			•		•	- Page 5 0f 11

Primary contact for the org	ganization(s)					
✓ Check if the primary contact	is same as the certifier					
Last name * Martin		First n Jenni				
Position title * Other	Business phone number * 1705-384-5428	Extension	Check her	re	==	
Email * office@townshipofjoly.com		Alterna	ate phone number	Extension	Fax number	er
D. Accessibility complian	ce report questions			•		
Instructions Please answer each of the follow If you need help with a specific oview the relevant AODA regulation	juestion, click the help links w	hich will o	pen in a new brows	er window. L	Jse the link o	•
Municipal Accessibility Ad	visory Committees				77.55	
1. Is your organization a munic			re? *			No
(If Yes, you will be required the Read Accessibility for Ontarians 2005, c. 11, s. 29; Municipal Acc		O.	Learn more abo	out your requ		ALCOHOLD DE DETON
outlined in section 29 of	established an accessibility actified the AODA? ** Lired to answer additional que	,	mmittee as		○ Yes	○ No
Read Accessibility for Ontari	ians with Disabilities Act. 2005 Accessibility Advisory Commi	5. S.O.	Learn more abo	out your requ	irements for	question 1.a
2. Are the majority of the member	ers of the committee persons	with disab	lities?		() Yes	○ No
Read Accessibility for Ontarians 2005, c, 11, s, 29 (3); Municipal Comments for question 2	with Disabilities Act, 2005, S.	O.	Learn more abo	out your requ	_	
•	Planning Act) as well as advice tation of accessibility standard with Disabilities Act, 2005, S.	e on the is? *	rawings L <mark>earn more ab</mark> o	out your requ	Yes	○ No question 3
Foundational requirements	3					
Does your organization have commitment? *	e written accessibility policies	that includ	e a statement of		Yes	○ No
Read O.Reg. 191/11 s. 3: Estab Comments for question 4	lishment of accessibility polici	es	Learn more abo	out your requ	irements for	question 4

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	organization have a document or documents of your acced, on request, provide them in an accessible format?	essibility policies publicly	Yes	○ No
Read O. Reg. 191/11 s. 3 (3): Establishment of accessibility policies		Learn more about your re	quirements for	question 5
Comments for question 5				
	rganization established, implemented, maintained and portrained on your organization's website?	osted a multi-year	Yes	○ No
Read O. Reg. 1	191/11 s. 4: Accessibility plans	Learn more about your re	quirements for	question 6
Comments for question 6				
in its acces	rganization completed a review of its progress implemen sibility plan and documented the results in an annual sta n's website? *		Yes	○ No
Read O. Reg. 1	191/11 s. 4 (1), 4(3): Accessibility plans	Learn more about your re	quirements for	question 7
Comments for question 7	Joly Township has been renting office space for the workable condition and may never be. We have been working with our landlord and to off in the parking lot.			
	ganization consult with people with disabilities when esta	ablishing, reviewing and	Yes	○ No
Read O. Reg. 1	191/11 s. 4 (2): Accessibility plans	Learn more about your re	quirements for	question 8
Comments for question 8 9. Does your of Standards I disabilities?	organization provide the appropriate training on the Integ Regulation and the Human Rights Code as it pertains to	rated Accessibility persons with	Yes	○ No
54 BOWLSON F	191/11 s, 7: Training	Learn more about your re	equirements for	question 9
Comments for question 9				
the Integrat all persons who particip	ersons that require training trained as soon as practicable and Accessibility Standards Regulation, the following persons are an employee of, or a volunteer with, the organizate in developing the organization's policies; and (c) alloads, services or facilities on behalf of the organization.	sons require training; (a) cation; (b) all persons	Yes	○ No
	191/11 s. 7 (3): Training	Learn more about your re	quirements for	question 10
Comments for question 10				
	organization provide training in respect of any changes to an ongoing basis?	o your accessibility	Yes	○ No
and the last management of the last managemen	191/11 s. 7 (4): Training	Learn more about your re	equirements for	question 1
Comments for question 11				

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12. Does your organization keep a record of the training provided, include the training is provided and the number of individuals to whom it is p	Yes	○ No	
Read O. Reg. 191/11 s. 7 (5): Training Learn more about your			question 12
Comments for question 12			
13. Does your organization ensure that its public feedback processes ar persons with disabilities by providing or arranging accessible formats supports, upon request, and do you notify the public of this accessib Note: "public" can include customers, clients, third parties, or business	s or communication le feedback policy?	Yes	○ No
Read O. Reg. 191/11 s. 11: Feedback	Learn more about your r	equirements for	question 13
Comments for question 13			
Information and communications			
14. As of January 1, 2021, do all your organization's internet websites of Web Consortium Web Content Accessibility Guidelines 2.0 Level AA and pre-recorded audio descriptions)? Please indicate in the comme complete names and addresses of your publicly available web contents social media pages, and apps *	(except for live captions ent box provided the	Yes	○No
Read O. Reg. 191/11 s. 14 (4); Accessible websites and web content	Learn more about your r	equirements for	question 14
Publicly available web content and comments for question 14 Website: www.townshipofjoly.com Facebook: Joly Township & Facebook Page: Township of Joly			
Employment			
15. Does your organization notify successful applicants of its policies for employees with disabilities during offers of employment? *	accommodating	Yes	○ No
Read O. Reg. 191/11 s. 24: Notice to successful applicants	Learn more about your r	equirements for	question 15
Comments for question 15			
16. Does your organization develop and have in place a written process documented individual accommodation plans for employees with dis		Yes	○ No
Read O. Reg. 191/11 s. 28: Documented individual accommodation plans	Learn more about your r	equirements for	question 16
Comments for question 16			
Transportation			
17. Does your organization provide transportation services? * (If Yes, you will be required to answer an additional question.)		○ Yes	No
Read O. Reg. 191/11 Part IV: Transportation standards	Learn more about your r	equirements for	question 17
17.a. Does your organization conduct employee and volunteer acce safe use of accessibility equipment and features of your transp		○ Yes	○ No
Read O. Reg. 191/11 s. 36: Accessibility training	Learn more about your r	equirements for	question 17.
Comments for question 17.a			

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Design of pu	ıblic spaces			
constructed maintain?	organization last reported on its accessibility compliance, it is new or redeveloped existing off-street parking facilities the will be required to answer an additional question.)		○ Yes	No
800 PM 100 PM 100 PM	191/11 Part IV.1: Design of public spaces standards	Learn more about your r	equirements for	question 18
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? *				○ No
Read O. Re	eg. 80.32-37: Accessible parking	Learn more about your r	equirements for	question 18.a
Comments question 18				
constructed	organization last reported on accessibility compliance, has I new or redeveloped existing outdoor play spaces that it in will be required to answer an additional question.)		○ Yes	No No No
Read O. Reg. 1	191/11 Part IV.1: Design of public spaces standards	Learn more about your r	equirements for	question 19
organ childr consu	constructing new or redeveloping existing outdoor play spatial consult with the public and persons with disabilities en and caregivers, and if you represent a municipality did you with the municipal advisory committee where one was each of the Integrated Accessibility Standards Regulation?	on the needs of your organization stablished as outlined	○ Yes	○ No
Read O. Re	eg. 191/11 s. 80.19: Outdoor play spaces	Learn more about your r	equirements for	question 19.a
Comments question 19				
and emerge with tempor	organization's multi-year accessibility plan include procedu ency maintenance of the accessible elements in public spa rary disruptions when accessible elements required under y Standards Regulations Part IV are not in working order?	ces, and for dealing the Integrated	○ Yes	No
Read O. Reg. 1	191/11 s. 80.44: Maintenance of accessible elements	Learn more about your r	equirements for	question 20
Comments for question 20	We are currently located in a temporary building got pandemic, we are trying to address accessibility and residents.			
Confirmation	n questions			
complying v Standards	the requirements cited in the above questions, is your orga with all other requirements for the Information and Comm under the Integrated Accessibility Standards Regulation?	unications	Yes	○ No
communication	191/11 Part II: Information and is standards	Learn more about your r	equirements for	question 21
Comments for question 21				
complying v	the requirements cited in the above questions, is your organish all other requirements for the Employment Standards Accessibility Standards Regulation?		Yes	○ No
Read O. Reg.	191/11 Part III: Employment standards	Learn more about your r	equirements for	question 22
Comments for question 22				

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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? *			O Yes	○ No
Read O. Reg.	191/11 Part IV: Transportation standards	Learn more about you	ur requirements for	question 23
Comments for question 23				
complying	the requirements cited in the above questions, is you with all other requirements for the Customer Service ted Accessibility Standards Regulation? *		Yes	○ No
Read O. Reg.	191/11 Part IV.2: Customer service standards	Learn more about yo	ur requirements for	question 24
Comments for question 24				
complying	the requirements cited in the above questions, is you with all other requirements for the Design of Public S ntegrated Accessibility Standards Regulation?		Yes	○ No
Read O. Reg.	101/11 Part IV.1: Design of Public Spaces standards	Learn more about yo	ur requirements for	question 25
Comments for question 25	Joly Township has been renting office space for workable condition and may never be. We have been working with our landlord and to in the parking lot.	-		

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2021 Accessibility Compliance Report

Organization category Designated Public Sector

Number of employees range 1-49

Filing organization legal name The Municipality of The Township of Joly

Filing organization business number (BN9) 108089459

Fields marked with an asterisk (*) are mandatory.

E. Accessibility compliance report summary

Your response to the questions on your accessibility report indicate that your organization is not in compliance with AODA standards. You have responded 'No' to the question(s) below:

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?

This means that your organization is not in full compliance with the requirements of the AODA. If your compliance status changes, you will need to submit an updated report.

Your organization may be audited to verify compliance.