

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. This form is due by **December 31, 2025.**

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

All full-time, part-time, seasonal and contract employees, regardless of status, must be counted when determining the number of employees an organization has. Employees based outside of Ontario, volunteers and independent contractors are not included for counting purposes. For more information, consult <u>Ontario.ca How to count your employees</u>.

• 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 Refer to the guidance above on how to count employees
- · 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. 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.

4. 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.

5. 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
- Organizations must make completed reports available to the public. The Ministry may conduct an audit to verify compliance. Failure to comply may result in enforcement actions.

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:

Toll free phone: 1-866-515-2025 Phone: 416-849-8276

Alternate formats

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



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 IASR (O. Reg. 191/11: Integrated Accessibility Standards) you are to comply with the IASR as a business/non-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 (O. Reg. 191/11: Integrated Accessibility Standards), 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. Organizatio	n information					
Organization category *			Number of employees range *		Reporting year	
Designated Pul	ublic Sector 50+ employees			2025		
Business deta	ails					
Organization lega	al name *				Number of	employees in Ontario * Help
Red Lake Marg	aret Cochenour M	lemorial He	ospital		100	
Business numbe 107879843	r (BN9) * <u>Help</u>					
✓ Check if oper	ating/business nam	e is same a	s legal name			
•	erating/business nar aret Cochenour M		ospital			
Sector that best 62	describes your orga	nization's p	rincipal business activ	vity *	<u>Help</u>	
Subsector (if pos 622	sible)					
Industry group (if 6221	f possible)					
Mailing addres	SS					
Address where le	etters can be sent to	the person	responsible for coord	linating the orga	nization's A	ODA compliance activities.
Country *						
The fields below	will change based of	on your sele	ction.			
Canada	\bigcirc u	JSA			onal	
Type of address	* Street addre 	ss C) Street address serv	ed by route	Other	
Unit number	Street number * 51	Street nam Highway				
Street type	Street direction		City *			Province *
Highway			Red Lake			ON (Ontario)
Postal code (e.g. P0V 2M0	. A1A 1A1) *					
Business add	ress					

(Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.)

 \checkmark Check if business address is same as mailing address

Country *									
The fields below will change based on your selection.									
Canada		ISA	\bigcirc Interna						
Type of address	* Street address 	ss C) Street address served by route	Other					
Unit number	Street number *	Street nam	ne *						
	51	Highway	105						
Street type	Street direction		City *		Province *				
Highway			Red Lake		ON (Ontario)				
Postal code (e.g. A1A 1A1) *									
POV 2M0									

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.



Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name Red Lake Margaret Cochenour Memorial Hospital

Filing organization business number (BN9) 107879843

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)
- 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 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) * 2025-06-11

Certifier information

Last name *			First name *		
Kaczmarek			Amanda		
Position title * Director	Business phone number * E 807-727-3804	xtension	Check here if TTY		

Email * akaczmarek@redlakehospita	al.ca	Alternate phone number	Extension	Fax number			
Primary contact for the or	ganization(s)			·			
Check if the primary contact	is same as the certifier						
Last name * Kaczmarek			First name * Amanda				
Position title * Director	Business phone number * 807-727-3804	Exte	ension Check here it	fTTY			
Email * akaczmarek@redlakehospital.ca			Alternate phone number	Extension	Fax number		
D. Accessibility complian	nce report questions			·			
Instructions							
Please answer each of the follow	wing compliance questions.	Jse t	he Comments box if you	wish to comn	nent on any response.		

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.

General

1. Is your organization in compliance with all applicable requirements of the General Section? *

Read O. Reg. 191/11, Part I: General

Learn more about your requirements for question 1

Use this self-assessment tool to identify which requirements apply to your organization under the General Requirements

Comments for Include any additional information or explanation to accompany your yes/no answer to the question 1 question.

Information and communications

Is your organization in compliance with all applicable requirements of the Information and Communications Standards? *	• Yes	⊖ No	

Read O. Reg. 191/11, Part II: Information and communications standards

Learn more about your requirements for question 2

<u>Use this self-assessment tool to identify which</u> requirements apply to your organization under the Information and Communications Standards

Comments for Include any additional information or explanation to accompany your yes/no answer to the question 2 question.

Employment • Yes ⊖ No 3. Is your organization in compliance with all applicable requirements of the Employment Standards? * Read O. Reg. 191/11, Part III: Employment Standards Learn more about your requirements for question 3 Use this self-assessment tool to identify which requirements apply to your organization under the **Employment Standards** Comments for Include any additional information or explanation to accompany your yes/no answer to the question 3 question. Transportation 4. Is your organization in compliance with all applicable requirements of the Transportation • Yes () No Standards? * Read O. Reg. 191/11, Part IV: Transportation standards Learn more about your requirements for question 4

<u>The Transportation Standards Reference Guide</u> provides information about accessibility requirements from the Transportation Standards

Comments for question 4 Include any additional information or explanation to accompany your yes/no answer to the question.

question 5

question.

Design of public spaces							
-	our organization in compliance with all applicable requirements of taces Standards? *	he Design of Public	• Yes	⊖ No			
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards		Learn more about your requirements for question 5					
		The DOPS Reference Guide provides an the scope, applicability and specific requi					
Comments for Include any additional information or explanation to accompany your yes/no answer to the							

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Customer Service

6. Is your organization in compliance with all applicable requirements of the Customer Service

Yes

No Standards? *

Read O. Reg. 191/11 Part IV.2: Customer Service standards

Learn more about your requirements for question 6

Use this self-assessment tool to identify which requirements apply to your organization under the Customer Service Standards

Comments for question 6 Include any additional information or explanation to accompany your yes/no answer to the question.



Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name Red Lake Margaret Cochenour Memorial Hospital

Filing organization business number (BN9) 107879843

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.

Next Steps:

- 1. Your organization may be audited to verify compliance.
- 2. You must make this completed accessibility report available to the public.