

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 Ontario.ca How to count your employees.
- 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.

✓ Check if business address is same as mailing address

2025 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 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. Organization information Organization category * Number of employees range * Reporting year **Designated Public Sector** 50+ employees 2025 **Business details** Organization legal name * Number of employees in Ontario * Help ROYAL OTTAWA HEALTH CARE GROUP / SERVICES DE SANTE ROYAL 2000 **OTTAWA** Business number (BN9) * 865245641 ∇ Check if operating/business name is same as legal name Organization operating/business name ROYAL OTTAWA HEALTH CARE GROUP / SERVICES DE SANTE ROYAL OTTAWA Sector that best describes your organization's principal business activity * Help 62 Subsector (if possible) 622 Industry group (if possible) 6222 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. ○ USA Canada International Type of address * Street address Street address served by route Other Street name * Unit number Street number * 1145 CARLING Street type Street direction City * Province * ON (Ontario) Avenue OTTAWA Postal code (e.g. A1A 1A1) * K1Z 7K4 **Business address** (Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.)

Country *						
The fields below	will change based c	n your sele	ction.			
Canada	\bigcirc ι	JSA	○ Interna	International		
Type of address	* Street addres	ss C	Street address served by route	Other		
Unit number	Street number * 1145	Street nam				
Street type Avenue	Street direction		City * OTTAWA		Province * ON (Ontario)	
Postal code (e.g. K1Z 7K4	A1A 1A1) *					

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.



2025 Accessibility Compliance Report

Organization category Designated Public Sector Number of employees range 50+ ROYAL OTTAWA HEALTH CARE GROUP / SERVICES DE SANTE ROYAL Filing organization legal name **OTTAWA** Filing organization business number (BN9) 865245641 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: a library board 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) * 2025-02-04 **Certifier information** Last name * First name * **MACDONALD LAURA** Position title * Business phone number * Extension Check here if TTY Vice President 613-722-6521 6120

Email * Laura.MacDoi	nald@theroyal.	ca		Alternate phone 613-898-1674		Extension	Fax numbe	r	
Primary cont	act for the ore	ganization(s)							
Check if the	primary contact	is same as the certifier							
Last name * ADDO				First name * NICHOLAS					
Position title * Director		Business phone number * 613-722-6521	Exte	ension Check here if TTY					
Email * nicholas.addo	Email * nicholas.addo@theroyal.ca			Alternate phone 613-809-0379		Extension	Fax number 613-798-2979		
D. Accessib	ility compliar	nce report questions							
Instructions									
Please answer	each of the follow	wing compliance questions.	Use	the Comments b	oox if you v	vish to comm	nent on any r	esponse.	
		question, click the help links ons and the link on the right						on the left to	
General									
1. Is your orga	nization in comp	liance with all applicable rec	quirer	ments of the Ger	neral Secti	on? *	Yes	○No	
Read O. Reg. 191/11, Part I: General Learn more about your requirements for questi					question 1				
				requi		ssessment to pply to your rements			
Comments for question 1	Include any acquestion.	dditional information or ex	plan	ation to accom	pany you	r yes/no an	swer to the		
Information	and communic	cations							
2. Is your orga		liance with all applicable rec	quirer	ments of the Info	ormation ar	nd	Yes	○ No	
Read O. Reg. 1 standards	91/11, Part II: Inf	formation and communication	<u>ons</u>	<u>Learr</u>	n more abo	out your requ	irements for	question 2	
				<u>Use</u>	this self-as	ssessment to	ol to identify	which	
						pply to your of Communication			
Comments for question 2	,								

Employment	t			
3. Is your orga Standards?	anization in compliance with all applicable requirements	of the Employment	Yes	○ No
Read O. Reg. 1	Read O. Reg. 191/11, Part III: Employment Standards Learn more a		equirements for	question 3
		Use this self-assessmer requirements apply to you Employment Standards		
Comments for question 3	Include any additional information or explanation question.	to accompany your yes/no	answer to the	
Transportati	on			
4. Is your orga Standards?	anization in compliance with all applicable requirements	of the Transportation	Yes	○ No
Read O. Reg. 1	191/11, Part IV: Transportation standards	Learn more about your r	equirements for	question 4
		The Transportation Star provides information about from the Transportation	out accessibility	
Comments for question 4	Include any additional information or explanation question.	to accompany your yes/no	answer to the	
Design of pu	·			
5. Is your orga Spaces Sta	anization in compliance with all applicable requirements ndards? *	of the Design of Public	Yes	○ No
Read O. Reg. 1	191/11 Part IV.1: Design of public spaces standards	Learn more about your r	equirements for	question 5
		The DOPS Reference Gothern the scope, applicability and DOPS		
Comments for question 5	Include any additional information or explanation question.	to accompany your yes/no	answer to the	

Customer Se	ervice				
, ,	. Is your organization in compliance with all applicable requirements of the Customer Service Standards? *				
Read O. Reg. 191/11 Part IV.2: Customer Service standards		Learn more about your requirements for question 6			
		Use this self-assessment requirements apply to you Customer Service Standa	ır organization		
Comments for question 6	Include any additional information or explanation question.	n to accompany your yes/no a	inswer to the		

2025 Accessibility Compliance Report

Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name ROYAL OTTAWA HEALTH CARE GROUP / SERVICES DE SANTE ROYAL OTTAWA

Filing organization business number (BN9) 865245641

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.