

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.

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
- 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
- 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. Understand your requirements

• If you need information about the requirements, select the website link in **section B: Understand your accessibility requirements**. This will bring you to our website where you can see your requirements.

4. 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.

5. 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.

6. 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

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 TTY Toll free: 1-800-268-7095

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

Alternate formats

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



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 <u>Integrated Accessibility Standards Regulation (IASR)</u> 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 <u>IASR</u>, 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 cate	egory *		1	Number of employees range *		Reporting year
Designated Pub	olic Sector		ŧ	50+ employees		2023
Business deta	ils					
Organization lega	al name *				Number of	employees in Ontario * <u>Help</u>
Ontario Lottery	and Gaming Corp	ooration			1300	
Business number	r (BN9) * <u>Help</u> [e received an AODA ors and Accessibility		
Check if operative	ating/business nam	e is same as	s legal name			
U 1	rating/business nai and Gaming Corp					
Sector that best of 91 - Public adm	describes your orga inistration	inization's pr	rincipal business	activity *	<u>Help</u>	
Subsector (if pos						
912 - Provincial	and territorial pu	blic adminis	stration			
Industry group (if	, ,					
9129 - Other pro	ovincial and territe	orial public	administration			
Mailing addres	SS					
Address where le	tters can be sent to	the person	responsible for c	oordinating the orga	nization's A	ODA compliance activities.
Country *						
The fields below	will change based o	on vour sele	ection.			
Canada	-	JSA		○ Internation	onal	
Type of address	Ŭ) Street address	served by route	Other	
Unit number	Street number *	Street nam	-	, ,	<u> </u>	
600	4120	Yonge				
Street type	Street direction	Tongo	City *			Province *
Street			Toronto			ON (Ontario)
Postal code (e.g. M2P 2B8	A1A 1A1) *					× ,
Business addr	ress					
(Address at which	letters can be sent	to the comp	any director/office	er accountable for the	organizatior	's compliance with the AODA.)

Check if business address is same as mailing address

Country *							
The fields below will change based on your selection.							
Canada	\bigcirc L	JSA	\bigcirc Internat	tional			
Type of address	* Street address 	ss C) Street address served by route	Other			
Unit number	Street number *	Street nam	ie *				
600	4120	Yonge					
Street type	Street direction		City *		Province *		
Street			Toronto		ON (Ontario)		
Postal code (e.g. A1A 1A1) *							
M2P 2B8							

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 Ontario Lottery and Gaming Corporaion

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)
- 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) *	2023	-11	-06
-----------------------------------	------	-----	-----

Certifier information

Last name * O'Brien		First name Chris	*
	Business phone number * 416-224-7769	Extension	Check here if TTY

		Alternate phone number	Extension	Fax numbe	r
Primary contact for the or	ganization(s)				
Check if the primary contact Last name * O'Brien	is same as the certifier	First name * Chris			
Position title * Director	Business phone number * 416-224-7769	Extension Check he if TTY	re		
Email * chrobrien@olg.ca	1	Alternate phone number	Extension	Fax numbe	r
D. Accessibility complian	nce report questions				
Instructions Please answer each of the follow If you need help with a specific oview the relevant AODA regulat	question, click the help links	which will open in a new brows	ser window. L	Jse the link o	•
General	5	,			
1. Has your organization create accessibility by meeting all a	ed and implemented written applicable accessibility requir			• Yes	⊖ No
Read O. Reg. 191/11, s. 3 (1): E	Establishment of accessibility	v policies Learn more ab	out your requ	irements for	question 1
		ulti-year accessibility plan? *		• Yes	◯ No
 Has your organization estab (If Yes, please answer addit Read O. Reg. 191/11, s. 4 (1): A 	ional questions)		out your requ	<u> </u>	<u> </u>
 (If Yes, please answer addit <u>Read O. Reg. 191/11, s. 4 (1): A</u> 2.a. Does your organization 	ional questions) Accessibility plans n have a website? *	ulti-year accessibility plan? * <u>Learn more ab</u>	<u>out your requ</u>	<u> </u>	<u> </u>
(If Yes, please answer addit Read O. Reg. 191/11, s. 4 (1): A	ional questions) Accessibility plans n have a website? * additional questions)			irements for • Yes	question 2
 (If Yes, please answer addit Read O. Reg. 191/11, s. 4 (1): A 2.a. Does your organization (If Yes, please answer) 	ional questions) Accessibility plans n have a website? * additional questions)	Learn more ab		irements for • Yes	question 2
 (If Yes, please answer addit Read O. Reg. 191/11, s. 4 (1): A 2.a. Does your organization (If Yes, please answer Read O. Reg. 191/11, s. 4 (Comments for question 2.a 	ional questions) Accessibility plans n have a website? * additional questions) 1): Accessibility plans	Learn more ab	<u>out your requ</u>	irements for • Yes	question 2

2.a.ii Does your organization provide the accessibility plan in a when requested? *	n accessible format	• Yes	⊖ No
Read O. Reg. 191/11, s. 4 (1): Accessibility plans	Learn more about your requ	<u>iirements for qu</u>	estion 2.a.ii
Comments for question 2.a.ii			
2.b Does your organization update the accessibility plan at least or Read O. Reg. 191/11, s. 4 (1): Accessibility plans Comments for question 2.b	nce every 5 years? * <u>Learn more about your req</u>	ک Yes) uirements for qu	O No
3. Does your organization provide appropriate training on: *			
<u>Read O. Reg. 191/11, s. 7 (1): Training</u>	Learn more about your red	quirements for a	uestion 3
3.a. The AODA Integrated Accessibility Standards Regulation? *		Yes	() No
Read O. Reg. 191/11, s. 7 (1): Training	Learn more about your red	0	0
Comments for question 3.a			
3.b The Human Rights Code as it pertains to people with disabilitie		• Yes	O No
Read O. Reg. 191/11, s. 7 (1): Training Comments for question 3.b	<u>Learn more about your req</u>	<u>urements for q</u> i	<u>Jesuon 3.D</u>
Information and communications			
 4. Does your organization have a process for receiving and responding that is accessible to people with disabilities? * Note: This requirement is applicable regardless of whether customer 		● Yes	No
on your premises (If Yes, please answer an additional question)			
on your premises	Learn more about your red	quirements for c	uestion 4
on your premises (If Yes, please answer an additional question)	of accessible formats	Quirements for c	Question 4

in m	directly ('cont odify content	nization have one (or more) website(s) which it contro rols' means that your organization is able to add, remo and functionality of the website)? * answer an additional question)		● Yes ⊂) No
Read	O. Reg. 191/	11, s. 14: Accessible websites and web content	Learn more about your	requirements for	question 5
5.	Web Con pre-record names ar	ar organization's internet websites conform to World W tent Accessibility Guidelines 2.0 Level AA (except for l ded audio descriptions)? In the comments box, please ad addresses of your publicly available web content, in dia pages, and apps. *	ive captions and list the complete	Yes	⊖ No
R	ead O. Reg. 1	91/11, s. 14: Accessible websites and web content	Learn more about your	requirements for	question 5.a
	comments for uestion 5.a	OLG.ca (web and app) www.olg.ca			
		PROLINE.ca proline.olg.ca			
		PROLINEPLUS.ca (web and app) prolineplus.olg.ca			
		PROLINE POINTS https://prolinepoints.olg.ca/			
		PLAYSMART.ca playsmart.ca			
		About OLG https://about.olg.ca/			
		WINNER's EDGE https://winnersedge.olg.ca/			
		OLG Chinese Language site https://chinese.olg.ca/			
		OLG YouTube https://www.youtube.com/@OLG_CA/featured			
		OLG Career and employment opportunities https://olg.wd3.myworkdayjobs.com/Careers			

Customer Service			
 6. Does your organization provide training about providing goods, services persons with disabilities to the following? * Staff and volunteers People involved in developing accessibility policies People providing goods, services or facilities on behalf of the organization 		Yes	⊖ No
(If Yes, please answer an additional question)			
Read O. Reg. 191/11, s. 80.49: Training for staff, etc.	Learn more about your requ	uirements for	<u>question 6</u>
6.a. Does the training include all of the following: *		Yes	⊖ No
 A review of the purposes of the AODA? 			
 A review of the purposes of the Customer Service Standards? 			
 How to interact and communicate with persons with various type 	pes of disability?		
 How to interact with persons with disabilities who use an assis the assistance of a guide dog or other service animal or the as person? How to use equipment or devices available on the provider's p 	sistance of a support		
provided by the provider that may help with the provision of go facilities to a person with a disability?			
 What to do if a person with a particular type of disability is have accessing the provider's goods, services or facilities? 	ing difficulty		
Read O. Reg. 191/11, s. 80.49: Training for staff, etc.	Learn more about your requ	uirements for	<u>question 6.a</u>
question 6.a			
 Does your organization provide information in an accessible format? * (If Yes, please answer additional questions) 	۲)Yes 🔿	No
<u>Read O. Reg. 191/11, s. 80.51 (1): Format of documents</u>	Learn more about your requ	uirements for	question 7
7.a. Is the provision of information in accessible format done so in a tin takes into account the individual's disability? *	nely manner that	Yes	⊖ No
Read O. Reg. 191/11, s. 80.51 (1): Format of documents	Learn more about your requ	uirements for	<u>question 7.a</u>
Comments for question 7.a			
7.b. Is the provision of information in accessible format at a cost no mo the regular cost charged to other persons? *	ore than	Yes	⊖ No
<u>Read O. Reg. 191/11, s. 80.51 (1): Format of documents</u>	Learn more about your requ	uirements for	question 7.b
Comments for question 7.b			

su	es your organization ever require a person with a disability to be oport person when on your premises? * Yes, please answer an additional question)	accompanied by a	Yes	⊖ No
	<u>O. Reg. 191/11, s. 80.47 (5): Use of service animals and</u> rt persons	Learn more about your	requirements for	question 8
8.a	 Does your organization do all of the following before requiring disability to be accompanied by a support person on your pre Consult with the person with a disability? 		• Yes	⊖No
	 Determine a support person is necessary to protect the he person with a disability or others on premises? 	ealth or safety of the		
	 Determine that there is no other way to protect the health with a disability or others on premises? 	or safety of the person		
19	1/11, s. 80.47 (5): Use of service animals and support persons	Learn more about your	requirements for	question 8.a
qu				
	oyment			
Empl 9. Do ind		om you have provided	⊖ Yes	No No
Empl 9. Do ind (If	oyment es your organization employ any persons with disabilities for wh ividualized workplace emergency response information? * Yes, please answer additional questions) O. Reg. 191/11, s. 27 (1): Workplace emergency response	om you have provided Learn more about your	<u> </u>	C
Empl 9. Do ind (If <u>Read</u> inform	oyment es your organization employ any persons with disabilities for wh ividualized workplace emergency response information? * Yes, please answer additional questions) O. Reg. 191/11, s. 27 (1): Workplace emergency response	Learn more about your	<u> </u>	C
Empl 9. Do ind (If <u>Read</u> inform	oyment es your organization employ any persons with disabilities for whi ividualized workplace emergency response information? * Yes, please answer additional questions) O. Reg. 191/11, s. 27 (1): Workplace emergency response ation ation	Learn more about your mergency response	requirements for	question 9
Empl 9. Do ind (If <u>Read</u> inform	oyment es your organization employ any persons with disabilities for whi ividualized workplace emergency response information? * Yes, please answer additional questions) O. Reg. 191/11, s. 27 (1): Workplace emergency response ation I. Does your organization review the individualized workplace e information for all of the following? *	Learn more about your mergency response ganization?	requirements for	question 9
Empl 9. Do ind (If <u>Read</u> inform	oyment es your organization employ any persons with disabilities for whi ividualized workplace emergency response information? * Yes, please answer additional questions) O. Reg. 191/11, s. 27 (1): Workplace emergency response ation ation Does your organization review the individualized workplace e information for all of the following? * • When the employee moves to a different location in the or	Learn more about your mergency response ganization? ans are reviewed?	requirements for	question 9

question 9.a

9.b. Do any of the employees for whom your organization has provided individ workplace emergency response information require assistance? * (If Yes, please answer additional questions)	lualized O Yes	⊖No
Read O. Reg. 191/11, s. 27 (2): Workplace emergency responseLearn rinformationComments for question 9.b	nore about your requirements fo	<u>r question 9.b</u>
9.b.i Has your organization, with the employee's consent, provided the emergency response information to the person designated to prov assistance to the employee? *		⊖ No
Read O. Reg. 191/11, s. 27 (2): Workplace emergencyLearn modelresponse informationComments for question 9.b.i	ore about your requirements for	question 9.b.i
9.b.ii Was the individualized workplace emergency response information soon as practicable after your organization became aware of the raccommodation due to the employee's disability? *		⊖ No
Read O. Reg. 191/11, s. 27 (3): Workplace emergencyLearn modelresponse informationComments for question 9.b.ii	ore about your requirements for	question 9.b.ii
 Design of public spaces 10. Since January 1, 2017, has your organization constructed new or redeveloped following items? * Outdoor public use eating areas Outdoor play space Off-street parking Service counter Fixed queuing guides Waiting areas (If Yes, please answer additional questions) 		○ No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards Learn r	nore about your requirements fo	r question 10

	plicable, do the newly constructed or redeveloped iten ents as outlined in the Design of Public Spaces Standa		Yes	⊖ No
standards Comments for	191/11 Part IV.1: Design of public spaces	<u>Learn more about your requ</u>	<u>iirements for</u>	<u>question 10.a</u>
question 10.a				
preventat spaces, a	r organization's multi-year accessibility plan include pr ive and emergency maintenance of the accessible ele and for dealing with temporary disruptions when access king order? *	ments in public	Yes	() No
Read O. Reg.	191/11, s. 80.44: Maintenance of accessible elements	<u>Learn more about your requ</u>	lirements for	question 10.b
Comments for question 10.b	OLG's policy provides for temp disruptions of ac incorporates our policy by reference (10.5. Notice of Disruptions in Services and Fac notice to public if there is a temporary or planne people with disabilities usually use in accessing the disruption will include: □ The reason for the description of what alternative facilities or servic disruption occurs unexpectedly, notice shall be place on the OLG premises or provided by such circumstances.)	ilities 10.5.1. When possible d disruption affecting facilitie OLG's goods or services of disruption □ Anticipated du es are available, if any 10.5 posted as soon as possible,	e, OLG sha es or servic facilities. N ration □ A 0.2. When a at a consp	es that Notice of
AODA				
	ation a municipality with population of 10,000 or more? answer additional questions)) *	⊖Yes	No
	for Ontarians with Disabilities Act, 2005, S.O. Municipal Accessibility Advisory Committees	<u>Learn more about your requ</u>	iirements for	question 11
Section 2	organization established an accessibility advisory com 9 of the AODA? * ease answer additional questions)	imittee as described in	⊖ Yes	() No
	ility for Ontarians with Disabilities Act, 2005, S.O. 29: Municipal Accessibility Advisory Committees	Learn more about your requ	<u>iirements for</u>	question 11.a
Comments for question 11.a				
11.a.i Is	the majority of members in the committee persons wit	h disabilities? *	⊖ Yes	◯ No
<u>S.O. 2008</u> <u>Committe</u> Commen	ts for	Learn more about your requir	ements for c	<u>juestion 11.a.i</u>
question	11.a.i			

11.a.ii Has the committee provided advice to council about site plans and drawings (as described in Section 41 of the *Planning Act*) as well as advice on the requirements and implementation of accessibility standards? *

Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees

Learn more about your requirements for question 11.a.ii

Comments for question 11.a.ii



Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name Ontario Lottery and Gaming Corporaion

Filing organization business number (BN9)

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. Your organization may be audited to verify compliance.