

Accessibility Handbook

Customer Service Protocol

Accessibility for Ontarians with Disabilities Act, 2005
Regulation 429/07

2011- 2015

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Overview of the *Accessibility for Ontarians with Disabilities Act, 2005*

The intent of the *Accessibility for Ontarians with Disabilities Act, 2005 (AODA)* is to improve opportunities for people with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province. These barriers include physical, architectural, information, communication, attitudinal, technological, and policy/practices (systemic).

An important premise of the *AODA* is that improving accessibility is a shared responsibility. People with disabilities represent a significant and growing part of our population. Enhancing the ability of people with disabilities to have equal access to opportunities, live independently, and contribute to the community has positive effects on the future prosperity of Ontarians.

Customer Service Standard (Regulation 429/07)

Creating a Culture of Accessibility is designed to help board employees that provide goods or services to the general public, including parents, or other third parties to understand their obligations under the customer service standard.

The definition of disability under the *AODA* is the same as the definition of disability in the *Ontario Human Rights Code*. This is the definition of disability that applies to the customer service standard.

“In this Act, “disability” means,

- a) any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,
- b) a condition of mental impairment or a developmental disability,
- c) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- d) a mental disorder, or
- e) an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.”

It is important to understand that information about a disability is personal and private and must be treated confidentially.

The customer service standard has a number of requirements that apply to school boards, as follows:

1. Establish policies, practices and procedures about providing goods or services to people with disabilities.
2. Use reasonable efforts to ensure that the policies, practices and procedures are consistent with the core principles of independence, dignity, integration and equality of opportunity.
3. Set a policy about allowing people to use their own personal assistive devices to access our services.
4. Communicate with a person with a disability in a manner that takes into account his or her disability.
5. Allow people with disabilities to be accompanied by a guide dog or service animal in those areas of our buildings that are open to the public.
6. Permit people with disabilities who use a support person to bring that person with them while accessing our goods and services.
7. Where admission fees are charged, provide notice ahead of time about admission charges for a support person accompanying a person with a disability.
8. Provide notice when facilities or services that people with disabilities rely on to access or use our services are temporarily disrupted.
9. Train all employees and volunteers in our schools about the requirements of the customer service standard.
10. Establish a process for people to provide feedback about our various strategies to promote accessibility.

Purpose of this Resource

This resource is designed to increase awareness and sensitivity about barriers for members of the general public with disabilities using our schools and other board facilities. It is also intended to encourage and promote fair and accurate portrayal of people with disabilities. This booklet is a resource for school personnel to be consulted when working and interacting with members of the public, including parents, who may have a disability. Suggestions for creating accessible meetings, speaking with or interviewing people with disabilities, media coverage of events involving people with disabilities and other aspects pertaining to accessibility are discussed.

Although some disabilities are not visible, it does not mean they are any less real. Individuals with invisible disabilities such as epilepsy, diabetes, haemophilia, mental disorder, learning disability, etc. also encounter negative attitudes and barriers to full participation.

Treating all the people who come to our schools and board offices with individual respect and courtesy is at the heart of excellent customer service. People with disabilities, along with their families and friends, travel, shop, do business, and engage in community activities, etc. One in every seven Ontarians has a disability and this percentage will increase as the population ages.

The Disability Continuum

There is no universally accepted meaning for the word "disability." However, the *Ontario Human Rights Code* provides definitions of disability that form our guiding principles.

Most definitions, however, can be placed on a continuum. At one end of the spectrum, disability is explained in terms of medical conditions (medical model). At the opposite end, disability is explained in terms of the social and physical contexts in which it occurs (environmental model).

The medical model focuses on deficiencies, symptoms and treatments. The World Health Organization's (WHO) 1976 definition for disability, for example, is "any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being." Medical model definitions promote the idea that disability is a deviation from the norm.

Many people with disabilities are troubled by definitions that regard disability as abnormal, preferring instead to portray disability as commonplace, natural, and in fact, inevitable. As people age, they experience gradual declines in visual acuity, auditory sensitivity, range of motion, bodily strength and mental powers. Significant functional limitations affect almost half of people between the ages of 55 and 79, and over 70% of people over 80. Beyond middle age, disability is the norm.

The environmental model explains disability in relation to social and physical contexts. In this view, the environment, not an individual's medical condition, causes disability. For example, during an electrical blackout, a person who is completely blind can effortlessly navigate around the home, hammer nails, and, if a Braille user, read a novel. A sighted person would be unable to perform these tasks easily, if at all. In this example, the environment disables the sighted person.

The environmental model emphasizes that people with disabilities are capable human beings, and that it is barriers, not medical conditions, that are disabling. Disability results when people design a world for their way of living only, without taking into account the natural - and foreseeable - variability among human beings. In other words, disability is a consequence of design flaws in the built and human environments.

All barriers are human-made. If design problems cause barriers, then disabilities can be eliminated -- or minimized -- by modifying how we live, the tools we use, and our intuitions about the proper way to do things. If systemic barriers cause disabilities, the disabilities can be eliminated by modifications to policies, plans and processes. If attitudes cause barriers, then disability awareness, respect and an understanding of positive interaction with people with disabilities will remove barriers.

Terminology Guide Concerning People with Disabilities

It is important to remember that each word in today's terminology has a precise meaning, i.e. the words are not interchangeable; therefore, when referring to people with disabilities, the following information is important.

"Disabled" and "handicapped" are not the same thing. A disability is a functional limitation or restriction of an individual's ability to perform an activity. A "handicap" is an environmental or attitudinal barrier that limits the opportunity for a person to participate fully. Negative attitudes or inaccessible entrances to buildings are examples of handicaps, e.g., "a person who is handicapped by...."

The word "disabled" is an adjective, not a noun. People are not conditions. The appropriate terminology always refers to the person first, the disability second, e.g., a person with a learning disability, a person who is deaf, etc.

Similarly, references that cause discomfort, guilt, pity, or insult should be avoided. Words like "suffers from", "stricken with", "afflicted by", "patient", "disease" or "sick" suggest constant pain and a sense of hopelessness and further reinforces the medical model of disability. While this may be the case for some individuals, a disability is a condition that does not necessarily cause pain or require medical attention.

Try to avoid categorizing people with disabilities as either super-achievers or tragic figures. Choose words that are non-judgmental, non-emotional and are accurate descriptions. Avoid using "brave", "courageous", "inspirational" or other similar words that are routinely used to describe a person with a disability.

People First Language

The language and images used to portray people with disabilities is vitally important in changing perceptions. "People First" is a language that emphasizes the person rather than the disability.

People with disabilities are comfortable with the terminology used to describe daily living activities. People who use wheelchairs go for "walks"; people with visual impairments "see" what you mean. A disability may just mean that some things are done in a different manner; however, that does not mean the words used to describe the activity must be different.

DO NOT USE or SAY: words with strong negative connotations	DO USE OR SAY: more affirmative words that reflect positive attitudes
Handicapped (the)	Disabled or person with a disability
Handicapped parking spot	Accessible parking spot or barrier-free parking spot
Handicapped washroom	Accessible washroom
The Blind, Visually Impaired	Person who is blind, visually impaired or person with low vision
Confined to a wheelchair, wheelchair-bound	Person who uses a wheelchair, a wheelchair user
Diabetic	Person who has diabetes
Epileptic	Person with epilepsy
Physically challenged	Person with a physical disability
Victim of cerebral palsy, multiple sclerosis, arthritis, etc.	Person who has cerebral palsy, multiple sclerosis, arthritis, etc. or Person with a mobility impairment
Use images that isolate or call special attention to people with disabilities unless appropriate to the subject matter	Use images that show people with disabilities participating in society
Use actors/models without disabilities to represent people with disabilities	Use actor/models with disabilities to portray people with disabilities
Always depict the super-achieving individual to represent all people with disabilities	Depict whenever possible, the typical individual who has a disability
Autistic	A person with autism
The Deaf, Hearing Impaired	Person who is Deaf or is hard of hearing. A person with a hearing loss
Mentally challenged or retarded	Person with an intellectual disability or a developmental disability
Brain damaged	A person with an acquired brain injury
Aged, the elderly	Seniors
Fits, spells, attacks	Seizures
Learning disabled, learning disordered, dyslexic	A person with a learning disability
Stutterer	A person who stutters, a person with a communication disorder
Midget, Dwarf	A little person, a person who has a form of dwarfism
Mongoloid, Downs	A person with Down Syndrome
Normal	A person without a disability

Communicating with People with Disabilities

You don't have to feel awkward when dealing with a person who has a disability. If you are ever unsure about what to do or say to a person who has a disability, just ask. As in any new situation, everyone will feel more comfortable if you relax.

Meeting Someone

People who use wheelchairs may have a variety of disabilities. Some have use of their arms and some do not. When you meet someone, extend your hand to shake if that is what you normally do. A person who cannot shake hands will let you know. He or she will appreciate being treated in a normal way. If you are meeting a person who is blind, identify yourself. If you have met before, remind him/her of the context; s/he won't have the visual clues to jog his memory.

Helping

Do not automatically give assistance; ask first if the person wants help. Follow the person's cues, and ask, if you are not sure. Be the assistant, not the director; let a person who is blind hold your arm (the elbow) and follow you. Don't be offended if someone refuses your offer of assistance. It is his or her choice to be as independent as they can be.

Communication

Talk directly to the person, not to an aide, friend, or interpreter. If the person has speech impairment, listen carefully and patiently. Ask him/her to repeat if you do not understand. If the person does not understand you when you speak, try again. Do not let him/her think your communication with him/her is not worthwhile to you. If the person is Deaf or hard of hearing, follow his or her lead; use gestures or write. If the person uses a wheelchair, sit and converse at his/her level.

Socializing

Do not leave a person with a disability out of a conversation or activity because you feel uncomfortable or fear that s/he will feel uncomfortable. Include him or her as you would anyone else. He or she knows what they can do and want to do; let it be their decision whether or not to participate.

Disability

Treat the person as an individual. Do not assume that the person's disability is all s/he can talk about or is interested in. Find a topic of small talk, the way you would with anyone. Do not treat the person as a disability.

Environments

Be sensitive about the setting. A noisy or dark environment, or people talking simultaneously, might make it difficult for people with a vision, speech, or hearing disability to participate in a conversation. Be aware of clear paths of travel for people who use mobility aids or who are blind. Describe the goings-on and surroundings (especially obstacles) to a person who is blind. A person with a chemical sensitivity may have a reaction to smoke, perfume, cleaning products, or other forms of toxins in the environment.

Touching

Do not pet guide or service dogs and do not touch a person with a disability unless there is a good reason (such as shaking hands in greeting or if the person has requested assistance). However, you may gently touch a person who is Deaf or hard of hearing on the shoulder to get his/her attention. Never push a person's wheelchair without his or her permission. Please do not recoil if you meet a person with a disability. Your acceptance means a lot.

Invisible Disabilities

Not all disabilities are apparent. A person may have trouble following a conversation, may not respond when you call or wave, may make a request that seems strange to you, or may say or do something that seems inappropriate. The person may have an invisible disability, such as low vision, a hearing or learning disability, traumatic brain injury, mental impairment, or mental illness. Do not make assumptions about the person or his or her disability. Be open-minded.

Learning More

Lack of knowledge or misinformation may lead you to shy away from interacting with people with certain disabilities. Preconceptions about mental illness, cerebral palsy, Tourette's Syndrome and other disabilities often lead to a lack of acceptance by those around the person. Remember that we are all complex human beings; ***a disability is just one aspect of a person.*** Learning more about the disability may alleviate your fears and pave the way for you to see the person for whom he or she is.

Overall Attitudes and Approach

As you meet people with various physical disabilities, you will likely find that you are apprehensive about how you should behave towards that individual. Every person is different and some will find it easy to work with such individuals, whereas others will find it difficult adjusting to working with people with physical disabilities. Always remember that a person with a disability is a person. He or she is like anyone else, except for the limitations of their disability.

The most important thing is to be honest. If you do not understand someone because they have difficulty with their speech, or they use some form of communication aid, please do not assume that they do not understand. If you have difficulty understanding them, then admit it, and try to get someone to translate for you. People in such situations will not get upset if you are honest, and in time, you will learn to understand what they are saying to you.

Things to Remember

- Treat people as you would like to be treated yourself.
- Do not show pity for people with disabilities. It makes them feel demoralized.
- People with disabilities are NOT alike and have a wide variety of skills and personalities. We are all individuals.
- Most people with disabilities are not sick, incompetent, dependent, unintelligent or contagious.
- A mobility device/aid is part of the user's personal space and must be respected. It is not a leaning post.

How to Help

- Introduce yourself and offer assistance.
- Do not be offended if your help is not needed.
- Ask how you can help and listen for instructions.
- Be courteous, but NOT condescending.
- Assist people with disabilities when necessary or requested, but do not discourage their active participation.
- Allow a person DIGNITY to do what he or she wants to do for him or herself.
- Do not refer to the disability and never use phrases like “handicapped.”

Creating Accessible Meetings

Depending on the type of disability, you may need a sign language interpreter, FM system or hearing-assist system for people who are Deaf or hard of hearing. Clear doorways/entrances and additional open space for people with a physical disability using mobility aids or you may need to accommodate a person who travels with a service dog. It is correct to inquire from the person what type of accommodation(s) is needed to facilitate their involvement. Refer to technical aids in factual, non-emotional terms. Avoid prolonged focus on support equipment.

When advertising a meeting, include the phrase “should you require accessibility accommodations for participation in the meeting, please contact...at (phone number or email address).

Communication Suggestions

All communication, e.g., media releases, letters to parents, newsletters, student agendas, staff handbooks, etc. should reflect the suggestions regarding use of terminology and *People First Language* as outlined in this protocol.

Guiding Principles for Reviewing Policies/Practices

When reviewing and amending policies, procedures or other practices at the school or board level, the following guiding principles need to be kept in mind.

- Use inclusive language – people first language.
- Use appropriate terminology.
- When organizing a professional development session or holding a public information session, please include the phrase “should you have accessibility accommodation requirements, please contact the organizer of the in-service/meeting with your request.”

Effective Strategies for Interacting with People with Different Disabilities

There are many kinds of disabilities including physical, sensory, hearing, mental health, developmental and learning. Disabilities can be visible or non-visible.

A. Visual Disabilities

Visual disabilities reduce one’s ability to see clearly. Very few people are totally blind. Some have limited vision such as tunnel vision, where a person has a loss of peripheral or side vision, or a lack of central vision that means they cannot see straight ahead.

Some can see the outline of objects while others can see the direction of light. Impaired vision can restrict a person's ability to read signs, locate landmarks or see hazards.

In some cases it may be difficult to tell if a person has a visual disability. Others may use a dog guide or white cane.

- Identify yourself when you approach the person and speak directly to them.
- Speak normally and clearly.
- Do not refer to the disability and never use phrases like "handicapped."
- Never touch the person without asking permission, unless it is an emergency.
- If you offer assistance, wait until you receive permission.
- Offer your arm (the elbow) to guide the person and walk slowly.
- Do not touch a service animal - the animal is working and has to pay attention at all times.
- If you are giving directions or verbal information, be precise and clear. For example, if you are approaching a door or obstacle, say so.
- Do not just assume the person cannot see you.
- Do not leave the person in the middle of a room. Show them to a chair, or guide them to a comfortable location.
- Identify landmarks or other details to orient the person to the environment around them.
- Do not walk away without saying good-bye.
- Be patient. Things may take a little longer.

B. Hearing Impairments

People who have hearing loss may be Deaf or hard of hearing. Like other disabilities, hearing loss has a wide variety of degrees. People who have hearing loss may require assistive devices when communicating. While some may use sign language, notes or hearing aids when communicating, others may also use email, pagers, TTY telephone service or Bell Canada Relay Service.

- Always ask how you can help. Do not shout.
- Do not refer to the disability and never use the term "handicapped."
- Attract the person's attention before speaking. The best way is a gentle touch on the shoulder or gently waving your hand.
- Make sure you are in a well-lighted area where the person can see your face.
- Look at and speak directly to the person. Address the person, not their interpreter.
- If necessary, ask if another method of communicating would be preferable, e.g. pen and paper.
- Do not put your hands in front of your face when speaking.

- Be clear and precise when giving directions and repeat or rephrase, if necessary. Make sure you have been understood.
- Any personal matters should be discussed in private unless the support person has signed a confidentiality agreement.
- Be patient. Communication for people who are Deaf or hard of hearing is different because their first language may be American Sign Language (ASL).
- If the person uses a hearing aid, try to speak in an area with few competing sounds.

C. Physical Disability

There are many types and degrees of physical disabilities and not all require a wheelchair. For example, people who have arthritis, heart or lung conditions, or amputations may also have difficulty moving, standing or sitting. It may be difficult to identify a person with a physical disability.

- Speak normally and directly to the person. Do not speak to someone who is with him or her.
- People with physical disabilities have their own ways of doing things. Ask before you help.
- Be patient and be sure you understand their needs.
- Do not touch any assistive device including wheelchairs, unnecessarily, unless it is an emergency.
- Provide the person with information about accessible features of the immediate environment, e.g. automatic doors, elevators, accessible washroom, etc.

D. Intellectual Disability

People with intellectual or developmental disabilities may have difficulty doing many things most of us take for granted. These disabilities can mildly or profoundly limit one's ability to learn. You may not be able to know that someone has one of these disabilities unless you are told or you notice the way person acts, ask questions or body language.

As much as possible, treat the person with an intellectual disability like anyone else. The person may understand more than you think and will appreciate being treated with respect.

- Do not assume what the person can or cannot do.
- Use simple words and short sentences.
- Make sure the person understands what you have said.
- If you do not understand what is being said, do not pretend. Just ask again.
- Give one piece of information at a time.
- Be polite and patient. Speak directly to the person, not to someone who may be with them.

E. Learning or Cognitive Disability

Learning or cognitive disabilities can result in a host of different communications difficulties for people. They can be subtle, as in having difficulty reading, or more pronounced that can interfere with the person's ability to receive, express or process information. You may not be able to know that someone has one of these disabilities unless you are told or you notice the way the person acts, ask questions or body language.

- Patience and a willingness to find a way to communicate are your best tools.
- When you know that someone with a learning disability needs help, ask how you can best help.
- Speak normally and clearly, and directly to the person.
- Take some time – people with some kinds of disabilities may take a little longer to understand and respond.
- Try to find ways to provide information in a way that works best for them, e.g., have a paper and pen handy.
- Do not refer to the disability and never use a phrase like “handicapped.”
- Be courteous and patient and the person will let you know how to best provide service in a way that works for them.

F. Mental Health Disability

People with mental health disabilities look like everyone else. You won't know that the person has a mental health disability unless you are informed. But if someone is experiencing difficulty in controlling their symptoms or is in a crisis, you may need to help out. Be calm and professional and let the person tell you how you can best help.

- Treat people with a mental health disability with the same respect and consideration you have for everyone else.
- Be confident and reassuring, and listen to persons with a mental health disability and their needs.
- If someone appears to be in a crisis, ask them to tell you the best way to help.
- Take the person with a mental health disability seriously and work with them to meet their needs.

G. Speech and Language Disability

Some people have problems communicating. It could be the result of cerebral palsy, hearing loss or another condition that makes it difficult to pronounce words, causes slurring or stuttering, or not being able to express oneself or understand written or spoken language. Some people who have severe difficulties may use communication boards or other assistive devices.

- Just because a person has one disability does not mean they have another.
- If you do not understand, ask the person to repeat the information.
- If you are able, ask questions that can be answered “yes” or “no.”
- Take some time. Be patient and polite and give the person whatever time he or she needs to get his or her point across.
- Do not interrupt or finish the person's sentences. Wait for them to finish.

H. Deaf-Blind Disability

A deaf-blind person cannot see or hear to some extent. This results in greater difficulties in accessing information and managing daily activities. Most people who are deaf-blind will be accompanied by an intervenor, a professional who helps with communicating. Intervenors are trained in a special sign language that involves touching the hands of the person in a two-hand, manual alphabet or finger spelling and may guide and interpret for their client.

- Do not assume what a person can or cannot do. Some deaf-blind people have some sight or hearing, while others have neither.
- A deaf-blind person is likely to explain to you how to communicate with them.
- Speak directly to the person as you normally would, not to the intervenor.
- Identify yourself to the intervenor when you approach the person who is deaf-blind.
- Do not touch service animals – they are working and have to pay attention at all times.
- Never touch a deaf-blind person suddenly or without permission unless it is an emergency.

Other

Disabilities result from other conditions, accidents, illnesses, and diseases including Lou Gehrig disease (ALS), multiple sclerosis (MS), allergies, anaphylaxis, asthma, diabetes, cancer, HIV/AIDS, environmental sensitivities, seizure disorders, heart disease, stroke and joint replacement, to name a few.

Changing Attitudes: Understanding Barriers to Accessibility

Barriers are obstacles – things that stand in the way of people with disabilities doing many of the day-to-day activities that most of us take for granted. Barriers make shopping, working, going to a movie or taking public transit difficult, sometimes impossible, for people with disabilities.

There are many kinds of barriers:

Architectural and physical barriers are features of buildings or spaces that cause problems for people with disabilities. Examples are:

- Hallways and doorways that are too narrow for a person using a wheelchair, electric scooter or walker.
- Counters that are too high for a person of short stature.
- Poor lighting for people with low vision.
- Doorknobs that are difficult for people with arthritis to grasp.
- Parking spaces that are too narrow for a driver who uses a wheelchair.
- Telephones that are not equipped with telecommunications devices for people who are deaf, deafened or hard of hearing.

Information and communications barriers happen when a person cannot easily understand information. Examples are:

- Print is too small to read.
- Websites that do not support screen-reading software.
- Signs that are not clear or easily understood.

Attitudinal barriers are those that discriminate against people with disabilities. Examples are:

- Thinking that people with disabilities are less capable than others.
- Assuming that a person who has a speech impairment cannot understand you.

Technology barriers occur when a technology is not or cannot be modified to support various assistive devices. An example is:

- A website that does not support screen-reading software.

Systemic barriers are an organization's policies, practices or procedures that discriminate against people with disabilities. An example is:

- A hiring process that is not open to people with disabilities.

What You Need to Know When Speaking with a Person with a Disability Over the Phone

- Speak normally, clearly and directly.
- Do not worry about how their voice sounds. Concentrate on what is being said.
- Be patient, do not interrupt and do not finish the person's sentences. Give the person time to explain himself or herself.
- Do not try to guess what the person is saying. If you do not understand, do not pretend. Just ask again.
- If you are not certain what was said, just repeat or rephrase what you have heard.
- If a telephone customer is using an interpreter or a TTY line, just speak normally to the person and not to the interpreter.
- If the person has great difficulty communicating, make arrangements to call back when it is convenient to speak with someone else who can be of help.

Some Final Thoughts

Ontario's diversity can be one of its greatest assets. To realize the promise of diversity, we must ensure that we respect and value the full range of our differences. Equitable and inclusive practices are central to creating a cohesive society and a strong economy that will secure Ontario's future prosperity.

To improve outcomes for all people with disabilities, we must work together to identify and remove barriers to participation.

By promoting and valuing inclusion for all through understanding, identifying and eliminating biases, barriers, and power dynamics that limit some people with disabilities' prospects for fully contributing to society, we will achieve an accessible province by 2025.

Every year, the Accessibility Committee creates the Board's Accessibility Plan. To review these plans, please go to the board website at <http://www.dsbn.org>.

Resources

Primary sources of information cited in this protocol include the following:

<http://www.mcsc.gov.on.ca/en/mcss/404.aspx?rdr=> Customer Service Regulation 429/07 and compliance details

<http://www.accesson.ca> Accessibility Directorate, Ministry of Community and Social Services

<http://www.crinet.org> Community Resources for Independence

http://www.icdri.org/Employment/paths_to_equal_opp.htm Paths to Equal Opportunity A-Z index – Accessibility in Educational Environments

<http://www.ohrc.on.ca/en> Ontario Human Rights Commission – Policy and Guidelines on Disability and the Duty to Accommodate

<http://www.accessibilitypro.com/> Directory for Accessibility

<http://idrc.ocad.ca/> Adaptive Technology Resource Centre

<http://www.chs.ca/> The Canadian Hearing Society

<http://www.gtha.com> Greater Toronto Hotel Association – organizing accessible meetings, click on Hospitality Checklist

Additional Accessibility Services

Sign Language Interpreter Service: contact Ontario Interpreter Services, Canadian Hearing Society, Niagara. 905-984-4412

International Languages Interpreter Service: 905-842-2486 ext 256

Customer Service Regulation Training Links

- Customer Service Video, Ministry of Community and Social Services (MCSS)
<http://www.mcsc.gov.on.ca/mcss/serve-ability/splash.html> - 30 minutes
- Customer Service training for education sector, Ontario Education Services Corporation (OESC), <http://www.oesc-cseo.org>, click on Training – 35 minutes

See the **ability** in disability

Rick Hansen