

Organization category [Ontario Public Service / Ontario Legislative Assembly](#)

Number of employees range [50+](#)

Filing organization legal name [MacGowan Nursing Home Ltd](#)

Filing organization business number (BN9) [107652281](#)

Fields marked with an asterisk (*) are mandatory.

B. Understand your accessibility requirements

For enquiries related to the AODA obligations of the Ontario Public Service (OPS) or offices appointed under the Ontario Legislative Assembly (OLA), please contact AODA Contact Centre (ServiceOntario) at:

Phone: 416-849-8276 or

Toll-free: 1-866-515-2025

Email: aoda.assistance@ontario.ca

You have indicated that you are OPS/OLA, if you are submitting this report on behalf of any agencies, authorities, and/or boards of commissions, please list which ones 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) * [2025-08-20](#)

Certifier information

Last name *		First name *	
MacGowan		Archie	
Position title *	Business phone number *	Extension	<input type="checkbox"/> Check here if TTY
Administrator	519-357-3430	200	
Email *	Alternate phone number	Extension	Fax number
archie.macgowan@braemar-rc.com			

Primary contact for the organization(s)

☒ Check if the primary contact is same as the certifier

Last name *

MacGowan

First name *

Archie

Position title *

Administrator

Business phone number *

519-357-3430

Extension

200

☐ Check here if TTY

Email *

archie.macgowan@braemar-rc.com

Alternate phone number

Extension

Fax number

D. Accessibility compliance report questions

Instructions

Please answer each of the following compliance questions. Use the Comments box if you wish to comment 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? *

☒ Yes

☐ No

[Read O. Reg. 191/11, Part I: General](#)

[Learn more about your requirements for question 1](#)

Comments for
question 1

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

Information and communications

2. 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](#)

Comments for
question 2

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

Employment

3. Is your organization in compliance with all applicable requirements of the Employment Standards? *

☒ Yes

☐ No

[Read O. Reg. 191/11, Part III: Employment Standards](#)

[Learn more about your requirements for question 3](#)

Comments for
question 3

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

Design of public spaces

4. Is your organization in compliance with all applicable requirements of the Design of Public Spaces Standards? *
- ☒ Yes ☐ No

[Read O. Reg. 191/11 Part IV.1: Design of public spaces standards](#)

[Learn more about your requirements for question 4](#)

[The DOPS Reference Guide provides an overview of the scope, applicability and specific requirements of DOPS.](#)

Comments for question 4

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

Customer Service

5. Is your organization in compliance with all applicable requirements of the Customer Service Standards? *
- ☒ Yes ☐ No

[Read O. Reg. 191/11 Part IV.2: Customer Service standards](#)

[Learn more about your requirements for question 5](#)

Comments for question 5

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

Save form

Print form

Clear certification

Clear all questions responses

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