

Title: **ACCESSIBILITY STANDARDS: MONITORING AND FEEDBACK ON ACCESSIBLE CLIENT SERVICE**

Adopted: October 6, 2009

Revised: April 9, 2014, November 2017

Reviewed: April 2014, March 2016, November 2017

Related Document: Policy PCE.001 – Accessibility Standards

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**Purpose:** The Authority will monitor the effectiveness of implementation of the Accessible Client Service Standard through a process for receiving and responding to feedback. Information about the feedback process will be readily available to the public and will allow people with disabilities to provide feedback using a number of methods.

The Authority will create a feedback process that will review the implementation of this policy with the Authority's various constituency groups. Examples include but are not limited to School Council, Teacher Federations\*, Employee unions\*.

(\*Note: Consultation relates to membership of these groups as providers of Accessible Client Service.)

## **ADMINISTRATIVE PROCEDURE**

### **1.0 RESPONSIBILITY**

- 1.1 The Principal will implement a process for Feedback on Accessible Client Service that has the following components:
  - (a) Printed information available through school office to invite people with disabilities to provide feedback on their experience with or concerns about accessibility of services. Consideration should be given to providing information in alternate formats.
  - (b) Information on how the Authority will respond to feedback.
- 1.2 The Principal will create a process for reviewing implementation of the policy on Accessibility Standards for Client Service that includes consultation with various constituency groups including School Council, Federations, unions. Consultation methods could include e-mail feedback or focus groups.

## **2.0 METHODS FOR FEEDBACK**

- 2.1 A range of methods for soliciting feedback will be employed to ensure optimum access to the feedback process by people with disabilities.
- 2.2 Methods could include e-mail, verbal input or feedback card.
- 2.3 The feedback process should include the title(s) of the person(s) responsible for receiving feedback and indicate how the Authority's response to the feedback will be made known.

## **3.0 PROACTIVE MEASURES FOR ACCESSIBLE CLIENT SERVICE**

- 3.1 To ensure ongoing efficient and effective adherence to the Authority's policy on Accessibility Standards for Client Service, the Principal will take into account the impact on people with disabilities when purchasing new equipment, designing new systems or planning a new initiative.

### **SAMPLE NOTICE RE FEEDBACK**

Bloorview School Authority is committed to ensuring that its services meet optimum standards of accessibility for people with disabilities using the facilities and services of the school. Comments on our services regarding how well those expectations are being met are welcome and appreciated. Feedback regarding the way Bloorview School Authority provides services to people with disabilities can be made by e-mail, letter, phone call or meeting.

All feedback will be directed to the Principal.

Response to your feedback will be provided through direct response to the individual.

**ACCESSIBILITY FEEDBACK FORM**

Bloorview School Authority is committed to excellence in serving all students, parents/guardians, the public and our staff including people with disabilities. Your feedback is important to us and will help BSA to better assist you in accessing our services.

**Date of Visit:** \_\_\_\_\_ **Time of Visit:** \_\_\_\_\_

**Purpose of Visit:**

\_\_\_\_\_  
\_\_\_\_\_

**Was the service provided to you in an accessible manner?**

Yes       Somewhat       No

If no or somewhat, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please provide any other comments/suggestions you may have to improve our accessibility:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Would you like to be contacted regarding your feedback on accessibility?**

*(Please note: BSA will respond to you within ten (10) business days)*

Yes       No

If yes, please provide your contact information:

**Contact me by:**       Telephone       Email       Mail

Full Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

***Please return the completed form to:***

Telephone Number: 416-422-7042

Fax Number: 416-753-6094

Email Address: school@hollandbloorview.ca

Mail or In-Person drop off:

**Attention: Human Resources Department  
Bloorview School Authority  
150 Kilgour Road  
Toronto, ON, Canada M4G 1R8**

*We understand that persons with disabilities may require other methods other than standard print to access information. If you require us to process your feedback in a different format, please contact the school as outlined above.*

***FOR OFFICE USE ONLY***

Date Feedback Received: \_\_\_\_\_ Received by: \_\_\_\_\_

Follow Up Required:     Yes       No      Date of Follow Up: \_\_\_\_\_

Action Plan Required:     Yes       No

If yes, what action was taken: \_\_\_\_\_