



## **Workplace Accommodation Policy**

Created: July 2, 2020

Reference: Accessibility Standard for Employment under AODA, Ontario Human Rights Code,

Revised; June 30, 2021

Approved by the Board of Directors: July 22, 2020,

### **Policy**

Orde Day Care is committed to creating a workplace that is inclusive and barrier-free to ensure the full participation of all employees. Our aim is to foster a work climate of understanding and mutual respect and dignity and worth of all employees.

When working toward this goal, Orde Day Care will strive to provide support for and facilitate employee requests for accommodation consistent with the protected grounds outlined by the Ontario Human Rights Code and the Accessibility Standard for Employment under AODA. Orde Day Care will, where possible and reasonable to do so and where it does not cause undue hardship to the Centre or coworkers, alter existing policies or practices, adopt new policies and practices, make adjustments to the worksite, or reassign employees unable to perform the duties of their job to alternate work assignments provided that an employee provides appropriate documentation supporting the request for accommodation.

The policy provides guidance for the provision of these accommodation for all current and potential employees including full and part time, casual, contract, temporary, placement students and those on long-term disability leave (herein referred to as employee)

### **Purpose**

- To provide Orde Day Care a clear statement of the obligations and responsibilities that are inherent in to our accommodation process
- Set out guidelines and standards for the implementation of this policy
- Recognize the need for accommodation can either be requested by and employee or recognized by the employee's Supervisor or Executive Director

### **Objectives**

Within the guidelines and requirements of the Ontario Human Rights Code and the Accessibility Standard for Employment, Orde Day Care is committed to:

- Ensuring that each person will be considered individually, on a case-by-case basis, to determine accommodation requirements
- Working to eliminate barriers that prevent employees from accessing or being included in the workplace
- Achieving a culture and work environment that is supportive of employees including reviewing policies and practices to ensure that they are not discriminatory
- Ensuring compliance with all applicable legislation and the Orde Day Care policies



- Establishing an efficient and timely accommodation process that is consistent
- Clarifying roles, responsibilities, and accountabilities for the accommodation process
- Ensuring all employees and job applicants are advised of their right to be accommodated.

Orde Day Care Centre will develop (jointly with the individual, union where applicable and the treating physician if appropriate) an accommodation plan that respects the dignity of the individual, promotes integration and full participation and respects confidentiality.

### **Accommodation**

Accommodation is understood as any temporary or permanent measure used to remove a barrier which prevents an otherwise qualified individual from performing or fulfilling the essential duties of a job.

Orde Day Care will attempt to accommodate the employment needs of a job applicant and employees who are protected under the Ontario Human Rights Code and the Integrated Accessibility Standard for Employment up to the point of undue hardship.

### **Types of Accommodations**

Employment accommodation may be implemented because of requirements related to various areas, including disability, medical, family status or religious observances and other protected grounds.

### **Employer Responsibilities**

- Respect the dignity of the individual by ensuring that accommodation provided meets the specific circumstances, while at the same time working to ensure general accessibility for all employees in terms of spatial and physical requirements
- Ensure the necessary steps are taken to determine what modifications might be required for an employee to participate fully in the workplace
- Be inclusive by ensuring that the person to be accommodated is involved in the process and plan design
- Invite union representation, when applicable to assist in the developing of the accommodation plan in conjunction with the employee and the centre
- Include and integrate persons into employment activities in a manner that respects their dignity, autonomy, and self-esteem. The Executive Director shall ensure that individuals are not in any way disadvantaged because they have sought or require accommodation
- Consult with appropriate specialists i.e. Back to work specialist, when validating medical and/or disability information to determine individual accommodation requirements and consult on specific accommodation issues as is recognized in this policy
- Ensure that all accommodation requests are considered on an individual basis, taking into account the essential duties associated with the position and the employee's



- current limitations/restrictions based on relevant information, including but not limited to medical documentation, information from religious leaders, etc., if required
- Request additional reports (at Orde Day Care Centre's expense) to obtain updated information about the employee's prognosis in order to assist in the process of accommodating the (illness/injury/disability)
  - Work to achieve a reasonable accommodation for employees who have a legitimate need for accommodation up to the point of undue hardship
  - Work to identify an appropriate accommodation which meets the needs of the employee in an equitable and financially responsible manner.

### **Employee Responsibilities**

- Inform Orde Day Care of the need for an accommodation and must make the request in writing to the Executive Director, or in their absence their Supervisor
- Provide sufficient information regarding limitations and restrictions that impact the employee's ability to able to undertake the essential duties of their job
- Cooperate and be involved in the development and implementation of a reasonable accommodation plan based on their current abilities and the availability of meaningful work
- Communicate any known accommodation needs to the Executive Director. To facilitate the accommodation process, employees will not unreasonably withhold such information.
- Provide Orde Day Care Centre with all medical and/or other relevant information that pertains to the accommodation request
- Participate in the accommodation process. Orde Day Care Centre reserves the right to determine the nature of the accommodation. The employee shall not decline any reasonable offer of accommodation.
- Communicate any issues or problems with the accommodation plan in writing to the Executive Director as required.
- Obtain medical treatment in a timely manner. At Orde Day Care's request and expense, the employee will provide the Executive Director with updated information related to their current capabilities, limitations, restrictions, and prognosis. Any changes to the accommodation plan that will result in either an increase or decrease in duties (including returning to work with no accommodation) will require medical documentation to support the employee's request.
- Accept an offer of accommodation that meets their needs.

When an employee with a disability or medical condition requests an accommodation, the following process will be followed.

### **Procedure**

1. Employees will complete the Request for Accommodation Form providing all relevant information to support the request.
2. If the Executive Director becomes aware of or identifies a need for an accommodation, a meeting will be arranged with the employee and union, if applicable, to discuss the identified concerns.



3. Upon receiving a written request for an accommodation, the Executive Director will review the information and set up a meeting with the employee and union, if applicable regarding the request.
4. The employee, union representative and the Executive Director will discuss the specific needs and identify potential options that meet both the needs of the individual as well as those of Orde Day Care Centre.
5. As part of this process, the Executive Director requests more detailed information. If additional medical information is required, the information will be restricted to the prognosis and/or limitations/and time requirement to ensure that the accommodation will meet the needs of the employee. The employee will seek to obtain this information from their medical practitioner on a doctor's note or prepopulated form provided by the daycare, and all reports will be obtained at no cost to the employee.
6. Once the most appropriate accommodation has been identified, the specific details will be outlined in a written Individual Accommodation Plan including:
  - Workplace emergency response information, if required
  - Any other accommodation that is to be provided.A copy of the IAP will be provided to the employee in a format that considers his/her needs
7. If an individual accommodation plan is denied, the Executive Director will provide the employee with the reason for the denial, in an accessible format
8. The accommodation plan will be signed by all parties and copies provided.
9. A copy of the accommodation plan will be kept in the staff's file for review or to refer when updates are required, along with any supporting medical documentation
10. The accommodation plan will be implemented, monitored, and reviewed by the employee's immediate Supervisor who will update the Executive Director and employee to ensure the plan has effectively resolved the challenge:

Formal reviews will be conducted at a predetermined frequency to determine if the IAP is meeting the employee's needs and determine if changes are required. All reviews will be documented in writing and securely stored in the employee's file with a copy provided to the employee

The accommodation plan will be reviewed if the employee's work location or position changes or if the nature of the employee's need for accommodation changes.

If the accommodation is no longer appropriate, the employee and the Executive Director will reassess the employee's needs to allow Orde Day Care Centre to find the appropriate accommodation measure. (See step 3, above)

### **Confidentiality of Information**

Orde Day Care will always respect the Employee's confidentiality. Only relevant stakeholders will be involved during the process of consultation and the implementation of the Accommodation Plan. Records of accommodation requests will be maintained in a secure location in the employee's personnel file. All personal information concerning the employee will not be released without their prior written consent.



**Policy and Procedure Review:**

The **Workplace Accommodation Policy and Procedure** will be reviewed and signed off by all employees before commencing employment, annually, and at any time changes are made.

I acknowledge receipt of Orde Daycare’s **Workplace Accommodation Policy and Procedure**. I understand it is my responsibility to read, understand, and comply with these policies and procedures.

I understand that if I have questions, at any time, regarding **Workplace Accommodation Policy and Procedure**, I will consult with my immediate supervisor.

Please read the carefully **Workplace Accommodation Policy and Procedure** to ensure that you understand the policy before signing this document

Staff Name	Supervisor Name:
Staff Signature:	Supervisor Signature:
Date:	Date:



## **Request for Accommodation Form For Employees**

Employee Name: \_\_\_\_\_

Date:

\_\_\_\_\_

1. What type of accommodation are you requesting?
  - “ Compassionate
  - “ Medical/Health- if Medical/health please complete form attached
  - “ Religious/Creed
  - “ Other
2. What is the reason for your request? Please explain in detail to the best of your ability
3. What, if any, job functions are you having difficulty performing?
4. What limitation is interfering with your ability to perform your job?
5. Have you had any accommodations in the past for this same limitation?



6. If yes, what were they and how effective were they?

Please check off what type of documentation you are providing with your request:

- Medical Certificate
- Emergency Room Note
- Other Recognized Health Care Professional
- Other

Please provide any additional information that might be useful in processing your accommodation request:

Staff Name	Supervisor Name:
Staff Signature:	Supervisor Signature:
Date: Submitted to Supervisor/Executive Director	Date Received by Supervisor/Executive Director:



## ORDE DAY CARE CENTRE and CUPE 2484 FUNCTIONAL ABILITIES FORM FOR MEDICAL/HEALTH

Worker's Last Name:	First Name:
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1. Date of Assessment      dd      mm      yyyy	2. Please check one: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; padding: 5px;">                             Patient is capable of returning to work with <b>no restrictions.</b> </td> <td style="width: 50%; padding: 5px;">                             Patient is capable of returning to work <b>with restrictions</b> </td> </tr> </table>	Patient is capable of returning to work with <b>no restrictions.</b>	Patient is capable of returning to work <b>with restrictions</b>
Patient is capable of returning to work with <b>no restrictions.</b>	Patient is capable of returning to work <b>with restrictions</b>		

<b>Abilities and/or Restrictions</b>		
1. Please indicate <b>Abilities</b> that apply.		





ORDE DAY CARE'S STAFF MANUAL – POLICY AND PROCEDURE HANDBOOK

<p>Walking:</p> <p>Full abilities</p> <p>Up to 100 metres</p> <p>100-200 metres</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Standing:</p> <p>Full abilities</p> <p>Up to 15 minutes</p> <p>15-30 minutes</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Sitting:</p> <p>Full abilities</p> <p>Up to 30 minutes</p> <p>30 minutes – 1 hour</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Lifting from floor to waist</p> <p>Full abilities</p> <p>Up to 5 kilograms</p> <p>5-10 kilograms</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p>
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<p>Lifting from floor to shoulder</p> <p>Full abilities</p> <p>Up to 5 kilograms</p> <p>5-10 kilograms</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Stair climbing:</p> <p>Full abilities</p> <p>Up to 5 steps</p> <p>5-10 steps</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Ladder climbing:</p> <p>Full abilities</p> <p>1-3 steps</p> <p>4-6 steps</p> <p>Other (please specify)</p> <p>Additional Comments:</p> <p>-----</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
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<p>2. Please indicate <b>ONLY Restrictions:</b></p>		
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<p>Bending/twisting</p> <p>repetitive movement</p> <p>of: (please specify)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Work at or above</p> <p>shoulder activity:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Chemical exposure</p> <p>to:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Limited use of hand(s):</p> <p>Left</p> <p>Right</p> <p>Gripping</p> <p>Pinching</p> <p>Other –Specify</p> <p>Additional Comments:</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Limited pushing/  pulling with:  Left Arm  Right Arm  Other (please specify)  Additional Comments: ----- _____  _____  _____	Potential side effects  from medications  (please specify)   Do not include names  of medications.  Additional Comments: ----- _____  _____  _____	Please indicate for how long the above will apply:  _____ _____     Recommended date of next appointment to review:  _____ _____ dd                      mm yyyy
Recommended date of next appointment to review:  _____ dd                      mm                      yyyy		

