CHAPTER SIX: TERMS OF EMPLOYMENT		
Approval Date: April 2011	Policy: ACCESSIBILITY STANDARDS	
Revision Date: August 2023	FOR CUSTOMER SERVICE	
	Policy Number: 6.31 (continued)	

APPENDICES I

Child Care Algoma Accessibility Feedback Form

Thank you for choosing Child Care Algoma. We strive to provide quality services that are accessible to children and families, employees, community partners and visitors. Your comments and concerns help us identify where changes should be considered and ways we can make our services more accessible.

If you or someone you know experienced difficulties related to accessibility in any of our Programs or using any of our services, please fill in this form with as much detail as possible about your experience.

Name:	
Address:	
Phone number:	
E-mail address:	
Preferred method of communication:	
□ Telephone□ E-mail□ Mail□ No response required; I would prefer not to be	contacted.
I am:	
\square An employee \square A Parent/Guardian \square A visit	or 🗆 Other
Date of experience:	
I ocation of experience (if applicable):	

Based on your experience with Child Care Algoma on the date above, please select all barriers that you, or someone you know, experienced:
 □ Physical or architectural barrier, including missing or improper signage, item out of reach, heavy or difficult to operate door, uneven surface. □ Communication barrier, including materials unavailable in the format required. □ Technological barrier, including visual limitations on company website. □ Attitudinal barrier, including lack of knowledge, assumptions, or behaviours that discriminate against persons with disabilities. □ Policy or practice, including missing or incomplete accessibility policy. □ Other, please specify:
Please describe any suggested resolutions to the issue(s) encountered above.
Comments:
Please include any other suggestions on how we can make our services more accessible.
Comments:

Additional space for comments:		

Please submit this feedback form to:
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