

CONFIDENTIAL

Report to:

OTTAWA POLICE SERVICE BOARD COMPLAINTS COMMITTEE

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Submitted by: Executive Director, Ottawa Police Service Board

Contact Person:

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SUBJECT: REVIEW OF COMPLAINT INV-25-117

REPORT RECOMMENDATIONS:

That the Ottawa Police Service Board's Complaints Committee:

- 1. Review Policy and Procedure Complaint No. INV-25-117 pursuant to section 107(7) of the *Community Safety and Policing Act, 2019*.**
- 2. Find that Board Policy GA-14/CR-14 Accessibility Policy, read together with the OPS Accessibility Policy, provide adequate direction with respect to matters raised in this complaint, including the obligation to maintain accessible facilities in good working order, the requirement to notify the public of service disruptions affecting persons with disabilities, and the related training obligations applicable to OPS employees.**
- 3. Refer this report to the Ottawa Police Service's Equity, Diversity, and Inclusion Unit, as a case study documenting a real-world accessibility barrier experienced at an OPS public facility, for consideration in the finalization of the 2026-2030 Multi-Year Accessibility Plan.**
- 4. Authorize the Executive Director to communicate the Committee's findings to the Inspector General, the Solicitor General, and the complainant.**
- 5. Authorize the Executive Director to publish this report (without supporting documents) on the Board's website for the purpose of informing the public of the Board's findings and the actions recommended in response to this complaint.**

BACKGROUND

Policy and Procedure Complaints are complaints referred to the Board by the Inspector General of Policing pursuant to subsection 107(6) of the *Community Safety and Policing Act, 2019* (CSPA). Under subsection 107(1) of the CSPA, the Inspector General is responsible for receiving and addressing complaints relating to policing, including complaints concerning the policies, by-laws, rules, or procedures of a police service board and the procedures established by a chief of police. Where the Inspector General determines that such a complaint is appropriately addressed at the governance level, subsection 107(6) requires the Inspector General to refer the complaint to the relevant police service board and to inform the complainant of that decision.

Upon referral, the Board is required under subsection 107(7) of the CSPA to review the complaint as it relates to Board policies and Chief's procedures, and to report back to the Inspector General and to the Solicitor General on any steps taken. The Inspector General has generally specified a 90-day timeline for the completion of such reviews.

The Board's Policy CR-32 Policy and Procedure Complaints establishes the framework for administering these reviews. Under that policy, upon receipt of a referral the Executive Director notifies the Chief, gathers relevant Chief's Procedures and contextual information, conducts a review of applicable Board policies, and prepares a comprehensive report addressing the complaint as it relates to both Board policies and Chief's procedures. The Executive Director then submits that report to the Complaints Committee.

The Complaints Committee's role is to conduct an action-oriented review of the complaint and to identify opportunities for corrective action or improvement. In exercising its delegated authority, the Committee may request additional information, approve the Board's response to the Inspector General, endorse or modify recommendations contained in the report, and identify broader governance or policy issues for consideration by the Board or its committees. The review does not extend to findings regarding the conduct of individual members of the Ottawa Police Service.

Following the Committee's review, the Executive Director communicates the outcome to the Inspector General, the Solicitor General, and the complainant, subject to any limitations or conditions determined by the Committee.

DISCUSSION

Summary of the complaint

The complaint concerns the policies and procedures governing non-functioning accessibility doors and accessibility at OPS police stations. The complainant, a scooter

user, attended the Greenbank Road station (245 Greenbank Road) on January 20, 2025. She entered through the accessible entrance using the automated door opener. Upon attempting to leave, the exit-side accessibility button was non-functional. She was physically unable to open the door manually. She called the station's internal reception line for assistance, was placed on hold, and was disconnected. She attempted to signal staff by banging on the doors and windows and by waving at a security camera. No one attended to her. She was required to remain at the entrance until another person exited the building.

The complaint was initially filed with the Law Enforcement Complaints Agency (LECA) and was redirected to the Inspector General on February 21, 2025.

In the context of the LECA filing, the complainant indicated a willingness to consider early resolution. However, unlike the framework established under Part X of the CSPA for public complaints regarding officer misconduct, which expressly provides for informal resolution, the distinct framework governing policy and procedure complaints appears to require a formal review process and does not contemplate informal resolution.

Steps taken in response to the complaint

Upon receipt of the Inspector General's referral on August 21, 2025, a review of this complaint was commenced, focused strictly on Board policies and procedures established by the Chief of Police. This review does not examine the facts of the incident beyond the information provided by the Inspector General, nor does it assess the conduct of any OPS member. The review is confined to assessing whether any clarification or updates to policies or procedures are warranted.

To inform this review, the Board office requested the assistance of the OPS Professional Standards Unit (PSU). The PSU provided a Facilities report dated October 21, 2025. The report documented routine door inspection records for 245 Greenbank Road, including: a preventive maintenance work order (Order 61714867) created on December 12, 2024; door inspection activity logged for all doors at 245 Greenbank on January 20, 2025 (the day of the incident); and the monthly work order closed on January 31, 2025. These materials were reviewed alongside the complaint documentation attached to the Inspector General's referral.

The Board reviewed its Policy Manual and identified Board Policy GA-14/CR-14 Accessibility Policy as the directly applicable Board policy. The Board also reviewed the OPS Accessibility Policy, which is the Chief's implementing procedure under GA-14/CR-14. As confirmed in the Ottawa Police Service Accessibility for Ontarians with Disabilities Act Status Report submitted to the Board by the Chief of Police on January

26, 2026 (the Status Report), the OPS Accessibility Policy is currently under review and in the process of being updated as part of the OPS Employment Systems Review. The review also considered the 2026-2030 Ottawa Police Service Multi-Year Accessibility Plan (initial draft, September 2025), which sets out OPS's planned commitments through 2030 across the full range of AODA obligation areas, including training, built environment standards, and the design of public spaces.

Review of the complaint as it pertains to board policies or procedures

Completeness and adequacy of the Board policy

Board Policy GA-14/CR-14 (Accessibility Policy), adopted in December 2011 and last amended in April 2018, is the governing framework for the provision of goods, services, and facilities to persons with disabilities by the OPS and the Board. It applies to all OPS employees, auxiliary members, volunteers, and third-party contractors. The policy establishes the Board's overarching requirements for compliance with the *Accessibility for Ontarians with Disabilities Act, 2005* (AODA), the *Accessibility Standards for Customer Service* (O. Reg. 429/07), and the *Integrated Accessibility Standards Regulation* (O. Reg. 191/11).

Three provisions of GA-14/CR-14 are directly engaged by the facts of this complaint.

Section B.1 requires that assistive devices available for access to OPS services and programs be kept in good working order. A powered automated door opener at a police station is an assistive device within the meaning of this provision. The exit-side opener at 245 Greenbank was non-functional on January 20, 2025, raising the question of whether that standard was met.

Section B.5 requires OPS to give notice to the public of any temporary disruption in the availability of facilities used by persons with disabilities, including the reason for the disruption, its anticipated duration, and a description of available alternatives. The provision illustrates this obligation with the example of elevator service disruptions, an analogy that maps indirectly, but quite suitably, to the facts of this complaint. It appears that no such notice was posted at 245 Greenbank at the time of the incident.

Section A.4 requires all OPS employees to receive training on how to interact with persons with disabilities and, specifically, on what to do when a person with a disability is having difficulty accessing OPS goods or services.

In light of the foregoing, Board Policy GA-14/CR-14 appears substantively adequate as a governance instrument. It establishes clear, outcome-oriented obligations aligned with the AODA and its associated regulations, and it directly addresses the core elements necessary to ensure accessible service delivery: the availability and maintenance of

assistive devices, timely communication of service disruptions, and staff preparedness through training.

The issues raised by this complaint do not point to gaps or deficiencies in the policy framework itself, but rather to potential shortcomings in its implementation at the operational level. As such, the policy provides a sufficient and appropriate standard against which compliance can be assessed, and remains fit for purpose in guiding the provision of accessible policing services.

Further, the policy explicitly requires the Chief of Police to establish procedures and practices incorporating its provisions and to ensure they are adhered to.

Chief's procedures and the Accessibility Plan

The Chief's primary implementing instrument for GA-14/CR-14 is the OPS Accessibility Policy. That procedure gives operational effect to the Board's policy requirements across the same AODA obligation areas. Under its Customer Service Standards provisions, the OPS Accessibility Policy explicitly commits the Service to providing notice of service disruptions affecting accessible facilities – the same obligation that section B.5 of GA-14/CR-14 establishes at the Board policy level. The OPS policy also addresses built environment standards, encompassing the physical accessibility features at OPS facilities. Taken together, the Board policy and the implementing OPS policy establish a framework that is directly responsive to the circumstances this complaint describes. The OPS Accessibility Policy is, however, currently under review and in the process of being updated, as the Chief confirmed to the Board in the Status Report. The current status of the OPS policy as a document under active revision is material to this review, as it reflects that the Service is actively engaged in continuous improvement.

The 2026-2030 Multi-Year Accessibility Plan (initial draft) provides further context for understanding both the state of OPS's accessibility framework and the trajectory of its intended improvements.

The Plan's training provisions commit OPS to mandatory accessibility training for all employees, volunteers, and contractors, with training materials developed that are appropriate to the specific duties of each role, and with training records documented and maintained by date and participant. Those commitments give concrete effect to the obligation set out in section A.4 of Board Policy GA-14/CR-14. Mandatory, role-specific training is the primary mechanism through which the policy's requirement – that staff understand how to respond when a person with a disability encounters barriers – is translated into consistent and appropriate conduct in practice. The Plan's built

environment provisions also commit OPS to addressing accessibility in the design and maintenance of public spaces and OPS facilities. Powered automated door openers at police station entry and exit points fall within the scope of those commitments.

In December 2025, the OPS actively sought broad public input on the initial draft of that Plan through a community consultation process led by the Equity, Diversity, and Inclusion Unit. This approach reflects a commitment to ensuring that the Plan is responsive to the needs, expectations, and lived experiences of the communities it serves, and grounds its development in meaningful public engagement.

Findings, process questions, and recommendations

Three potential failure points are identifiable from the facts of this complaint, each raising different questions.

The first is equipment failure. The Facilities report documents a routine preventive maintenance inspection of the doors at 245 Greenbank Road logged on January 20, 2025 – the date of the incident itself – with no defect recorded. The review cannot ascertain at what time the physical inspection occurred or precisely what was tested. It is at least as plausible that the exit-side door opener button failed after a compliant inspection as it is that the failure was pre-existing and undetected. Equipment failures may occur despite compliant maintenance practice, and the available record does not permit a finding that OPS failed its maintenance obligation. If anything, the record suggests the opposite: OPS has a process in place to ensure regular inspection and maintenance of accessibility equipment, and the cause of this incident may have been equipment failure rather than maintenance failure.

The second is monitoring. The complainant attempted to attract attention by waving at a security camera and banging on the doors. At 245 Greenbank, reception staff do not necessarily have direct line of sight to the area where the complainant was unable to exit. It is not known whether the CCTV feed covering that area was actively monitored at the relevant time, and the duration of the incident is not established.

The third is customer service. The complainant called the station's internal reception line, was placed on hold, was disconnected, and received no follow up.

The facts available to this review do not permit a determination of which of these failure points caused the incident, or whether more than one contributed.

A policy and procedure review, conducted on documentary evidence, may not responsibly go further than that.

At the policy and procedure level, sufficient guidance exists. Board Policy GA-14/CR-14 requires accessibility devices to be maintained in working order, service disruptions to be notified to the public, and staff to be trained to assist persons with disabilities experiencing difficulty. The OPS Accessibility Policy gives operational effect to those requirements. Taken together, this framework is adequate, and the incident does not reveal a gap in that framework.

However, this framework, adequate as it is, did not prevent an experience that was unreasonable and should not have happened. The complainant – a person with a mobility disability attending a public police facility – found herself unable to exit, unable to reach anyone by telephone, unable to attract attention through any other means available to her, and left to wait without notice of any disruption or any alternative. That experience caused real distress and may have been avoidable.

The question of what specifically went wrong and what operational changes would reduce the likelihood of recurrence requires a closer analysis of processes on the ground – including how accessibility infrastructure is continuously monitored between inspections, what protocols exist for responding to a person in difficulty at an access point, and how the customer service function handles calls that are disconnected before resolution.

Those are not questions this review can answer, and they are not questions to be resolved through Board policy or the Chief's procedures. They require an operational, process-focused examination of how the existing framework is implemented in practice. That is precisely the kind of work the 2026-2030 Multi-Year Accessibility Plan review is designed to do, and it is why this report recommends that it be transmitted to the EDI Unit as a case study – a documented, real-world instance of the barriers the Plan is intended to identify and remove – to inform how that implementation is designed.

CONSULTATION

N/A

FINANCIAL IMPLICATIONS

N/A

SUPPORTING DOCUMENTATION

Document 1: Inspector General Referral Letter to Chair Fakirani, INV-25-117

Document 2: Complaint Form E-202501201817204390

Document 3: Board Policy GA-14/CR-14, Accessibility Policy

Document 4: OPS Accessibility Policy

Document 5: Facilities Report, 245 Greenbank Road Door Inspection Records

Document 6: Ottawa Police Service Accessibility for Ontarians with Disabilities Act Status Report, submitted to the Board January 26, 2026

Document 7: 2026-2030 Ottawa Police Service Multi-Year Accessibility Plan (Initial Draft, September 2025)

CONCLUSION

The complainant – a person with a mobility disability attending a public police facility – found herself unable to exit, unable to reach anyone for assistance, and left without notice of any disruption or alternative. That experience was unreasonable and should not have occurred.

This review does not identify a gap in the policy framework. Board Policy GA-14/CR-14 and the OPS Accessibility Policy together provide sufficient guidance. The failures this complaint reveals are operational. They require the type of practical solutions the 2026-2030 Multi-Year Accessibility Plan process is intended to develop, rather than further policy amendments. Transmitting this report to the EDI Unit as a case study ensures that this complainant's experience directly informs how the Plan's implementation commitments are designed, and that an incident of this kind does not recur.