



**Complaint / Plainte**

Under the *Human Rights Code* , R.S.O. 1990, c.H. 19/ En vertu du *Code des droits de la personne* , R.S.O. 1990, c.H. 19

**\*FDTE-6T6GZ7\***

<b>Complaint No. Plainte no.</b>		<b>Code Provisions No. Article du code</b>
FDTE-6T6GZ7		Section 5(1), Section 9

Name and Address of Complainant Nom et adresse du (de la) plaignant(e)  <b>Mr. Harry Chase</b>	Against <i>Contre</i>	Name and Address of Individual/Organization complained about Nom et adresse de la personne ou de l'organisation objet de la plainte  <b>Ontario Provincial Police And Inspector Bill Mc Kinnon; Mr. Ed Robertson; Mr. Ken Smith; PC Rich Nie; Sgt. Gerry Smith; Sgt. Robin James; Superintendent Dave Truax 777 Memorial Avenue Orillia, Ontario L3V 7V3</b>
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The Complainant alleges that on, or about Le (la) plaignant(e) prétend que le, ou vers le <b>August 29, 2006</b>	In Respect of <i>Relativement à</i>	Name and address of person whose rights have been infringed. Nom et adresse de la personne ou catégorie de personne(s) dont les droits ont été bafoués.  <b>SELF</b>
the Respondent contravened a provision of the <i>Human Rights Code</i> . le défendeur a enfreint une disposition du <i>Code des droits de la personne</i> .		

<b>Contravention Ground Motif de l'acte discriminatoire</b>	
<b>Ground(s):</b>	<b>Social Area(s):</b>
Disability	Employment

<b>Particulars Description de l'acte (des actes)</b>
<b>Please see attached complaint.</b>



# Human Rights Complaint Form

Under the *Human Rights Code*, R.S.O. 1990, c. H.19

Inquiry Number: **30082006FDTE-6T6GZ7 \*FDTE-6T6GZ7\***

**(Only Sections 1 to 9 will be sent to the person(s) named in the complaint form)**

**1. Person making the complaint:**

First name <b>HARRY</b>	Last name <b>CHASE</b>
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**2. Business, organization or association you are complaining about:**

Name of business, organization or association <b>Ontario Provincial Police</b>		
Address <b>777 Memorial Avenue</b>		
City/Town <b>Orillia</b>	Province <b>Ontario</b>	Postal Code <b>L3V 7V3</b>
Telephone Number <b>(705) 329-6170</b>	Fax Number	

**3. Names of persons you are complaining against (Please ensure that you have the correct spelling):**

First Name <b>Ken</b>	Last Name <b>Smith</b>	Job Title <b>Chief Superintendent</b>
First Name <b>Ed</b>	Last Name <b>Robertson</b>	Job Title <b>Inspector</b>
First Name <b>Gerry</b>	Last Name <b>Smith</b>	Job Title <b>Sergeant</b>

**4. In what area did the discrimination happen?**

**(Please check (✓) only the one that applies to your complaint; all others will not be accepted)**

<input type="checkbox"/> Goods and Services	<input checked="" type="checkbox"/> Employment
<input type="checkbox"/> Accommodation (Housing)	<input type="checkbox"/> Vocational Associations
<input type="checkbox"/> Contract	

**5. On what ground(s) did the discrimination happen?**

**(Please check (✓) only the ones that apply to your complaint; all others will not be accepted)**

<input type="checkbox"/> Age	<input type="checkbox"/> Citizenship	<input checked="" type="checkbox"/> Disability	<input type="checkbox"/> Marital Status	<input type="checkbox"/> Receipt of Public Assistance	<input type="checkbox"/> Sex
<input type="checkbox"/> Ancestry	<input type="checkbox"/> Colour	<input type="checkbox"/> Ethnic Origin	<input type="checkbox"/> Place of Origin	<input type="checkbox"/> Record of Offences	<input type="checkbox"/> Sexual Orientation
<input type="checkbox"/> Breach of Settlement	<input type="checkbox"/> Creed	<input type="checkbox"/> Family Status	<input type="checkbox"/> Race	<input type="checkbox"/> Reprisal	<input type="checkbox"/> Sexual Solicitation

**6. When did the last incident happen? (Date) August 29, 2006**

Trenton  
City/Town Complaint signed at

25 Sept 06  
Date Day Month Year

[Signature]  
Signature of Complainant

# Human Rights Complaint Form

7. Particulars: A summary of the incidents you are complaining about. Your summary must answer the following questions listed below. Section 7(a) should not be LONGER than two (2) pages; otherwise the complaint may be returned to you for redrafting.

- Date incident(s) happened (month/day/year)
- Where did the incident(s) happen?
- Who was involved (Name and Title)?
- What happened?
- How were you treated differently from others?
- How do the incidents relate to the ground(s) you selected?
- Remedy/Resolution you are seeking

See attached Schedule "A" which is in a font not smaller than 12 pt, and does not exceed 2 pages.

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[Signature]  
Signature of Complainant


Schedule "A" to  
Human Rights Complaint Form

7.a. Particulars:

1. The following persons are added to the Claim:
  - a. Superintendent Dave Truax
  - b. Inspector Bill McKinnon
  - c. Sergeant Robin James
  - d. PC Rich Nie
2. I am a person with a learning disability.
3. On May 26, 2006, I was diagnosed by Dr. Rosemary Young as having a learning disability. Specifically, I have difficulty with Phonological Awareness, Phonological Processing, and Phonological Memory. Because I have difficulty with letter-sound correspondence (converting spoken sounds into individual letters) - I have difficulty spelling and reading. This disability does not render reading and spelling impossible, it just makes me slower than average. With practice, my speed can and will improve. There are also adaptive technologies that can negate the disability. It also does not affect other aspects of my mental faculties: Dr. Young placed me in the 98<sup>th</sup> and 99<sup>th</sup> percentile for Non-Verbal and Verbal domains for the intellectual functioning aspects of the Stanford Binet test, with particular strengths in the Quantitative, Inductive / Deductive, and Visual-Spatial Reasoning.
4. On August 29, 2006, the Ontario Provincial Police through its representative Chief Superintendent Ken Smith, with full knowledge and awareness of my learning disability, did terminate my employment in whole or in part because of my learning disability.
5. Between May 26, 2006 and August 29, 2006, having been made aware of my learning disability, the OPP did not take appropriate steps to accommodate my learning disability.
6. On August 28, 2005, I reported for duty at the OPP Headquarters in Orillia, Ontario. Between then and January 6, 2006, I attended and did pass various orientation sessions and training courses.
7. As of January 7, 2006, I was assigned to the Peterborough County Detachment under the supervision of Sergeant Gerry Smith. PC Nie was assigned to be my coaching officer.
8. Between January and July of 2006, I was given monthly assessments consisting of 27 factors. In order to be recommended for full time employment with the OPP, I had to meet standard in all 27.
9. From the first assessment I met standard in 25 of the 27 factors. The only two I did not meet standard in were under the heading of Communication Skills, specifically Written and Listening Skills.
10. Under the Written factor, PC Nie identified that I had difficulty with spelling, grammar, and typing.

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Signature of Complainant

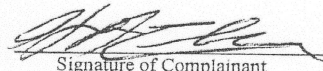
Schedule "A" to  
Human Rights Complaint Form

7.a. Particulars:

11. Under the Listening Skills, PC Nie identified that I had trouble hearing messages and relaying them to others when the message comes over the radio or phone.
12. I immediately began working on those shortcomings. I attended at the Quinte West Library for advise. I purchased and read the books they recommended. I attended the Quinte West OPP detachment on my days off to work on my reports. I improved slowly.
13. On April 26, 2006, PC Nie contacted Dr. Rosemary Young and booked an assessment. I met with Dr. Young on 7 separate occasions and completed various test. As a result of those tests, she diagnosed the learning disability mentioned above and provided recommendations, such as purchasing a portable spelling/grammar checker, installing voice activate software on the computers at work, and allowing me to dictate reports. That report was paid for by, and made available to, the OPP.
14. I purchased, and used, the portable spelling/grammar checker but the OPP refused to provide or install voice activated software.
15. Between June and August of 2006, I continued to work on the shortcomings and those shortcomings continued to be reflected on my monthly assessments.
16. Part of the standard assessment process is a 10 month evaluation. Less than two months after the assessment by Dr. Young, on July 14<sup>th</sup>, 2006, five of my supervisors (Superintendent Dave Truax, Inspector Ed Robertson, Inspector Bill McKinnon, Sergeant Robin James, and PC Rich Nie) held a teleconference, in my absence, in which they determined that my improvement had "flat lined", and resolved not to support a recommendation for full time status.
17. The 10 month assessment is important because section 22(5) of the Public Service Act allows a deputy minister to release from employment any public servant during the first year of employment for failure to meet the requirements of his or her position. Had I been given further time to improve, section 22(5) would not have been available to them.
18. During my termination interview, I was told by Noreen Angus, Executive Officer of the Ontario Provincial Police Association, that Chief Superintendent Ken C. Smith chose to terminate my employment under s.22(5) rather than take a risk on my learning disability. This occurred just after the two had met privately without me present.
19. Dr Young was of the opinion that I could make "steady gains in report-writing". She was not of the opinion that I would miraculously be able to spell overnight, or even within two or three months. The process takes time and effort. I have expended great effort but, because of s.22(5), have not been given time.
20. I believe that, once the OPP became aware of my learning disability, I should have been accommodated by extending the normal time limits and being provided with some or all

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Signature of Complainant

Schedule "A" to  
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7.a. Particulars:

of the aids recommended by Dr. Young. In the alternative, I should have been offered employment which did not require the same skills while I worked towards the required proficiency.

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[Signature]  
Signature of Complainant

Human Rights Complaint Form

(7(a). Continued)

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[Signature]  
Signature of Complainant

## Human Rights Complaint Form

7(b). What remedy/resolution are seeking to resolve this complaint (See Guidelines)

1. Re-instatement of my employment with the OPP, with recovery of lost wages, and accomodation of my learning disability.
2. In the alternative, Damages being the difference between my projected future incomes.
3. In any event, that the OPP develop and implement a policy to accommodate disabilities that are identified during the probationary period.

Are you willing to participate in mediation?

Yes

No

If no, please briefly indicate your reason(s):

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[Signature]  
Signature of Complainant



8. What have you done, if anything, to stop the discrimination?

There is little to do to stop the discrimination now that my employment has been terminated.

9. Do you have a union? If yes, have you filed a grievance about the discrimination? If so, what happened to your grievance?

Yes, the Ontario Provincial Police Association.

I filed a grievance, under Article 4.01 (d) of the Uniform Memorandum of Understanding, on September 02, 2006. That grievance alleges that the Employer failed to accommodate my disability, and did terminate my employment because of that disability, thereby violating Article 1 of the Uniform Memorandum of Understanding as unjustly terminating my employment.

That grievance has gone to the union and was served on the employer, by Noreen Angus, on September 8, 2006.

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