Hillsborough County
Florida

Hillsborough County
Americans With Disabilities Act
Self-Evaluation Survey Report

January, 2005
The County continues to demonstrate its commitment toward improving accessibility for its citizens through its various work programs, funding allocations, and solicitation of input and involvement of people with disabilities in its programs.

For further questions or comments, please contact the Hillsborough County ADA Coordinator’s Office:

Ms. Carmen Lobue
Acting ADA Community Liaison
601 E. Kennedy Blvd., 21st Floor
Tampa, FL 33602
(813) 276-8401
lobuec@hillsboroughcounty.org

Note: This information is available in alternative formats upon request.
INTRODUCTION

The Americans with Disabilities Act (ADA) was passed by the United States Congress and signed into law by President George Bush in 1990. The purpose of this Act is to provide equal access to employment, programs, services, and facilities for individuals with disabilities.

Hillsborough County, Florida is committed to the principles of ADA and seeks to make all County departments accessible to individuals with disabilities. Title II of the ADA requires that public entities take several steps designed to achieve compliance. These steps include the preparation of a self-evaluation to review its policies and practices. In order to ensure access to all County department programs and services, a Self-Evaluation Survey has been completed focusing on the programmatic practices and "effective" communication aspects of the programs and services offered by the County to the public and to its employees.

1. The survey reviewed the County's communication practices with applicants, participants, and other members of the public with disabilities to ensure that communication with disabled persons is as effective as communications with non-disabled persons.

2. The survey reviewed the auxiliary aids and alternate formats and practices used as accommodation to provide equal access to services and ensure effective communication. Auxiliary aids and alternate formats can include a wide range of services and devices including qualified interpreters, computer-aided transcription services, telephone handset amplifiers, assistive listening systems, telephones compatible with hearing aids, closed caption decoders, open and closed captioning, telecommunications devices for deaf persons (TDD's), videotext displays, exchange of written notes, qualified readers, taped texts, audio recordings, Braille materials, large print materials, and assistance in locating items, computer terminals, or speech synthesizers.

3. The survey reviewed measures taken to ensure that county employees are familiar with the policies and practices for the full participation of individuals with disabilities and that sufficient information is disseminated to applicants, participants, and other interested persons to inform them of the rights and protections afforded by the ADA.

The goal behind the development of this survey has been to provide the same services to all persons regardless of disability to the maximum extent feasible and in an integrated setting. This survey and set of recommendations does not address every conceivable modification to programs or services but does outline how Hillsborough County can enhance its provision of services to persons with disabilities.
SURVEY FINDINGS

The Hillsborough County Self-Evaluation Survey was adapted from a survey tool used by the City of San Francisco. The survey was developed with the assistance of the county’s ADA Access Team. The team is comprised of representatives from various internal departments and individuals from the community representing across-disabilities.

Departments directly under the Hillsborough County Administrator, the Clerk of the Circuit Court and the County Tax Collector’s Office participated in the completion of the survey. Training sessions were held to orient departments on the purpose and procedures for completion of the survey. Data was collected electronically and the County’s ADA Liaison compiled and analyzed the information. Preliminary results were reviewed by the ADA Access Team and recommendations were formulated.

Highlights of Findings:

A total of eighty-two (82) program responses were recorded. Of these respondents, eighty-two percent (82%) indicated services or programs that had direct contact with the public. Twenty-nine percent (29%) reported offering services specifically to persons with disabilities. These targeted services were offered in addition to other services already provided within the program or department and were not designed to be provided in a discriminatory manner. Examples are:

- Special Needs Emergency Disaster Shelter Program
- Special therapies for children with disabilities as designated on the Individual Education Plan (as required by federal law) or Family Services Plan
- The Bakas Equestrian Center and its therapeutic riding program
- Section 8 Mainstream Program vouchers or a Home Modification/Barrier Removal CDBG housing program

The manner of direct contact by county programs with members of the public is quite varied. Some representative examples are:

- Customers e-mail, call, write, and stop in for publications, individual consultations, and payments.
- Seminars, workshops, classes and small group sessions are offered as teaching methods.
- Equipment, software and kiosks used by the public are purchased.
- Early childhood and family development program are provided for 1800 low-income families of children including those with special needs.
- People come in to obtain information regarding court dates, obtain copies of cases, file pleadings, pay court costs and obtain general information regarding courts and their proceedings (Clerk’s office).
- Emergency services are provided in the field 7 days a week, after hours, and on weekends and holidays.
- Emergency assistance is provided by phone for through the 9-1-1 center.
• Regional parks provide access to customers for picnics, hiking, camping, fishing and nature study. Programs provide interpreting resources and teaching skills needed to enjoy them.

• Public displays and meetings, Town Hall meetings and civic events are held throughout the county.

• Mediations, depositions, hearings, and meetings with individual attorneys are conducted with the customers.

• Customers are interviewed on site, or home visits are made for determining eligibility for a variety of services including shelter, utilities, food and employment assistance, veterans’ benefits, housing assistance.

Access to Services & Programs:

The survey looked at how information concerning programs and services is conveyed to the public; how persons with disabilities are informed of availability of programs and services; the range of communication alternatives provided and how that determination is made. The findings revealed:

• The three primary methods used to inform the public of services/programs are by website (60%), brochures (54%), and verbal (51%).

• Although the use of alternate formats of program material are provided in a variety of ways, they are most likely provided by means of the department’s/program’s website and secondarily by email reply.

• Approximately twenty-two percent (22%) of respondents indicated that accessibility to services is noted and that it is noted primarily through verbal outreach or a posted notice at the facility. Some indicated that it is noted in a brochure or on the website.

• Sign Language interpreters and call-in phone capability are the most frequently cited use of auxiliary aids in accessing program material or service.

• No formal written procedure was noted for requesting alternate formats or auxiliary aids. Various informal procedures are used.

• A little over half (56%) of the responding programs hold public meetings, with just over thirteen percent (13.4%) of those indicating they notify the public of accessibility.

• Approximately half (47.5%) have a grievance procedure to address requests for accessibility; however, public notice of that grievance procedure is generally not made. Only twenty-nine percent (29%) indicated they do.

• Of those responding, eighty-three percent (83%) indicated that requests for program eligibility requirements may be modified when requested. Examples of modifications to programs include: phone interviews or home visits, mailing of applications, obtaining outside technical assistance to modify program elements for special needs children.
Phone Communication:

- About half of the respondents provide public telephone access. Of those responding, only 20% report programs that have a TTY/TDD for use by the hearing impaired or deaf public and only a fraction of those TTY/TDD numbers are in a brochure, on their website, or in a phone directory.

- About half of the respondents report using an automated phone system for citizens to access county programs. Sixty-two percent (62.5%) have a by-pass feature while thirty-seven percent (37.5%) do not.

- A little more than half (58%) report that staff has been trained on the use of TTYs/TDDs in either a formal manner through the Deaf Service Center or informally through other staff or self-directed. Only twenty-seven percent (27%) report staff trained on the use of the Florida Relay Service.

Emergency Evacuation Procedures:

85% of respondents report written emergency procedures with two-thirds reporting that these include procedures for persons with disabilities. Although not all respondents reported written procedures, the county does in fact have a written Emergency Procedures Manual which was revised in 2004. The revisions were made as a result of the work of an Ad Hoc committee, which included participation of employees with disabilities. Further information reveals that local fire code requirements for written emergency procedures exist for high-rise structures, such as County Center and the Courthouse, but not for one-story facilities. In FY 02-03, the County took additional measures to ensure safety of employees and visitors by purchasing special evacuation chair devices for its multi-story facilities designed for use by those with mobility impairments.

Training:

In addition to training on TTYs/TDDs and FRS, the survey addressed broader training components.

- Sixty-five percent (65%) of respondents reported training staff to assist in recognizing problems concerning accessibility issues. Most training is reported to be given at employee orientation and is on a variety of state and federal disability related laws, most significantly the ADA.

- Ninety-three percent (93%) report no training about auxiliary aids.

- Sixty percent (60%) of the respondents indicate staff could benefit from additional training, specifically in how to work with persons with disabilities and in providing accommodations. Other areas of interest for additional training include legal requirements, resources for alternate formats and auxiliary aids, and assistance in developing policies and procedures dealing with these issues.
Purchasing/Contracts:

In reviewing broad purchasing and contracting practices, the following information was discerned:

- Nearly seventy-seven percent (77%) of those responding indicated that the RFP process does not include a standard component addressing accessibility compliance or training on the part of the vendor.

- Seventy-three percent (73%) of those areas that use contract employees indicated that they do not generally have procedures in place requiring contracted employees to follow accessibility guidelines or protocols.

Other ADA related procedures or barriers:

- A few of the larger departments serving the public or our employees had an "ADA go-to" person (i.e., Library Services, Parks, Recreation and Conservation, Human Resources). For the remainder, the county’s ADA Liaison was identified as the "go-to" person under the BOCC and the Clerk of the Circuit Court has an identified ADA "go-to" person.

- Ninety-one percent (91%) of respondents noted no prior program accessibility issues.

- Of those noting additional areas concerns with accessibility, the following were identified: lack of adequate training and awareness of disability etiquette and how ADA guidelines affect each program area with a focus on inclusion; telephone answering system and auto voice mail do not address the needs of the hearing impaired; the Citizen Action Center TTY number, or other TTY number, should be advertised under any County service number that does not have TTY accessibility; and broaden availability of public materials (publications, public records) in alternate formats.

RECOMMENDATIONS

- Create a policy informing employees and the public that reasonable accommodations for physical access and access to auxiliary aids, alternate formats, and modifications to program procedures can be requested, that full consideration to accommodate the citizen will be made under the guidelines of the ADA, and that the County has a grievance procedure when an accommodation has been denied.

- Create or update a generic statement and/or poster that can be displayed informing the public at county properties that every effort to provide accessibility is made and how a citizen can make a request for an accommodation or voice a concern.

- Expand employee training to include more information on disability rights and reasonable accommodation requests for program accessibility, disability sensitivity issues to maximize customer service opportunities, and legal implications.
- **Internet:**
  - Develop a policy on web page accessibility that includes the capability for screen reader and voice recognition programs to access county information. *Background:* County programs rely heavily on the use of electronic communication technology to serve our citizens. The county's web site is used to provide information about government services, correspond directly online with local officials, renew books, and complete other forms to access county services.
  
  - Evaluate the county's website to determine where accessibility features are needed. Then develop a plan to make existing pages and content more accessible.

- **Telephone:**
  - Make "TTY/TDD capability available at locations were needed and provide a funding mechanism for securing TTY capability. *Background:* Telephone access to programs and services is one means of communicating with citizens. To ensure that effective communication is available for citizens with hearing or speech impairments, it is essential that adequate TTYs/TDDs be available and the ability to use the Florida Relay Service (FRS). FRS is a state-wide service that provides a third-party intermediary who relays information verbatim to both parties.
  
  - Identify programs using an automated phone system without a by-pass feature and add one. *Background:* A by-pass feature is very helpful to Florida Relay Service (FRS) users. A by-pass system provides much greater efficiency and customer satisfaction to the hearing impaired person.
  
  - Establish procedures for on-going training of county personnel on the availability and use of TTYs and the FRS.
  
  - Identify the Citizen Action Center TTY number, or other appropriate program TTY number, on all county generated print material and web sites.

- Enhance department program and service information by identifying (perhaps through the universal accessibility symbol) accessibility features of facilities or services online and in publications specific to those areas.

- Place on COIN a listing of community resources or vendors offering services such as sign language interpreting, CART, Brailing, and other aids for effective communication.

- Investigate with the Purchasing Department the feasibility of establishing contracts open to all departments for specific services such as sign language interpreting.

- Develop a budget line-item for use by department programs when citizen accommodations are required.
• Review any need for additional language in the RFP process or within contracts or purchase orders to ensure that vendors will comply with accessibility requirements in conducting business on behalf of the County. Craft additional language as may be necessary.

• Continue on-going training of the county’s internal Fire Wardens in emergency evacuation procedures for persons with disabilities in multi-story facilities.

• Review the need for additional written procedures for non-multi-story facility program sites. If determined necessary, draft additional procedures through Facilities Management.

CONCLUSION

In conclusion, the updated ADA Self-Evaluation Survey findings revealed many county programs dedicated to offering services in a non-discriminatory manner and identified areas in which we can improve. Citizen requests for accommodations to enable participation in programs and services are generally met. Yet procedures should be established for ensuring that these accommodations are readily available when requested or needed. The County has an opportunity to take a leading role in expanding full accessibility to its services by applying accessibility guidelines and standards to the electronic technology applications used in sharing information with the public. The use of alternate formats in disseminating information to the public in our various meetings, workshops, publications, etc. should be fully explored. A set of recommendations have been set forth by the County’s ADA Access Team for further consideration and action.

Attached to these findings is Appendix I, a copy of the Survey and Appendix II, the tables and charts summarizing the data.
APPENDIX I

Hillsborough County
ADA Self-Evaluation Survey
Survey Instructions

This Self-Evaluation Survey is a tool to gather baseline data about the accessibility of Hillsborough County benefits and services. We hope to identify best practices as well as areas where improvement is needed. The County will use the data gathered to determine where resources and training are needed to improve access across all Programs. This Survey is not a test.

Each Program must complete this Survey. For purposes of the Survey, a “Program” is service or cluster of services with a single purpose. Most Departments will have several Programs. This Survey should be completed by the “Program Manager”, the person who is close enough to the day-to-day workings of the Program to have a sense of the actual practices and who has some authority over the Program’s policies and procedures.

The Survey is designed so that you have to answer only those questions that are relevant to your Program. It is divided into six sections according to different types of services and activities, as follows:

I. Program Background
II. General Public Contact
III. Intensive “Client” Contact
IV. Contracting
V. Purchasing
VI. Staff Training & Technical Assistance

Start at Section I and continue from there. At the beginning of each section is an explanation of the types of programs that are covered by that section. Please, read each section description carefully to determine whether the questions in that section apply to your program. If your program does not fit the section description, you may skip to the next section.

There is a space for comments at the end of every section, as well as at the end of the survey.
Hillsborough County
ADA Self-Evaluation Survey
County Programs and Services

Please list your Department & Program:

<table>
<thead>
<tr>
<th>Agency or Department</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program</td>
<td></td>
</tr>
</tbody>
</table>
Frequently Asked Questions

My Department has already evaluated the accessibility of our facilities. How does the Survey relate to that evaluation? The Survey is focused on programmatic and communication access. It does not address architectural issues as the original self-evaluation did.

Is the Survey asking about my Department's policies? No. The Survey is an evaluation of County Programs, not Departments. While there may be some overlap with your department, the Survey asks questions about the policies, procedures, and practices of your individual Program. In answering the questions, you should limit your responses to the service or cluster of services you oversee.

How are you defining disability? This survey uses the term disability as it is defined in the Americans with Disability Act:

A “disability” is “a physical or mental impairment that substantially limits a major life activity; a record of such an impairment; or being regarded as having such an impairment.”

A “physical or mental impairment” includes, but is not limited to: visual, speech and hearing impairments, cerebral palsy, diabetes, mental retardation, emotional illness, HIV disease and drug addiction.

“Major life activities” include: caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

I don’t see a lot of “don’t know” answer options. If I don’t know the answer to a question, should I research the question or just answer “no”? If you don’t immediately know the answer to a question, we prefer that you ask around to find an answer. If you can’t get an answer after asking around, you should answer “no.”

We appreciate your assistance in completing this important evaluation.
Section I. Program Background

Who must complete this section? All Programs must complete this section.

1. Name of person completing this survey:
   Title:
   Phone:
   Fax:
   E-mail:

2. Primary Location of Program:
   Street Address:
   City:
   State:
   Zip:

3. How many employees work in this Program?
   □ 0 – 10
   □ 11 – 20
   □ 21 – 50
   □ over 50

4. Does your Program issue licenses or certifications (e.g., foster home, marriage, dog licenses, etc.)?
   □ Yes  □ No

5. In three sentences or less, please describe the contact your Program has with the public (e.g., people come into our office for x, y, and z; no one ever comes to our office but we buy information kiosks that are used by the public; we do fieldwork and interact with members of the public in the field; we give grants to organizations that provide x, y and z services to the public; we have clients who must apply for our Program and meet certain criteria for continuing to receive service from us; etc.).
Section II. General Public Contact

Who must complete this section? Complete this section if your Program has any direct contact with the public. This includes Programs that lead tours, recruit and hire members of the public, provide information, issue citations or licenses, host meetings, collect fees, provide job training, administer benefits, etc. This does not include Programs that provide public service through contracted agencies (see Section IV, below). If your Program provides service through contracted agencies or does not have direct contact with the public (e.g., purchasing Programs), you may skip this section.

Population Information
1. Approximately how many members of the public receive service from your Program each year?
   - Under 1000
   - 1,000 - 5,000
   - 5,001 - 10,000
   - Over 10,000

2. Approximately what percentage of these individuals has disabilities? [Note: We understand that your program may not collect this data and do not expect you to do so. However, your best estimate of this percentage will give us a clearer picture of your program. In your estimate, please be sure to consider those people with hidden disabilities (e.g., psychiatric illness) as well as those with visible disabilities (e.g., visual impairment).]
   - None
   - Under 10%
   - 10% - 25%
   - 26% - 50%
   - over 50%
   - Have no idea

General Policies, Procedures & Practices
1. How do you inform members of the public about your Program? (Check all that apply.)
   - Verbal outreach
   - Brochure
   - Flyer/notice in community
   - Advertisement in newspaper, bulletin, etc.
   - Website
   - Other, please name: ________________________________________________

2. Does your Program ever provide transportation for its applicants or participants?
   - Yes [GO TO 2.1]  
   - No [GO TO 3]

   2.1 If yes, what type?
   - Mini-van
   - Ramp-taxi
   - Bus pass or tokens
   - Other, please name: ________________________________________________
2.2 Do you provide wheelchair accessible transportation for people who need it?

☐ Yes  ☐ No

3. Does your Program or service have safety standards (e.g., applicants must be able to care for themselves, participants may not have a history of violent or criminal behavior)?

☐ Yes [GO TO 3.1]  ☐ No [GO TO 4]

3.1 If yes, please briefly describe the standards:

3.2 How do you determine whether an individual meets these standards?

☐ Self-identification by individual  ☐ Staff observation  ☐ Staff interview  ☐ Testing  ☐ Records check  ☐ Other, please name: ____________________________

4. Does your Program have any components or services that are exclusively for people with disabilities (e.g., a housing Program designated for persons with disabilities, an alternate employment Program, a different application process, special meeting times, etc.)?

☐ Yes [GO TO 4.1]  ☐ No [GO TO SECTION C]

4.1 If yes, please list these components or services:

4.2 May people with disabilities also participate in the general Program if they so choose?

☐ Yes, always  ☐ Yes, under special circumstances  ☐ No

4.2a If you answered “Yes, under special circumstances” or “No” please explain:

C. Communications

1. Does your Program use an automated phone menu system to access staff and/or information on services (i.e., push 1 for... push 2 for...)?

☐ Yes [GO TO 1.1]  ☐ No [GO TO 2]
1.1 If yes, does the system offer a simple (1 step) way for a caller to bypass the menu and speak directly with a Program representative?
☐ Yes    ☐ No

2. Does your Program have a TTY/TDD (text telephone for communicating with people with hearing and/or speech impairments)?
   Yes [GO TO 2.1]    ☐ No [GO TO 3]

2.1 If yes, do you have a dedicated phone line for the TTY/TDD?
☐ Yes    ☐ No

2.2 What is the TTY/TDD number?

2.3 Where is the TTY/TDD number listed? (Check all that apply.)
☐ Brochure or other distributed written material
☐ Public phone directory
☐ Recorded message
☐ Website
☐ Other, please name: __________________________________________

2.4 Does the TTY/TDD have an answering machine that receives calls when a live person is not available (i.e., is your TTY/TDD functional 24 hours a day)?
☐ Yes    ☐ No

2.5 Are members of your staff trained in how to use the TTY/TDD?
☐ Yes [GO TO 2.5A]    ☐ No [GO TO 3]

   2.5a If yes, please briefly describe the training they receive:

   2.5b How frequently is this training provided?
☐ At orientation
☐ On request
☐ Semi-annually
☐ Annually
☐ Other, please name: __________________________________________

3. Does your Program provide phones for the public to use to make outgoing calls when needed (e.g., to call for transportation or to track down a required document)?
☐ Yes [GO TO 3.1]    ☐ No [GO TO 4]

3.1 If yes is there a TTY/TDD available for making these calls?
☐ Yes    ☐ No
4. Is your Program staff trained in how to use the Florida Relay Service?
   □ Yes       □ No

5. Are people with disabilities portrayed in any of the materials used by your Program (e.g. written descriptions, pictures, videos etc.)?
   □ Yes [GO TO 5.1]    □ No [GO TO 6]

   5.1 If yes, please describe briefly:

6. Does your Program notify the public about whether your Program office(s) is/are architecturally accessible (e.g., whether or not it is accessible to people in wheelchairs, whether or not there are obstructions that would hinder people who are blind)?
   □ Yes [GO TO 6.1]  □ No [GO TO 7]

   6.1 If yes, please indicate the methods you use to communicate this information:
   (Check all that apply.)
   □ Verbal outreach
   □ Posted notice outside facility
   □ Brochure
   □ Flyer, notice in community
   □ Advertisement in newspaper, bulletin, etc.
   □ Website
   □ Other, please name: _____________________________________

7. Do you ever provide information to the public through videos, movies or television broadcasts?
   □ Yes [GO TO 7.1]  □ No [GO TO 8]

   7.1 If yes, do these videos, movies, or broadcasts have captioning for individuals with hearing impairments (i.e., is the verbal portion of the broadcast transcribed and displayed at the bottom of the screen)?
   □ Yes       □ No

   7.2 Do these videos, movies or broadcasts have an audio narration option for individuals who have visual impairments?
   □ Yes       □ No

8. Does your Program include exhibits and/or interpretive displays (e.g., art exhibits, historical displays, information kiosks, etc.)?
   □ Yes [GO TO 8.1]    □ No [GO TO 9]

   8.1 If yes, is information in the exhibit/display provided in a variety of formats?
   □ Written
   □ Audio
   □ Graphic/Pictorial
   □ Other, please name: ___________________________________
9. Does your Program use any of the following alternative formats and/or auxiliary aids to make Program materials and services accessible to people with disabilities (e.g., to make written materials accessible to people with visual impairments, to make interviews accessible to people who are deaf)? (Check all that apply.)

**Alternative Formats**
- [ ] Audiotape
- [ ] Enlarged print
- [ ] Braille
- [ ] Computer disk
- [ ] Website
- [ ] E-mail
- [ ] Other, please name: ____________________________

**Auxiliary Aids**
- [ ] Sign language interpreters
- [ ] Assistive listening devices
- [ ] Real-time captioning
- [ ] Readers
- [ ] Call-in/speakerphone capability
- [ ] Assistants (who perform tasks such as translating for a person with speech impairment)
- [ ] Other, please name: ____________________________

9.1 Please briefly describe the procedure someone must follow to request materials in alternative formats and/or auxiliary aids:

9.1a Is this procedure documented in written form?
- [ ] Yes
- [ ] No

9.2 Do you notify the public that they may request alternative formats and/or aids if needed?
- [ ] Yes [GO TO 9.2A]  [ ] No [GO TO 9.3]

9.2a How are members of the public notified that they may request alternative formats and/or auxiliary aids if needed? (Check all that apply.)
- [ ] Verbal explanation at service window
- [ ] Posted notice program office
- [ ] Brochure or other distributed written material
- [ ] Recorded message
- [ ] Website
- [ ] Other, please name: ____________________________
9.3 What is the average length of time that someone must wait for approval of a request?
☐ Less than 1 hour
☐ 1 hour – 24 hours
☐ 25 hours – 72 hours
☐ 73 hours to 1 week
☐ over 1 week

9.4 Please list the firm(s) and/or organization(s) you use to access auxiliary aids (e.g., the firm you use to access ASL interpreters, etc.):

10. Does your Program hold public meetings, hearings or other events?
☐ Yes [GO TO 10.1] ☐ No [GO TO 11]

10.1 If yes, does your Program hold public meetings, hearings or other events regularly at specific locations (i.e., at locations other than your program locations listed in Section I)?
☐ Yes [GO TO 10.1A] ☐ No [GO TO 10.2]

10.1a If yes, please list these specific locations:

10.2 Does your Program notify the public about whether or not the locations of public meetings, hearings or other events are architecturally accessible?
☐ Yes [GO TO 10.2A] ☐ No [GO TO 10.3]

10.2a If yes, please indicate the methods you use to communicate this information: (Check all that apply.)
☐ Verbal outreach
☐ Written meeting notice
☐ Posted notice outside facility
☐ Advertisement in newspaper, bulletin, etc.
☐ Website
☐ Other, please name:

10.3 Do you use any of the following alternative formats and/or auxiliary aids to make public meetings, hearings or other events accessible to people with disabilities?

Alternative Formats
☐ Audiotape
☐ Enlarged print
☐ Braille
☐ Computer disk
☐ Website
☐ E-mail
☐ Other, please name:
Auxiliary Aids
☐ Sign language interpreters
☐ Assistive listening devices
☐ Real-time captioning
☐ Readers
☐ Call-in/speakerphone capability
☐ Assistants (who perform tasks such as translating for a person with speech impairment)
☐ Other, please name: ________________________________

10.3a If you answered yes to any of the above, is the procedure for requesting and receiving alternative formats and/or auxiliary aids for public meetings, hearings or other events different from the procedure for requesting these formats and aids for Program services?
☐ Yes [GO TO 10.3A1] ☐ No [GO TO 11]

10.3a1 If yes, please explain these differences. (Be sure to note any differences in the ways the public is notified, request procedure, length of request approval period, firms used, etc.):

11. How does your Program pay for costs incurred from accommodating people with disabilities (e.g., paying for interpreters, alternative formats, individual staff assistance, etc.)?
☐ Fees from participants with disabilities
☐ Fees from all participants
☐ Specific budget line item
☐ Included in general budget
☐ Other, please name: ________________________________

D. Modification of Policies, Procedures & Practices

1. Does your Program allow an individual to request a modification of Program policies, procedures or practices to accommodate his/her disability (e.g., a waiver of an orientation requirement for someone who cannot attend at the required time due to a disability, a home visit for someone who is homebound and cannot come into the Program office, assistance completing a required form for someone with a cognitive impairment, etc.)?
☐ Yes [GO TO 1.1] ☐ No [GO TO 2]

1.1 If yes, please briefly describe the procedure for requesting and providing modifications:

1.1a Is this procedure documented in written form?
☐ Yes ☐ No
1.2 Do you notify the public that they may request such modifications when needed?
☐ Yes [GO TO 1.2A] ☐ No [GO TO 1.3]

1.2a If yes, what does the notice include?
☐ Notice of right to non-discrimination
☐ Notice of right to reasonable modification of policies, procedures and practices
☐ Information on how to request a modification
☐ Phone number to call to request a modification
☐ TTY number to call to request a modification
☐ A form to complete to request a modification
☐ An address at which to make the request in person
☐ Contact information of an advocate or ombudsperson
☐ Other, please name: ________________________________

1.2b How are members of the public notified they may request modifications if needed? (Check all that apply.)
☐ Verbal explanation at service window
☐ Posted notice in program office
☐ Brochure or other distributed written material
☐ Recorded message
☐ Website
☐ Other, please name: ________________________________

1.3 What is the average length of time that someone must wait for approval of a request?
☐ Less than 1 hour
☐ 1 hour – 24 hours
☐ 25 hours – 72 hours
☐ 73 hours to 1 week
☐ over 1 week

1.4 How are staff (including receptionists, service window attendants, client service staff, etc.) informed about how to handle requests for modification? (Check all that apply.)
☐ Word-of-Mouth/Experience
☐ Employee Handbook
☐ Other documented procedure
☐ Training
☐ Other, please name: ________________________________

1.5 Approximately how frequently does your Program receive requests for modification of policies, procedures or practices?
☐ Never
☐ 1 – 10 x per year
☐ 11 – 25 x per year
☐ 25 – 50 x per year
☐ More than 50 x per year
1.6 In the last year, has your Program modified a policy, procedure and/or practice for a person with a: (Check all that apply.)
☐ psychiatric disability?
☐ learning or Cognitive disability?
☐ speech impairment?
☐ hearing impairment?
☐ visual impairment?
☐ mobility impairment?
☐ immuno disorder (such as HIV, Multiple Chemical Sensitivities, etc.)?

1.6a Please give an example of a modification that was made for each “yes” checked:

1.7 Does your Program provide alternatives to an individual whose request for modification is denied (e.g., instead of a home visit to fill out an application, you offer a phone interview and mail the application to be signed by the homebound individual)?
☐ Yes [GO TO 1.7A] ☐ No [GO TO 2]

1.7a If yes, please give an example of a situation in which an alternative to a requested modification was provided:

2. Does your Program require applicants or participants to wait in line at any time (e.g., at information window, to apply for service, etc.)?
☐ Yes [GO TO 2.1] ☐ No [GO TO 3]

2.1 If yes, are there alternatives available for individuals whose physical or mental disabilities make it unduly difficult to stand or wait for an extended period of time (e.g., a means of holding someone’s place in line, staff available to assist people with disabilities, etc.)?
☐ Yes [GO TO 2.1A] ☐ No [GO TO 3]

2.1a If yes, please briefly describe the alternatives:

2.1b Can any staff offer these alternatives or must a request be approved by a designated staff member?
☐ Any staff may offer upon request
☐ Request must be approved by designated staff member
☐ Other, please name: ________________________________________________________

3. Does your Program, and/or the facility in which the program is located, have a policy that restricts animals?
☐ Yes [GO TO 3.1] ☐ No [GO TO SECTION E]
3.1 If yes, may this policy be modified to allow for service or companion animals used by people with disabilities (e.g., the guide dog of a person who is blind, or the cat of a person with post-traumatic stress syndrome)?
☐ Yes [GO TO 3.1A] ☐ No [GO TO SECTION E]

3.1a May any staff modify this policy or must a request be approved by a designated staff member?
☐ Any staff may offer upon request
☐ Request must be approved by designated staff member
☐ Other, please name: ________________________________

E. Grievance Policies & Procedures

1. Does your Program have a grievance procedure (i.e., a procedure for resolving complaints by the public alleging noncompliance with the ADA in any of your Program’s services, activities and/or benefits)?
☐ Yes [GO TO 1.1] ☐ No [GO TO SECTION F]

1.1 If yes, please briefly describe this procedure:

1.1a Is this procedure documented in written form?
☐ Yes ☐ No

1.2 Do you notify the public of the grievance procedure?
☐ Yes [GO TO 1.2A] ☐ No [GO TO 1.3]

1.2a If yes, what does the notice include? (Check all that apply.)
☐ Information about how to file a grievance
☐ Phone number to call to register the grievance
☐ TTY number to call to register the grievance
☐ A form to complete to register the grievance
☐ An address where to register the grievance in person
☐ Contact information to an ombudsperson or advocate
☐ Other, please name: ________________________________

1.2b How are Program applicants or participants notified of the grievance procedure? (Check all that apply.)
☐ Verbal explanation at service window
☐ Posted notice Program office
☐ Brochure or other distributed written material
☐ Recorded message
☐ Website
☐ Other, please name: ________________________________

1.3 Does your Program modify the grievance procedure for individuals whose disabilities prevent them from meeting the requirements of the procedure (e.g., providing an alternative to completing a complaint form)?
☐ Yes [GO TO 1.3a] ☐ No [GO TO 1.4]
1.3a If yes, is the procedure for requesting a modification included in the public grievance notice?

☐ Yes    ☐ No

1.4 Approximately how frequently is the grievance procedure used?

☐ Never
☐ Once every couple of years
☐ 1 - 10 x per year
☐ 11 - 20 x per year
☐ More than 20 x per year

1.5 Do staff members who make decisions on grievances receive training in the requirements of federal and state disability rights laws?

☐ Yes [GO TO 1.5A]    ☐ No [GO TO SECTION F]

1.5a If yes, please briefly describe the training provided:

1.5b How frequently is this training provided?

☐ At orientation
☐ Semi-annually
☐ Annually
☐ Bi-annually
☐ Other, please name: ________________________________

F. Emergency Policies, Procedures & Practices

1. Does the building or site that houses your program have emergency evacuation procedures?

☐ Yes [GO TO 1.1]    ☐ No [GO TO 2]

1.1 If yes, please briefly describe these procedures:

1.2 Are these procedures documented in written form?

☐ Yes    ☐ No

1.3 Do these evacuation procedures include specific provisions for evacuating people with disabilities?

☐ Yes [GO TO 1.3A]    ☐ No [GO TO 1.4]

1.3a If yes, please describe these provisions:

Vision impairment  Please describe _______________________
Hearing impairment  Please describe _______________________
Mobility impairment  Please describe _______________________
1.4 How are members of the public notified of the emergency evacuation procedures? (Check all that apply.)
☐ Verbal explanation
☐ Posted notice program office
☐ Brochure or other distributed written material
☐ Recorded message
☐ Not notified
☐ Other, please name: ____________________________

2. Is the building where your Program is located equipped with visual emergency alarms (e.g., flashing lights) in addition to audio alarms?
☐ Yes ☐ No

Comments for Section II:
Section III. Intensive ("Client") Contact

Who must complete this section? Complete this section if your Program has intensive and/or ongoing contact with the public. This includes all Programs that have applications and requirements for continued service such as mental health, job training or public benefits Programs, etc. This section should be completed in addition to (not instead of) Section II. If your Program does not have intensive, ongoing contact with the public, you may skip this section.

A Application Policies, Procedures & Practices

1. Does your Program have eligibility requirements (e.g., evidence of particular skills, mobility record of good tenancy, completion of a training program, hearing tests, agility requirements, etc.)?
   □ Yes [GO TO 1.1] □ No [GO TO 2]

   1.1 If yes, may these eligibility requirements be modified to accommodate individuals whose disabilities prevent them from meeting them?
   □ Yes [GO TO 1.1A] □ No [GO TO 2]

   1.1a If yes, are members of the public notified before they are enrolled in the Program that they may request modifications (i.e., are individuals who aren't already participants in your Program notified of your Program's modification procedures)?
   □ Yes [GO TO 1.1A1] □ No [GO TO 2]

   1.1a1 If yes, please briefly describe how these individuals are notified:

2. Where is the application for your Program available? (Check all that apply.)
   □ Program office(s)
   □ Community-based organization(s)
   □ Website
   □ Other, please name: __________________________

3. How may a member of the public apply to your Program? (Check all that apply)
   □ In person at Program office
   □ In person at community-based organization
   □ By authorized representative
   □ By mail
   □ By phone
   □ By TTY/TDD
   □ Through website
   □ Through home visit upon request
   □ Other, please name: __________________________
4. Is a member of your staff available to help those individuals who may require assistance in completing an application?
   □ Yes    □ No

5. Does your Program require documentation (e.g. birth certificate, driver's license, medical records, etc.) in order for an individual to participate or receive services?
   □ Yes [GO TO 5.1]    □ No [GO TO 6]

   5.1 If yes, does your staff provide any of the following services to assist an individual in obtaining required documentation? (Check all that apply.)
   □ Make phone calls to request/retrieve documentation
   □ Make photocopies of original documentation
   □ Obtain documentation directly (with signed release)
   □ Other, please name: ____________________________________________

   5.1a If you answered yes to any of the above, please describe the circumstances under which these services would be provided:

6. Does your Program prohibit service to individuals based on their illegal use of drugs?
   □ Yes [GO TO 6.1]    □ No [GO TO SECTION B]

   6.1 How do you determine whether an individual is currently using drugs illegally?
   □ Self-identification by individual
   □ Staff observation
   □ Staff interview
   □ Testing
   □ Records check
   □ Other, please name: ____________________________________________

B. General Service Policies, Procedures & Practices

1. Does your Program have staffed drop-in hours for potential applicants or program participants who may not have an appointment?
   □ Yes    □ No

2. Does your Program have a waiting room?
   □ Yes [GO TO 2.1]    □ No [GO TO 3]

   2.1 If yes, how are people who are waiting notified when it is their turn? (Check all that apply)
   □ Verbal announcement by receptionist/other staff
   □ Loudspeaker announcement
   □ Notice board or other visual display
   □ Individual contact by receptionist/other staff
   □ Other, please name: ____________________________________________
3. If a participant in your Program has a disability that requires a regular (as opposed to one time) modification of a policy, procedure or practice, is this information recorded in his/her file or must he/she make a new request at each visit?
   □ Recorded in file
   □ New request at each visit
   □ Other, please name: ________________________________

4. Does your Program have requirements that a person must meet in order to remain in the Program/continue to receive service (e.g. submit forms, attend meetings, complete assignments)?
   □ Yes [GO TO 4.1]  □ No [GO TO SECTION C]

   4.1 If yes, may these requirements be modified to accommodate individuals whose disabilities prevent them from meeting these requirements?
   □ Yes [GO TO 4.1A] □ No [GO TO SECTION C]

   4.1a If yes, please give one or two examples of recent modifications your Program has made:

C. Service Termination Policies, Procedures & Practices

1. Does your Program have service termination criteria?
   □ Yes [GO TO 1.1]  □ No [GO TO SECTION IV]

   1.1 If yes, please list criteria:

   1.2 Does the termination process include an effort to determine whether the cause for termination is related to the participant’s disability (e.g., client’s failure to call or appear for appointment was result of psychiatric crisis)?
   □ Yes [GO TO 1.2A] □ No [GO TO 1.3]

   1.2a If yes, please describe this effort:

   1.3 Are participants notified that their participation in the Program/service is going to be terminated before actual termination?
   □ Yes [GO TO 1.3A] □ No [GO TO 1.4]

   1.3a If yes, how are participants notified? (Check all that apply.)
   □ In-person at office
   □ Home visit by staff
   □ Mailed letter
   □ Phone call
   □ Other, please name: ________________________________
1.4 Does your Program have a process through which someone can appeal a service termination?
☐ Yes [GO TO 1.4A] ☐ No [GO TO SECTION IV]

1.4a If yes, is the appeal process explained in the termination notice?
☐ Yes [GO TO 1.4A1] ☐ No [GO TO SECTION IV]

1.4a1 If yes, what does the notice include? (Check all that apply.)
☐ Phone number to call to register the appeal
☐ TTY/TDD number to call to register the appeal
☐ A form to complete to register the appeal
☐ An address at which to register the appeal in person
☐ Contact information to an ombudsperson or advocate

Comments for Section III:
Section IV. Contracting

Who must complete this section? Complete this section if your Program awards and/or monitors contracts to agencies or organizations that provide services to the public. This includes Programs that contract work to community-based organizations through an RFP process. If your Program does not award and/or monitor contracts, you may skip this section.

1. Does your Request for Proposal/Qualification process include any of the following criteria for evaluating proposals?

   1.1 Potential contractor's history of providing service to people with disabilities?
   □ Yes  □ No

   1.2 Training of potential contractor's staff in serving people with disabilities?
   □ Yes  □ No

   1.3 Potential contractor's ability to modify services to accommodate people with disabilities (e.g., ability to provide additional time or assistance to participants with learning disabilities, established relationships with agencies that provide specialized services to people with disabilities, etc.); to provide written materials in alternative formats (e.g. Braille, audiotape, large print, floppy disk, email, website, etc; and to use auxiliary aids or services (e.g. sign language interpreters, captioning, readers, etc)?
   □ Yes  □ No

   1.4 Whether or not a potential contractor has a written grievance procedure (i.e., a procedure for resolving complaints by the public alleging noncompliance with the ADA in any of the contractor's services, activities and/or benefits)?
   □ Yes  □ No

2. Are your Project Managers/Contract Managers trained in recognizing programmatic and communication access problems?
   □ Yes [GO TO 2.1]  □ No [GO TO 3]

   2.1 If yes, please briefly describe training provided:

   2.2 How frequently is training provided?
   □ At orientation
   □ Semi-annually
   □ Annually
   □ Bi-annually
   □ Other, please name: ____________________________


21
3. In their regular contract monitoring process, do your Program Officers/Contract Monitors monitor for any of the following criteria?

3.1 Whether contractor notifies the public about how to request modifications or accommodations including written material in alternative formats or auxiliary aids and services?
☐ Yes ☐ No

3.2 Training of contractor's staff in serving people with disabilities?
☐ Yes ☐ No

3.3 Whether contractor has a written grievance procedure?
☐ Yes ☐ No

3.4 Whether the contractor has designated staff who are trained in resolving grievances?
☐ Yes ☐ No

4. How frequently are Programs monitored?
☐ Never
☐ Semi-annually
☐ Annually
☐ Bi-annually
☐ Other, please name: ____________________________

Comments for Section IV:
Section V. Purchasing

Who must complete this section? Complete this section if you oversee purchasing for your Program or other Programs. Purchasing includes purchasing of computer systems, equipment, etc. If you do not oversee purchasing for your own or other Programs, you may skip this section.

1. Do you purchase computer equipment or applications for use by the public?
   ☐ Yes [GO TO 1.1] ☐ No [GO TO 2]

   1.1 If yes, do you make an effort to research state of the art products that may provide greater accessibility for people with disabilities?
   ☐ Yes [GO TO 1.1A] ☐ No [GO TO 2]

      1.1a If yes, please describe this effort:

      1.1b How frequently does the additional cost of accessible equipment or products prohibit purchasing them?
      ☐ Never
      ☐ Occasionally
      ☐ Often

2. Do you purchase systems or equipment (e.g. new crosswalk signals, medical examining tables, kiosk information systems, computer workstations, etc.) for use by the public or internally?
   ☐ Yes [GO TO 2.1] ☐ No

   2.1 If yes, do you make an effort to research state of the art products that may provide greater accessibility for people with disabilities?
   ☐ Yes [GO TO 2.1A] ☐ No [GO 3]

      2.1a If yes, please describe this effort:

      2.1b How frequently does the additional cost of accessible equipment or products prohibit purchasing them?
      ☐ Never
      ☐ Occasionally
      ☐ Often

3. When you put a large equipment or a large system out to bid, does your RFP/Q have a standard component about accessibility features (i.e., do you request vendors to show how their equipment may be used by people with disabilities, such as those with mobility impairments, or who are blind)?
   ☐ Yes [GO TO 3.1A] ☐ No [GO SECTION VI]
3.1a If yes, please describe this standard component:

Comments for Section V:
Section VI. Staff Training & Technical Assistance

Who must complete this section? All programs must complete this section. Note: In these questions, the term "staff" refers to all full-time employees (including management/supervisory, client/customer service, clerical, etc.) who work for your Program.

1. Do members of your staff receive information on any of the following? (Check all that apply.)
   - Americans with Disabilities Act (ADA)
   - Fair Housing Amendments Act
   - Section 504 of the Rehabilitation Act (for federally funded programs)
   - State Disability Laws

   1.1 If yes, does this information provide a general overview of the regulations, specific information on how the regulations relate to the services provided by the Program, or both?
   - General
   - Specific
   - Both

   1.2 How frequently is training provided?
   - At orientation
   - Semi-annually
   - Annually
   - Bi-annually
   - Other, please name: __________________________

   1.3 Do all members of your staff receive the above training or only staff at specific levels/classifications?
   - All staff
   - Management/supervisory staff
   - Client contact/customer service staff
   - Clerical/administrative support staff
   - Other, please name: __________________________

2. Do members of your staff receive training in working with people who have: (Check all that apply.)
   - Psychiatric disabilities?
   - Learning or cognitive disabilities?
   - Speech impairments?
   - Hearing impairments?
   - Visual impairments?
   - Mobility impairments?
   - Immune system disorders (such as HIV, Multiple Chemical Sensitivities, Lupus, etc.)?
2.1 If yes, please briefly describe the training provided:

2.2 How frequently is training provided?
- At orientation
- Semi-annually
- Annually
- Bi-annually
- Other, please name: ____________________________________

2.3 Do all members of your staff receive the above training or only staff at specific levels/classifications?
- All staff
- Management/supervisory staff
- Client contact/customer service staff
- Clerical/administrative support staff
- Other, please name: ____________________________________

3. Do members of your staff receive training in how to use auxiliary aids and services, (e.g., sign language interpreters, live computer captioning, audio narration devices, etc.)?
- Yes [GO TO 3.1]
- No [GO TO 4]

3.1 If yes, please briefly describe training provided:

3.2 How frequently is training provided?
- At orientation
- Semi-annually
- Annually
- Bi-annually
- Other, please name: ____________________________________

3.3 Do all members of your staff receive the above training or only staff at specific levels/classifications
- All staff
- Management/supervisory staff
- Client contact/customer service staff
- Clerical/administrative support staff
- Other, please name: ____________________________________

4. Does your Program have an ADA “Go To Person” (either dedicated to your Program or shared with other Programs in your department)?
- Yes [GO TO 4.1]
- No [GO TO 5]
4.1 If yes, please provide the following:
Name:
Title:
Phone:
Fax:
E-mail:

4.1a Which of the following issues does this ADA "Go To Person" handle? (Check all that apply.)
- [ ] Architectural access issues
- [ ] Employment access issues
- [ ] Communication access issues
- [ ] Programmatic access issues
- [ ] Other, please name: ________________________________

4.2 If you have more than one ADA "Go To Person", please provide the following additional information for the second ADA "Go To Person":
Name:
Title:
Phone:
Fax:
E-mail:

4.2a If yes, which of the following does this ADA "Go To Person" handle? (Check all that apply.)
- [ ] Architectural access issues
- [ ] Employment access issues
- [ ] Communication access issues
- [ ] Programmatic access issues
- [ ] Other, please name: ________________________________

5. Would your staff benefit from training and/or technical assistance in providing Programmatic and communication access?
- [ ] Yes [GO TO 5.1]
- [ ] No [GO TO 6]

5.1 If yes, what kind of training or technical assistance would be helpful? (Check all that are needed/of interest.)
- [ ] Assistance developing policies and procedures
- [ ] Training in how to work w/ people with disabilities
- [ ] Training in legal requirements
- [ ] Training in providing accommodations
- [ ] Resources for alternative formats & auxiliary aids
- [ ] Other, please name: ________________________________
6. Does your Program use the services of contract employees or consultants (e.g., security guards, janitors, etc.)?
   □ Yes [GO TO 6.1]   □ No [GO TO SECTION VII]

6.1 If yes, does your Program have a procedure that contract employees or consultants are to follow in assisting people with disabilities (e.g., contacting a member of your staff, providing certain accommodations, etc.)?
   □ Yes [GO TO 6.1A]   □ No [GO TO 6.2]

6.1a If yes, please describe this procedure:

6.2 Does the contract require that employees receive training in interacting with people with disabilities?
   □ Yes:   □ No

Comments for Section VI:
Section VII – Additional Accessibility

1. Are there any physical/structural accessibility issues that your Program uses?
   □ Yes           □ No
   Please describe.

2. Are there any other barriers to our County programs and services that have not already been noted?
   □ Yes           □ No
   Please describe.

End of Survey

Thank you for completing the ADA Survey. We would like to hear from you! Before you submit your survey, please write any comments here:

Please send your survey to:
Sandra Sroka, ADA Liaison
County Center
501 E. Kennedy Blvd., 24th Floor
Tampa, FL 33602