



TOWN OF OAK BLUFFS

POST OFFICE BOX 1327, OAK BLUFFS, MA 02557
TELEPHONE: 508 693 3554

MAY 1, 2019

AMERICANS WITH DISABILITIES ACT SURVEY FOR ISLAND RESIDENTS, INDIVIDUALS WITH DISABILITIES OR ANY INTERESTED INDIVIDUALS THAT WISH TO PARTICIPATE

The Town of Oak Bluffs is seeking input from Island residents, individuals with disabilities and the general public, to help the Town of Oak Bluffs enhance accessibility to its facilities, programs, services and events.

An online format is available from the Town's website: oakbluffisma.gov
Click on the [Americans with Disabilities Act Survey](#) link on the homepage and select the appropriate survey.

First Name (Optional)

Last Name (Optional)

Date (Optional)

Address (Optional)

Phone (Optional)

E-mail address (Optional)

Name of Town of Oak Bluffs facility or location, or type of program or service for which you are providing input:

Are there other Oak Bluffs' facilities that you would like to comment on?

1. What is your relationship to the Town of Oak Bluffs? (check all that apply)

Resident

Visitor

Contractor

Employee

Participant of a Program, Service or Activity

Other

If other, please describe. _____

2. Check all programs, services or activities in which you participate at the facility, site or location.

- | | |
|--|---|
| <input type="checkbox"/> Classes | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Meetings | <input type="checkbox"/> Sporting Events |
| <input type="checkbox"/> Seminars | <input type="checkbox"/> Work (Volunteer) |
| <input type="checkbox"/> Work (Employee) | |
| <input type="checkbox"/> Other | |

If other, please describe. _____

3. Do you know who to contact if you need assistance, have a concern or complaint, or need an accommodation to access a facility, service or event?

- Yes
- No

If yes, who would you contact?

4. Have you ever requested an accommodation for a disability from the Town of Oak Bluffs?

- Yes
- No
- Not applicable
- Don't know

5. If an accommodation was requested, was your accommodation made by the Town of Oak Bluffs?

- Yes
- No
- Not applicable
- Don't know

If yes, what accommodations were made? If no, were you given a reason why it was not provided?

6. Have you experienced any barriers, non-accessible areas, or non-accessible programs? (Examples: no accessible parking spaces, difficulty reaching an accessible entrance, steep ramps, uneven sidewalks, need for assistive listening device, large print, etc.)

- Yes
- No
- Not applicable
- Don't know

If yes, please describe.

7. Have you attended any special events in the Town of Oak Bluffs?

Yes

No

If yes, did you encounter any barriers to accessibility?

8. Is accessible seating provided for individuals with disabilities at meetings, classes, programs, etc. held at the facility?

Yes

No

Not applicable

Don't know

If no, please describe.

9. Are you aware of any programs, services or activities that are not accessible to individuals with disabilities?

Yes

No

Not applicable

Don't know

If yes, please describe.

10. Are you aware of any areas or elements of the facility that are not accessible to individuals with disabilities?

Yes

No

Not applicable

Don't know

If yes, please describe.

11. Is information provided regarding accommodations, auxiliary aids (such as assistive listening systems, interpreters, alternate formats, specialized equipment, or assisted services, etc.?)

- Yes
- No
- Not applicable
- Don't know

Please describe.

12. Is there adequate directional and informational signage provided at the facility?

- Yes
- No
- Not applicable
- Don't know

If no, please describe.

13. If you have requested auxiliary aids, an interpreter or specialized equipment, was your request accommodated?

- Yes
- No
- Not applicable
- Don't know

If no, please describe.

14. Has the attitude of the staff of the Town of Oak Bluffs towards you or someone you know with a disability been generally helpful, supportive, positive and proactive in solving accessibility issues?

- Yes
- No
- Not applicable
- Don't know

Please describe.

15. Other comments:

16. What do you feel is the highest priority in the Town of Oak Bluffs' Accessibility Plan?

Please return this survey by June 30, 2019 to:

Wendy Brough ADA/504 Coordinator
Town of Oak Bluffs
Mail: PO Box 1327, Oak Bluffs, MA 02557
Email: wbrough@oakbluffsma.gov
Drop Off: Board of Selectmen's or Town Clerk's Office – Oak Bluffs Town Hall
Phone: 508 - 693 - 3554 ext: 149

You may also return the completed survey to:

Barbara Thorpe
Disability Access Consultants, LLC (DAC)
Mail: 2862 Olive Highway, Suite D, Oroville, CA 95966
Email: bthorpe@dac-corp.com
Phone: 530 – 533 – 3300

For all inquiries or for additional copies of the survey, in hard copy or electronic format, contact either Wendy Brough (ADA/504 Coordinator) or Barbara Thorpe (DAC, LLC).

Thank you for your input!