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What Works? Implementing Section 503 Survey Text and Flow

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September, 2017

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What Works? Implementing Section 503

Survey Text and Flow

Project Partners:





DirectEmployers

Survey Landing Page

Survey Landing Page: http://www.yti.cornell.edu/survey/YTI Survey dates: September 7 to 28, 2017; extended to Oct 31, 2017

WHO should complete this survey? Representatives of organizations that are federal contractors, specifically human resources, compliance, or legal professionals who know about their organization's efforts to implement the recent regulations for Section 503 of the Rehabilitation Act.

WHAT is asked in this survey? Participants will be asked to anonymously provide some information about their organization.

- A. Characteristics of your organization
- B. Affirmative action goals/targets related to employing individuals with disabilities
- C. Use of the Voluntary Self-Identification Form to collect disability status information
- D. Practices that are working and challenges with Section 503 implementation

This information will be compiled into an aggregated report, and organization names or individual information will NOT be shared.

WHEN does this survey take place? The survey will be open from September 7 to 29, 2017. It should take approximately 15 minutes or less complete.

WHY should I participate? The results will inform the design of tools, resources, and other assistance to support contractors in complying with Section 503.

PARTICIPANTS WILL RECEIVE ACCESS TO THE FOLLOWING PRODUCTS:

- 1. **FINAL REPORT** on study findings.
- 2. **ACCESS TO BENCHMARKABILITY,** Cornell's online benchmarking tool on workplace disability inclusion.
- 3. **FREE ONLINE COURSES ELIGIBLE FOR SIX HRCI CREDITS!** A set of six one-hour online courses on workplace disability inclusion, designed by Cornell University, will be available from October 3 to December 31.

At the end of the survey, you can provide your name and email address if you wish to receive access to the online courses and a report of this study's findings. Your name and email will not be linked to your survey responses.

MORE INFORMATION: The survey is voluntary and you may skip most questions if you do not wish to answer. With that said, a few of the questions do require an answer so that we can

make the survey more relevant to you. Your responses will never be linked to your name and email address (if you choose to provide them). Your responses will be anonymous, and any reports or products that are developed from the survey findings will not identify individuals or their organizations.

We do not anticipate any risks to you for participating in this study other than those encountered in day-to-day life. There is no direct benefit to you or your organization. If you have questions: Sarah von Schrader, the researcher conducting this study, can be reached at sv282@cornell.edu. or 1-607-254-8088. If you have any questions or concerns regarding your rights as a subject in this study, you may contact the Cornell Institutional Review Board (IRB) at 1-607-255-5138 or access their website at http://www.irb.cornell.edu. You may also report your concerns or complaints anonymously through Ethicspoint (www.hotline.cornell.edu) or by calling toll free at 1-866-293-3077. Ethicspoint is an independent organization that serves as a liaison between Cornell University and the person bringing the complaint so that anonymity can be ensured.

TO LEARN MORE, contact Sarah von Schrader at sv282@cornell.edu.

Survey Items

What Works? Implementing Section 503

End of Block: Introduction and screener

If you are employed by an organization that is a federal contractor and you are knowledgeable about your organization's efforts to implement the recently revised regulations of Section 503 of the Rehabilitation Act (effective as of March 2014), we would like your input for a research study on the initial impact of the recent regulations.

At the end of the survey, you can provide your name and email address if you wish to receive access to the online courses and a report of this study's findings. Your name and email will not be linked to your survey responses.

The survey is voluntary and you may skip most questions if you do not want to answer. A few questions do require an answer so that we can make the survey more relevant to you. Your responses will never be linked to your name and email address (If you choose to provide them). Your responses will be anonymous, and any reports or products that are developed from the survey findings will not identify individuals or their organizations.

| Please click "Next" if you are willing to participate in the survey. |
|---|
| Q2 A. Characteristics of your organization and your role |
| We would like to know what kind of organization you are answering for as you complete this survey. Please note: only federal contractors and subcontractors who must comply with Section 503 of the Rehabilitation Act are eligible to participate. |
| Q3 Does your organization have federal contracts or subcontracts of \$10,000 or more? |
| O Yes (1) |
| O No (2) |
| O Don't know (3) |
| Skip To: End of Block If Q3 = No (2) |
| Skip To: End of Block If Q3 = Don't know (3) |

Start of Block: Characteristics of organization

| Q4 How long has your organization been a federal contractor? | |
|---|--|
| O Less than 1 year (1) | |
| O 1-3 years (2) | |
| O More than 3 years (3) | |
| O Don't know (4) | |
| | |
| Q5 Approximately, what percent of your organization's total revenue comes from federal contracts? | |
| O 0-24% (1) | |
| O 25-49% (2) | |
| O 50-74% (3) | |
| O 75-100% (4) | |
| O Don't know (5) | |
| O Not applicable (6) | |
| | |

(Categories are based on the North American Industry Classification System (NAICS)): O Agriculture, Forestry, Fishing and Hunting (1) Mining, Quarrying, and Oil and Gas Extraction (2) Utilities (3) Oconstruction (4) Manufacturing (5) Wholesale Trade (6) Retail Trade (7) Transportation and Warehousing (8) O Information (9) Accommodation and Food Services (10) Finance and Insurance (11) Real Estate and Rental and Leasing (12) Professional, Scientific, and Technical Services (13) Management of Companies and Enterprises (14) Administrative and Support and Waste Management and Remediation Services (15) Educational Services (16) Health Care and Social Assistance (17) Arts, Entertainment, and Recreation (18)

Q6 Which of the following best describes your organization's industry?

| Other Services (except Public Administration) (19) |
|--|
| O Public Administration (20) |
| Q7 Is your organization in any of the following sectors (select all that apply)? "High-tech" sector (i.e. in an industry having a high concentration of workers in STEM (Science, Technology, Engineering, and Mathematics) occupations (1) |
| Defense/Aerospace sector (2) |
| None of these (3) |
| Q8 Which best describes your organization: |
| Single establishment organization, i.e., doing business at only one establishment in one location (1) |
| Multi-establishment organization, i.e., doing business at more than one establishment (2) |
| Display This Question: |
| If Which best describes your organization: = 2 |
| Q9 Do you work for the headquarters of your organization? |
| O Yes (1) |
| O No (2) |

| Display This Question: |
|---|
| If Which best describes your organization: = 2 |
| Q10 Does your organization maintain Establishment–based affirmative action plans (AAPs) or Functional affirmative action plans (FAAPs)? |
| Establishment-based action plans (AAPs) (1) |
| O Functional affirmative action plans (FAAPs) (2) |
| O Both Establishment-based and Functional affirmative action plans (3) |
| O Don't know (4) |
| |
| Display This Question: |
| If Which best describes your organization: = 2 |
| Q11 How many annual affirmative action plans are maintained by your organization? |
| O 1 plan (1) |
| O 2-4 plans (2) |
| O 5-24 plans (3) |
| O 25-49 plans (4) |
| O 50-99 plans (5) |
| O 100-199 plans (6) |
| O 200 or more plans (7) |
| O Don't know (8) |
| Page Break |

| Display This Question: |
|--|
| If Which best describes your organization: = 2 |
| Q12 The remainder of this survey asks questions about disability-related goals and practices. Because these may vary across different units within an organization, please respond for the unit with which you are most closely aligned . If the goals and practices are relatively consistent across the organization, you may also respond for your organization overall. |
| Display This Question: |
| If Which best describes your organization: = 1 |
| Q13 The remainder of this survey asks questions about disability-related goals and practices. Please select "organization" to continue with the survey. |
| [The options that appear on the following items are based on responses to Q14 and Q10] |
| Q14 I will be responding for my |
| O establishment (1) |
| O functional/business unit (2) |
| O organization (3) |
| Page Break ———————————————————————————————————— |

| | sploy? |
|-----|---|
| | O-14 (1) |
| | O 15-49 (2) |
| | O 50-99 (3) |
| | O 100-499 (4) |
| | O 500-1,999 (5) |
| | O 2,000-4,999 (6) |
| | O 5,000-19,999 (7) |
| | O 20,000-99,999 (8) |
| | O 100,000+ (9) |
| | |
| Dis | play This Question: |
| | If I will be responding for my != 3 |
| | And Which best describes your organization: = 2 |

| O-14 (1) |
|---------------------|
| O 15-49 (2) |
| O 50-99 (3) |
| O 100-499 (4) |
| O 500-1,999 (5) |
| O 2,000-4,999 (6) |
| O 5,000-19,999 (7) |
| O 20,000-99,999 (8) |
| O 100,000+ (9) |
| |

Q16 Approximately how many people does your organization employ overall?

| End of Block: Characteristics of organization | |
|---|--|
| Start of Block: Characteristics of respondent | |
| You and your role in your \${Q14/ChoiceGroup/SelectedChoices} Please tell us a little more about your position within your \${Q14/ChoiceGroup/SelectedChoices}. | |
| Q18 What is your role? (check all that apply) | |
| President/Owner (1) | |
| Vice-President (2) | |
| Director (3) | |
| Assistant Director (4) | |
| Manager (5) | |
| Assistant Manager (6) | |
| Supervisor (7) | |
| Administrative Assistant (8) | |
| Other (please specify) (9) | |
| | |

| Q19 What is your job function? (check all that apply) |
|---|
| Administrative (1) |
| EEO/Affirmative Action (2) |
| Benefits (3) |
| Compensation (4) |
| Compliance (5) |
| Disability (6) |
| Diversity (7) |
| Employee Relations (8) |
| Health/Safety/Security (9) |
| Human Resources (HR) (10) |
| Labor/Industrial Relations (11) |
| Legal (12) |
| Organizational Development (13) |
| Talent Acquisition/Recruitment (14) |
| Training and Development (15) |
| Other (please specify) (16) |
| |

| Q20 How many years have you been with your \${Q14/ChoiceGroup/SelectedChoices}? | |
|---|--|
| C Less than 1 year (1) | |
| O 1 year (2) | |
| O 2 years (3) | |
| O 3 years (4) | |
| O 4 years (5) | |
| O 5 years (6) | |
| O 6 years (7) | |
| O 7 years (8) | |
| O 8 years (9) | |
| O 9 years (10) | |
| O 10 years (11) | |
| O More than 10 years (12) | |
| | |

| Q21 What state(s) is your \${Q14/ChoiceGroup/SelectedChoices} located in? (Select one or more. To select more than one state, press the control button while making selections) |
|---|
| Nationwide (1) |
| Alabama (2) |
| Alaska (3) |
| Arizona (4) |
| Arkansas (5) |
| California (6) |
| Colorado (7) |
| Connecticut (8) |
| Delaware (9) |
| District of Columbia (10) |
| Florida (11) |
| Georgia (12) |
| Hawaii (13) |
| Idaho (14) |
| Illinois (15) |
| Indiana (16) |
| Olowa (17) |

| Kansas (18) |
|---------------------|
| Kentucky (19) |
| Louisiana (20) |
| Maine (21) |
| Maryland (22) |
| Massachusetts (23) |
| Michigan (24) |
| Minnesota (25) |
| Mississippi (26) |
| Missouri (27) |
| Montana (28) |
| Nebraska (29) |
| Nevada (30) |
| New Hampshire (31) |
| New Jersey (32) |
| New Mexico (33) |
| New York (34) |
| North Carolina (35) |

| North Dakota (36) |
|-----------------------|
| Ohio (37) |
| Oklahoma (38) |
| Oregon (39) |
| Pennsylvania (40) |
| Rhode Island (41) |
| South Carolina (42) |
| South Dakota (43) |
| Tennessee (44) |
| Texas (45) |
| Utah (46) |
| Vermont (47) |
| Virginia (48) |
| Washington (49) |
| West Virginia (50) |
| Wisconsin (51) |
| Wyoming (52) |
| U.S. Territories (53) |
| |

| Display This Question: |
|---|
| If I will be responding for my = 1 |
| Or Which best describes your organization: = 1 |
| Q22 Which of the following best describes the location of your \${Q14/ChoiceGroup/SelectedChoices}? |
| O Rural (1) |
| O Suburban (2) |
| Ourban (3) |
| Page Break ———————————————————————————————————— |

End of Block: Characteristics of respondent

Start of Block: Goals

Q23 B. Affirmative action goals/targets related to employing individuals with disabilities

The recent Section 503 regulations established a utilization goal of 7%. We are interested in this and other disability-related targets that have been set by your \${Q14/ChoiceGroup/SelectedChoices}.

Q24 Does your \${Q14/ChoiceGroup/SelectedChoices} have targets related to the following?

| | No Target(s) Set (1) | Informal Target(s) (Not well defined) (2) | Specific Target(s) (e.g., numbers, timelines) (3) | Specific Target(s) with Plans in Place (e.g., assigned tasks, roles, responsibilities) (4) |
|---|-------------------------|---|---|--|
| Meeting/exceeding 7% representation of people with disabilities (1) | 0 | 0 | 0 | 0 |
| Increasing disability self- identification rate (2) | 0 | 0 | 0 | 0 |
| Increasing recruitment of people with disabilities (3) | 0 | 0 | 0 | 0 |
| Increasing hiring of people with disabilities (4) | 0 | 0 | 0 | 0 |
| Increasing retention of employees with disabilities (5) | 0 | 0 | 0 | 0 |
| Increasing advancement of employees with disabilities (6) | 0 | 0 | 0 | 0 |

[The following items only appear based on responses to Q24]

Q25 Did the recent **Section 503 regulations** that became effective in March 2014 **influence your target(s)** related to the following?

| | Yes (1) | No (2) |
|---|---------|--------|
| Meeting/exceeding 7% representation of people with disabilities (1) | 0 | 0 |
| Increasing disability self- identification rate (2) | | 0 |
| Increasing recruitment of people with disabilities (3) | 0 | 0 |
| Increasing hiring of people with disabilities (4) | 0 | 0 |
| Increasing retention of employees with disabilities (5) | 0 | 0 |
| Increasing advancement of employees with disabilities (6) | 0 | 0 |
| | | |

[The following items only appear based on responses to Q24]

Q26 Why has your \${Q14/ChoiceGroup/SelectedChoices} not set targets in the following areas?

| | Satisfied with performance in this area (1) | Not a priority at this time (2) | Other Reason (3) |
|---|---|---------------------------------|------------------|
| Meeting/exceeding 7% representation of people with disabilities (1) | 0 | 0 | 0 |
| Increasing disability self-identification rate (2) | 0 | 0 | 0 |
| Increasing recruitment of people with disabilities (3) | 0 | 0 | 0 |
| Increasing hiring of people with disabilities (4) | 0 | 0 | 0 |
| Increasing retention of employees with disabilities (5) | 0 | 0 | 0 |
| Increasing advancement of employees with disabilities (6) | 0 | 0 | 0 |
| | 1 | | |

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Display This Question:

If Why has your \${q://QID13/ChoiceGroup/SelectedChoices} not set targets in the following areas? [3] (Count) >= 1

| Q27 You indicated that there were other reasons for not setting targets in the areas listed, please explain. |
|--|
| |
| |
| |
| Q28 Overall, to what extent have your affirmative action goals/targets related to employing people with disabilities changed as a result of recent Section 503 regulations? |
| O To a great extent (4) |
| O Somewhat (3) |
| O Very little (2) |
| O Not at all (1) |
| End of Block: Goals |
| Start of Block: Self-ID |

Q29

C. Use of the Voluntary Self-Identification Form to collect disability status information

Under the Section 503 regulations, federal contractors must invite *employees* (every 5 years) and *applicants* (at pre- and post-offer) to voluntarily self-identify as a person with a disability. This section asks about the use of the Voluntary Self-Identification of Disability Form. We refer to the form as the "self-identification form" in the questions that follow.

| Q30 Has your \${Q14/ChoiceGroup/SelectedChoices} used the self-identification form to collect data on disability status? O Yes (1) O No (2) |
|--|
| [Rest of block only appears if Q30 = 1] |
| Q31 Has the self-identification form been integrated into your human resources or other appropriate system? |
| O Yes (1) |
| O No (2) |
| |
| Q32 When was the last time you reviewed data on self-identification rates? |
| O Within the last 3 months (1) |
| 3-6 months (2) |
| O 6-12 months (3) |
| O More than a year ago (4) |
| O Never (5) |
| |

| Q33 Of the employees at your \${Q14/ChoiceGroup/SelectedChoices}, approximately what percentage have completed the self-identification form ? |
|---|
| O% (1) |
| O 1-10% (2) |
| O 11-20% (3) |
| O 21-30% (4) |
| O 31-40% (5) |
| O 41-50% (6) |
| O 51-60% (7) |
| O 61-70% (8) |
| O 71-80% (9) |
| O More than 80% (10) |
| O Data not available (11) |
| O Don't know (12) |
| |

| percentage indicated that they have a disability? |
|---|
| O 0% (1) |
| O 1% (2) |
| O 2% (3) |
| O 3% (4) |
| O 4% (5) |
| O 5% (6) |
| O 6% (7) |
| O 7% (8) |
| O More than 7% (9) |
| O Data not available (10) |
| O Don't know (11) |
| |

Q34 Of employees who have completed the self-identification form, approximately what

Q35 Does your \${Q14/ChoiceGroup/SelectedChoices} use (or plan to use) the disability self-identification data to evaluate the following?

| | Yes, currently evaluating (1) | Plan to evaluate in next 12 months (2) | No plans to evaluate (3) |
|---|-------------------------------|--|--------------------------|
| Progress toward 7% utilization goal (1) | 0 | 0 | 0 |
| Success of outreach/recruitment efforts (2) | 0 | 0 | 0 |
| Progress in hiring (3) | 0 | 0 | 0 |
| Progress in retention (4) | \circ | 0 | \circ |
| Progress in advancement (5) | 0 | 0 | 0 |
| Other (please specify) (6) | 0 | 0 | 0 |
| | | | |

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| Q36 How does your \${Q14/ChoiceGroup/SelectedChoices} encourage applicants and current employees to self-identify on the self-identification form? (Select all that apply). |
|---|
| Communication from organizational leaders to employees about the purpose of self-identification (1) |
| Spotlighting successful employees with disabilities (2) |
| Annual communication to employees encouraging self-identification (3) |
| Formal self-identification campaign (4) |
| Making self-identification form part of annual open enrollment process (5) |
| Making self-identification form available when employees update personal information (6) |
| Other practice not listed above (please specify) (7) |
| Other practice not listed above (please specify) (8) |
| None of these (9) |
| Skip To: End of Block If Q36 = None of these (9) |
| Page Break ———————————————————————————————————— |

[The following items only appear based on responses to Q36]

Q37 Please indicate how effective you think each of the following strategies to encourage self-identification has been.

| | Extremely effective (5) | Very effective (4) | Moderately effective (3) | Slightly effective (2) | Not effective at all (1) |
|---|-------------------------|--------------------------|--------------------------------|------------------------------|--------------------------------|
| Communication from organizational leaders to employees about the purpose of self-identification (1) | 0 | 0 | 0 | 0 | 0 |
| Spotlighting employees with disabilities who have self-identified (2) | 0 | 0 | 0 | 0 | 0 |
| Annual communication to employees encouraging self- identification (3) | 0 | 0 | 0 | 0 | 0 |
| Formal self-identification campaign (4) | 0 | 0 | 0 | 0 | \circ |
| Making self-identification form part of annual open enrollment process (5) | 0 | 0 | 0 | 0 | 0 |
| Making self-identification form available when employees update personal information (6) | 0 | 0 | 0 | 0 | 0 |
| Other practice: \${Q36/ChoiceTextEntryValue/7} (7) | 0 | 0 | 0 | 0 | 0 |
| Other practice: \${Q36/ChoiceTextEntryValue/8} (8) | 0 | 0 | 0 | 0 | 0 |
| | I | | | | |

End of Block: Self-ID

Start of Block: Practices

Q38 D. Practices that are working, challenges that remain

In this section, we would like to better understand if your

| Q39 Recruitment practices | | |
|---|---------------------------------|------------------------------|
| Does your \${Q14/ChoiceGroup/Solace? | relectedChoices} currently have | e the following practices in |
| | Yes (1) | No (2) |
| Partner with community organizations that provide employment services to people with disabilities (1) | 0 | 0 |
| Post positions on disability- focused job boards (2) | 0 | 0 |
| Use federal/state/local government training and/or placement programs (3) | 0 | 0 |
| Participate in internships or similar programs that target people with disabilities. (4) | 0 | 0 |
| Partner with disability services offices at colleges and universities (5) | 0 | 0 |
| Ensure that online application systems are accessible (6) | | 0 |

[The following items only appear based on responses to Q39]

Q40 Recruitment practices (cont.)

How did the **Section 503 regulations** that became effective in March of 2014 **impact the following practices** in your \${Q14/ChoiceGroup/SelectedChoices}?

| | Practice was initiated (4) | Practice was expanded (3) | Practice was scaled back (2) | Practice was not impacted (1) |
|---|----------------------------|---------------------------|------------------------------|-------------------------------|
| Partner with community organizations that provide employment services to people with disabilities (1) | 0 | 0 | 0 | 0 |
| Post positions on disability-focused job boards (2) | 0 | 0 | 0 | 0 |
| Use federal/state/local government training and/or placement programs (3) | 0 | 0 | 0 | 0 |
| Participate in internships or similar programs that target people with disabilities. (4) | 0 | 0 | 0 | 0 |
| Partner with disability services offices at colleges and universities (5) | 0 | 0 | 0 | 0 |
| Ensure that online application systems are accessible (6) | 0 | 0 | 0 | 0 |

[The following items only appear based on responses to Q39]

Q41 As a result of the **Section 503 regulations** that became effective in March of 2014, does your \${Q14/ChoiceGroup/SelectedChoices} plan to initiate the following practices in the next 12 months?

| | Plan to initiate (1) | No plans to initiate (2) |
|--|----------------------|--------------------------|
| Partner with community organizations that provide employment services to people with disabilities (1) | 0 | 0 |
| Post positions on disability- focused job boards (2) | | 0 |
| Use federal/state/local government training and/or placement programs (3) | | 0 |
| Participate in internships or similar programs that target people with disabilities. (4) | 0 | 0 |
| Partner with disability services offices at colleges and universities (5) | 0 | 0 |
| Ensure that online application systems are accessible (6) | 0 | 0 |
| 042 What recruiting efforts (not neffective in recruiting individuals Please provide any detail that ma | with disabilities? | |
| | | |
| | | |

What Works? Implementing Section 503 Sarah von Schrader, sv282@cornell.edu

| Page Break — | | |
|--|----------------------------------|------------------------------------|
| Q43 Communication and training | g practices | |
| Does your \${Q14/ChoiceGroup and training practices in place? | /SelectedChoices} currently have | the following communication |
| 3 Francisco III Francisco | Yes (1) | No (2) |
| Include disability in organizational EEO statement (1) | 0 | 0 |
| Implement internal communication campaigns related to disability (2) | 0 | 0 |
| Train recruiters on disability issues (3) | \circ | |
| Train supervisors on disability issues (4) | 0 | |
| Conduct disability awareness training for employees (5) | 0 | |
| ' | | |

[The following items only appear based on responses to Q43]

Q44 Communication and training practices (cont.)

How did the **Section 503 regulations** that became effective in March of 2014 **impact the following practices** in your \${Q14/ChoiceGroup/SelectedChoices}?

| | Practice was initiated (4) | Practice was expanded (3) | Practice was scaled back (2) | Practice was not impacted (1) |
|--|----------------------------|---------------------------|------------------------------|-------------------------------|
| Include disability in organizational EEO statement (1) | 0 | 0 | 0 | 0 |
| Implement internal communication campaigns related to disability (2) | 0 | 0 | 0 | 0 |
| Train recruiters on disability issues (3) | 0 | 0 | 0 | 0 |
| Train supervisors on disability issues (4) | 0 | 0 | 0 | 0 |
| Conduct disability awareness training for employees (5) | 0 | 0 | 0 | |

[The following items only appear based on responses to Q43]

Q45 As a result of the **Section 503 regulations** that became effective in March of 2014, does your \${Q14/ChoiceGroup/SelectedChoices} plan to initiate the following practices in the next 12 months?

| ove) |
|------|
| |

Q47 Accommodation and networking practices

Does your \${Q14/ChoiceGroup/SelectedChoices} currently have the following **accommodation and networking** practices in place?

| | Yes (1) | No (2) |
|--|---------|--------|
| Have formal process for accommodation (1) | 0 | 0 |
| Designate budget to fund accommodations (2) | 0 | 0 |
| Offer mentoring programs (3) | \circ | 0 |
| Have disability-focused employee resource groups (4) | 0 | 0 |
| | | |
| Page Break | | |

[The following items only appear based on responses to Q47]

Q48 Accommodation and networking practices (cont.)

How did the **Section 503 regulations** that became effective in March of 2014 **impact the following practices** in your \${Q14/ChoiceGroup/SelectedChoices}?

| | Practice was initiated (4) | Practice was expanded (3) | Practice was scaled back (2) | Practice was not impacted (1) |
|---|----------------------------|---------------------------|------------------------------|-------------------------------|
| Have formal process for accommodation (1) | 0 | 0 | 0 | 0 |
| Designate budget to fund accommodations (2) | 0 | 0 | 0 | 0 |
| Offer mentoring programs (3) | 0 | 0 | 0 | 0 |
| Have disability- focused employee resource groups (4) | 0 | 0 | 0 | 0 |

[The following items only appear based on responses to Q47]

Q49 As a result of the **Section 503 regulations** that became effective in March of 2014, does your \${Q14/ChoiceGroup/SelectedChoices} plan to initiate the following practices in the next 12 months?

| | Plan to initiate (1) | No plan to initiate (2) | | | |
|---|----------------------|-------------------------|--|--|--|
| Have formal process for accommodation (1) | 0 | 0 | | | |
| Designate budget to fund accommodations (2) | 0 | | | | |
| Offer mentoring programs (3) | 0 | 0 | | | |
| Have disability-focused employee resource groups (4) | 0 | | | | |
| Q50 What practices or programs (not limited to the above) have been particularly effective in supporting people with disabilities? Please provide any detail that may help others considering such an effort. | | | | | |
| | | | | | |

| Q51 Overall, to what extent have your \${Q14/ChoiceGroup/SelectedChoices}'s practices/policies related to employing people with disabilities changed as a result of the recent Section 503 regulations? |
|---|
| O To a great extent (4) |
| O Somewhat (3) |
| O Very Little (2) |
| O Not at all (1) |
| Q52 To what extent has your \${Q14/ChoiceGroup/SelectedChoices} encountered challenges in implementing the recent Section 503 regulations? |
| O To a great extent (4) |
| O Somewhat (3) |
| O Very Little (2) |
| O Not at all (1) |
| Q53 What have been the main challenges to implementing the recent Section 503 regulations in your \${Q14/ChoiceGroup/SelectedChoices}? |
| |
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| |

| "The recent Section 503 regulations will lead to increased employment of people with disabilities in my \${Q14/ChoiceGroup/SelectedChoices}." |
|---|
| O Strongly agree (5) |
| O Agree (4) |
| O Neither agree nor disagree (3) |
| O Disagree (2) |
| O Strongly Disagree (1) |
| Page Break ———————————————————————————————————— |
| aye bleak |

Q55 Thank you very much for your time in completing the survey.

As a thank you for completion of the survey, we are offering access to:

- 1) A comprehensive report and executive summary of the survey's results
- 2) Set of six related one-hour online courses designed by Cornell University (that are eligible for a total of six HRCl credits). These courses will be available at no cost to you, from October 1 to December 31, 2017

If you are interested accessing these products, **please provide your name and email address in the boxes below**. We will send information via email about accessing the online courses by October 3 and will send the final report to you in early 2018. Then, please click "Next" to submit your survey. Please note that your name and email will **not** be linked to your survey responses.

| • | • | | | • |
|----------------------|-----|--|---|---|
| O First name (1) |) | | _ | |
| O Last name (3) | | | - | |
| O Email (2) | | | | |
| End of Block: Practi | ces | | | |

If you do not want to include you contact information, simply click "Next" to submit your survey.