

Impacts of COVID-19 on Nantucket Businesses and Organizations (Part II)

In April, as COVID-19 was emerging as a public health and economic crisis, we surveyed businesses and organizations on Nantucket about the initial impacts of the pandemic and related challenges. The survey responses we received helped the town's Economic Recovery Task Force take quick action to support the island's economy.

Today, the pandemic is still with us and the future remains uncertain. As we prepare for the fall and winter, we need your voice more than ever. Please take five minutes to update us on the impact COVID-19 has had on your business or organization by filling out this survey.

Survey responses will stay confidential and will be shared in summary form only. This survey effort is sponsored by the Town of Nantucket, ReMain Nantucket, the Nantucket Island Chamber of Commerce, and the Community Foundation for Nantucket.

Please submit your survey responses by Friday, September 25. Thank you for your time and attention to this important matter.

*** Required**

1. What is the name of your business or organization? Results will remain confidential and will only be used to help us identify duplicate responses.

Basic Information

If your business or organization operates in multiple locations, please refer only to activities taking place on Nantucket Island.

2. Did you complete the first part of this survey in April? All responses are welcome, but this information will help us compare results between the surveys. *

Mark only one oval.

- Yes
- No
- Not Sure

3. 3. Is your business or organization a non-profit or for-profit? *

Mark only one oval.

Non-profit

For-profit

4. 4. Which of the following best describes your primary business or organization?
(Choose only one.) *

Mark only one oval.

Retail

Hotel/lodging

Food service (e.g., restaurant, bar, catering)

Business-to-business (e.g., accounting, legal)

Construction/trades

Healthcare and human services

Personal services (e.g., cleaning, salon)

Education/daycare

Culture/arts/entertainment (e.g., theater, museum)

Conservation/sciences

Gig economy (e.g., taxi, Uber/Lyft, food delivery)

Other: _____

5. 5. How many years has your business or organization been in operation? If you completed the first part of this survey in April, you may skip this question.

6. 6. Prior to COVID-19, how many year-round staff did your business or organization employ? If you completed the first part of this survey in April, you may skip this question.
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7. 7. Prior to COVID-19, how many seasonal staff did your business or organization employ (not including year-round staff)? If you completed the first part of this survey in April, you may skip this question.
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Current Impacts

The following questions refer to the impacts and changes your business or organization has experienced or implemented to date (i.e., observed impacts, not anticipated impacts).

8. 8. Which of the following impacts of COVID-19 have affected your business or organization since the beginning of the current pandemic? Check all that apply. *

Check all that apply.

- Loss in revenue or services
- Increase in revenue or services
- Cancellation of reservations, appointments, or contracts
- Cancellation of events or programs
- Decline in private or public investment
- Increase in private or public investment
- Decline in philanthropic giving
- Increase in philanthropic giving
- Supply chain disruptions (e.g., cancelled/delayed shipments)
- No childcare available for workers
- Visas not accessible for seasonal workers
- No impacts

Other: _____

9. 9. Please elaborate on the impacts selected in the question above (e.g., number of cancellations). How do these impacts compare with your expectations in April, if applicable?

10. 10. How does your revenue between April and September of this year compare with revenue during the same period in 2019?

Mark only one oval.

- Less than 25% drop in revenue
- 26-50% drop in revenue
- 51-75% drop in revenue
- More than 75% drop in revenue
- Increase in revenue
- No change in revenue

11. 11. Approximately how much revenue do you estimate you have lost or gained this year as a result of COVID-19? Please enter a dollar figure.

12. 12. How does your business or organization's expenses between April and September compare to expenses during the same period in 2019?

Mark only one oval.

- 0-25% increase in expenses
- 26-50% increase in expenses
- 51-99% increase in expenses
- More than 100% increase in expenses (i.e., more than double)
- Decrease in expenses
- No change in expenses

13. 13. Which of the following changes has your business or organization implemented since the beginning of the current pandemic? *

Check all that apply.

- Reduced hours of operation
- Altered seasonal opening or closing dates
- Reduced off-season operations
- Closed/ceased operations (permanently)
- Sold business
- Increased services (e.g., expanded hours for shopping)
- Reduced hours for workers
- Reduced wages for workers
- Laid off or furloughed workers
- Renegotiated lease or mortgage payments
- Invested in worker safety (e.g., purchased cleaning supplies, protective equipment)
- Invested in remote work capabilities (e.g., purchased laptops for employees)
- Changed or re-negotiated with suppliers
- Filed business interruption insurance claim
- Applied for business loan or grant
- Introduced online ordering
- Introduced curbside pickup
- Introduced delivery
- Introduced outdoor sales or service
- Started a new product line offering
- Retrained staff
- Started a subscription service for product
- Shared space/rent with a pop-up merchant or professional
- No changes

Other: _____

14. 14. Please elaborate on the changes selected in the question above (e.g., days/months of delay in seasonal opening). Which have been most/least successful?

15. 15. If you have laid off or furloughed workers, how many workers have been impacted?

16. 16. Has your business or organization taken on debt as a result of the COVID-19 pandemic (i.e., debt beyond what you might incur in a normal year)? If so, what level of debt (not including PPP loans)? Are you concerned about your ability to repay any debt? *

17. 17. Has your business or organization participated in any of the following public relief options? Select all that apply. *

Check all that apply.

- Paycheck Protection Program (PPP)
- Economic Injury Disaster Loans (EIDL)
- Small Business Administration (SBA) Express Bridge Loans
- Small Business Administration (SBA) Debt Relief (e.g., 7a, 504 and microloan)
- NOAA Fisheries Funding
- Federal Reserve Main Street Lending Program
- New England Working Capital Lending Program (Federal Home Loan Bank of Boston)
- Employee Retention Tax Credit
- Tax Credits for Paid Sick and Family Leave
- No assistance

Other: _____

18. 18. If applicable, please elaborate on the size of the public relief or assistance selected above.

19. 19. If applicable, please elaborate on other major changes your business or organization has made to its business practices. Examples include moving to telecommuting, transitioning to delivery only, or limiting the number of customers, employees, clients, or patients allowed in your establishment.

20. 20. If you operate a retail store and do online sales, what percent of your sales were online before the pandemic?

21. 21. If you operate a retail store and do online sales, what percent of your sales are online today?

22. 22. If you do online sales, what system(s) do you use (e.g., Facebook Marketplace, Etsy)?

23. 23. Has your business or organization taken advantage of any of the following Nantucket Economic Recovery Task Force actions? Select all that apply. *

Check all that apply.

- Town of Nantucket Reopening Guidelines
- Closed downtown streets for dining
- Designated pickup locations for shopping
- Extension of alcohol license to outdoor spaces
- Use of parking lots for dining, retail, or other activities
- Relaxed tent requirements
- Contact tracing assistance
- None of these

Other: _____

Anticipated Impacts (Off Season)

The following questions refer to the impacts and changes you anticipate your business or organization will face in the off season (i.e., between now and Memorial Day 2021.)

24. 24. Is your business or organization planning to remain open through the Christmas Stroll? *

Mark only one oval.

- Yes
- No, because of COVID-19
- No, and we wouldn't in a normal year
- Not sure

25. 25. If applicable, what would you need to remain open through Christmas Stroll? What efforts would assist you in remaining open through Stroll?

26. 26. If your organization expects further revenue impacts, what level of change in revenue do you expect for your business or organization during the off season (now through Memorial Day 2021)? Please make your best estimate. *

Mark only one oval.

- Less than 25% drop in revenue
- 26-50% drop in revenue
- 51-75% drop in revenue
- More than 75% drop in revenue
- Increase in revenue
- No change in revenue

27. 27. Do you feel that your business or organization has adequate cash reserves to handle an anticipated drop in revenue during the off season (now through Memorial Day 2021)? *

Mark only one oval.

- Yes
- No
- Not sure
- Prefer not to say
- Not applicable because no drop in revenue anticipated

28. 28. What impacts are you most concerned about for the upcoming season? Select all that apply. *

Check all that apply.

- Paying rent/mortgage
- Laying off staff/reducing hours
- Obtaining supplies/inventory
- Cash flow
- Meeting debt obligations
- Meeting demand for goods or services
- Hiring issues
- Rescheduling events

Other: _____

29. 29. Which of the following changes does your business or organization expect to implement during the off season? Select all that apply. *

Check all that apply.

- Reduce hours of operation
 - Alter seasonal opening or closing dates
 - Reduce off-season operations
 - Close/cease operations (permanently)
 - Sell business
 - Increase services (e.g., expand hours for shopping)
 - Reduce hours for workers
 - Reduce wages for workers
 - Lay off or furlough workers
 - Renegotiate lease or mortgage payments
 - Restructure business or organization
 - Invest in worker safety (e.g., purchase cleaning supplies, protective equipment)
 - Invest in remote work capabilities (e.g., purchase laptops for employees)
 - Change or re-negotiate with suppliers
 - File business interruption insurance claim
 - Apply for business loan or grant
 - No changes
- Other: _____

30. 30. Is your business or organization planning on applying for further federal, state, or local support as a result of COVID-19? *

Mark only one oval.

- Yes
- No
- Need more information on what's available
- Not Sure

31. 31. If you answered "yes" to the question above, please elaborate on the type of support you plan to apply for.

32. 32. What type of support would be most beneficial to your business or organization for the upcoming off season?

**Anticipated
Impacts
(Summer 2021)**

The following questions refer to the impacts and changes you anticipate your business or organization will face in the 2021 summer season and beyond.

33. 33. Is your business or organization intending to operate during the 2021 summer season? *

Mark only one oval.

- Yes
- Yes, for a shortened season
- No
- Not sure

34. 34. Which of the following changes does your business or organization expect to implement in summer 2021? Select all that apply. *

Check all that apply.

- Reduce hours of operation
- Alter seasonal opening or closing dates
- Close/cease operations (for summer 2021 only)
- Close/cease operations (permanently)
- Sell business
- Increase services (e.g., expand hours for shopping)
- Reduce hours for workers
- Reduce wages for workers
- Lay off or furlough workers
- Renegotiate lease or mortgage payments
- Restructure business or organization
- Invest in worker safety (e.g., purchase cleaning supplies, protective equipment)
- Invest in remote work capabilities (e.g., purchase laptops for employees)
- Change or re-negotiate with suppliers
- File business interruption insurance claim
- Apply for business loan or grant
- No changes

Other: _____

35. 35. Please elaborate on other major changes expected for summer 2021.

36. 36. Can we follow up with you in the next 4-6 weeks? *

Mark only one oval.

Yes

No

37. 37. Please provide your email address (optional). Your email will only be used if you opted for a follow-up or indicated types of support needed.

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