



EMERGENCY PREPAREDNESS PLAN

NEEDS-ASSESSMENT QUESTIONNAIRE

Target audience: Seniors, disabled residents, families with children under 18

Target location: Sheepshead Bay

Date of data collection: March 15, 2013

Canvasser Script: Hi. We're faculty from City Tech, a college in downtown Brooklyn. *[Introduce canvassers by name.]* We know you went through a devastating experience with Hurricane Sandy and that that showed that the area needs an Emergency Response Plan. So we're assisting local community groups and elected officials today by talking to residents and gathering information that will be used to create an Emergency Response Plan for this area. Because seniors and people with disabilities are considered more vulnerable, we're particularly interested in making sure emergency workers will know where they live, so that those residents get the extra help they need as quickly as possible. Would you be willing to talk with us for about five minutes and answer some questions? *[Assume the answer is yes.]* Great! Thank you.

First, we have your name listed as _____. Is that correct?

And the address here is _____. Is that correct?

[Is house on the street or is it accessible only by alley sidewalk? (Circle one)]

- House Accessible only by alley sidewalk

And is your phone number _____?

And you're 62 years old or older or have a disability, or someone in your home is, correct? Yes / No *[If no, try to speak with the senior or disabled person. If that's not possible, reword questions where answers apply to the senior or disabled house member.]*

How many children under 18 live in the home?

Does anyone in the home not speak any English? Y / N If yes (someone in the home does not speak any English), what language does he/she speak? (Specify)

Do you have any pets? (Specify kind and number) Y / N

If YES, are any a service animal (seeing eye dog, etc.)? Y / N

1. How do you get your news about emergencies like a hurricanes or a big snowstorm?

- radio
- TV
- word of mouth (who?)_____
- other (specify)_____
- email or internet
- phone call

2. How did you first hear about Hurricane Sandy?

- I didn't hear about it - I was taken by surprise
- radio
- TV
- email or internet
- phone call
- word of mouth
- other (specify)_____

3a. When Hurricane Irene hit in August 2011, did you stay in your home, did you leave, or were you not here?

- I stayed at home
- I left
- I wasn't here

3b. If you stayed home, please state why (didn't know about the storm, had no transportation, couldn't take pets, didn't think it would be serious, etc.):

3c. When Hurricane Sandy hit, did you stay in your home, did you leave, or were you not here?

- I stayed at home
- I left
- I wasn't here

3d. If you stayed home, please state why (didn't know about the storm, had no transportation, didn't want to leave animal, didn't think it would be serious, etc.):

4a. Next time there is an order to leave your home for an emergency, how will you go?

- I will drive my car
- My friend/relative will get me
- I will take a bus
- Other (specify)_____
- I will walk
- I won't leave

4b. If you leave, where will you go?

- To the home of a family member
- To the home of a friend
- To the home of a neighbor
- To a public place (school, church, store)
- I don't know

4c. If to a public place, please give the name and address of the location:

4d. Do family and friends know this location is where you will go? Y / N

4e. If you won't leave, what is the reason or reasons for not leaving? [*record all*]

- I won't leave my pets
- I'm afraid of burglary/looting
- I don't have transportation
- My spouse/other can't or won't leave, so I can't
- I don't believe the news - it's just hype
- Other (specify) _____

4f. If you did not leave the night of Hurricane Sandy, how did friends and relatives find out where you were and how you were immediately after the storm?

- I called them
- They called me
- They came to my home
- Someone contacted them for me (who or what org'n?) _____
- Other _____

5. Which of these do you have in your home?

- fire extinguisher
- smoke alarm
- carbon monoxide alarm

6. Are there at least two ways to get out of your home in case of an emergency (ex. fire)? Y / N (If no, explain why not _____)

7a. Does anyone in the home use a wheelchair or have trouble walking? Y / N

7b. If yes, is your home handicapped accessible? Y / N

8a. Do you or does anyone in your home have a medical condition that you would want emergency responders to know about? (Y / N)

8b. Do you or they wear a wristband or bracelet to alert emergency medical workers of a special medical condition? Y / N

8c. If no, would you wear such a wristband or bracelet, if you had one? Y / N

9. Who do you call in case of an emergency?

- 911
- neighbor
- local family member
- other (specify)_____
- non-local family member
- no one

10a. Which of these emergency supplies do you have in your home:

- family & emergency contact info
- copies of important documents (insurance policies, ID, bank account records)
- flashlight
- batteries
- matches / lighter
- candles
- first aid kit
- non-perishable food
- can opener
- bottled water
- rain gear
- throwaway cups, plates & utensils
- battery-powered radio
- trash bags & ties
- whistle to signal for help

10b. Would you be interested in a free kit of some of these emergency supplies? Y / N

10c. Would you like someone to explain how to use what is in the emergency supply kit and help you know what to do in case of an emergency? Yes / No

11a. Would you be willing to register with a local agency or organization such as the American Red Cross, the local fire department, a local community group, or your church, so that you can be fast-tracked for help in case of an emergency? (Circle one) Yes / No

[Canvasser: If Yes, have the resident sign his/her approval to be registered]

Yes, I would like to be registered with a local agency/organization/church for the purpose of developing a future emergency preparedness plan. I also give permission for the information collected for this survey to be used to develop such a plan. I understand that there is no plan in place at this time.

Sign here:_____ Date_____

11b. If yes, do you have a preference for a specific agency, organization, group, or church do you suggest we contact? (If yes, please provide name)

11c. If yes, what are the name, telephone number (cell phone is preferred), and relationship to you of 1 or 2 people (family, neighbors, clergy, etc.) who YOU would call to give your whereabouts in an emergency?

Name 1:

Telephone:

Relationship:

Name 2:

Telephone:

Relationship:

12. Would you like to provide the names and addresses of any neighbors who have seniors, people with disabilities, or families with children in the home who we should talk to about emergency preparedness?

Name:

Address:

Name:

Address:

Name:

Address:

Thank you for your time. Your answers to our questions will be used to put together an Emergency Response Plan for the area that takes you and your neighbors' needs into consideration.

#