

## Questionnaire on Emergency Procedures

### Purpose

*This survey is being conducted by the National Institute of Standards and Technology (NIST), an agency of the U.S. Department of Commerce, in order to improve the emergency procedures of this building.*

*Completing this questionnaire is voluntary, but your assistance would be greatly appreciated. Your responses will be completely anonymous.*

***Please return this questionnaire using the provided self-addressed, stamped envelope***

### SECTION 1: Background information

**(1) What year did you begin living/working in this particular building? \_\_\_\_\_**

- I am a visitor
- Don't know / Refuse

**(2) Have you ever been in an actual building fire before?**

- Never
- Yes, in this building
- Yes, in another building

**(3) Have you witnessed any evacuations of this building that turned out to be a false alarm?**

- Never
- Yes – how many? \_\_\_\_\_ (please specify a number)

**(4) Have you received any form of fire drill or emergency training for this building?**

- Never
- Yes, but not in the past 12 months
- Yes, in the past 12 months

**(5a) If you have received training in emergency procedures for this building, you received the training through (check all that apply):**

- Fire Department
- Video
- Orientation
- Fire drills
- Other \_\_\_\_\_ (please specify)

**(5b) If drills, how many fire drills have you participated in? \_\_\_\_\_ (please specify #)**

**(6) What fire evacuation procedure were you told to follow?**

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**(7a) Sex:** • F • M

**(7b) How old are you?** • 18-25 • 26-35 • 36-45 • 46-55 • 56-65 • 66+

**(7c) Current Status:** • Single • Married • In a committed relationship

**(7d) Do you have any children/dependents?** • Yes • No

**(7e) Education:** • High school graduate • Some college • College degree • Advanced degree

**(7f) What is your first language?** • English • Spanish • Other \_\_\_\_\_ (please specify)

**(8) Do you require help during an evacuation?** • Yes • No

**(9) Do you have any of the following limitations that could impede your evacuation?**

- € injury
- € medical condition
  - € respiratory condition
  - € cardiovascular condition
  - € chronic condition
- € vision impairment
- € hearing impairment
- € overweight
- € mobility impairment/disability
- € pregnancy

**SECTION 2: Prior to leaving your floor**

**(10a) Prior to the alarm sounding, what were you doing?** \_\_\_\_\_

**(10b) On what floor were you located?** \_\_\_\_\_

**(11) At which location were you when the drill began? *To be tailored to rooms in involved building.***

- your own office/room
- colleague's office/room
- meeting room
- restroom
- elevator
- corridor
- cafeteria
- basement
- first floor lobby
- stairwell
- storage / copy area
- other, specify \_\_\_\_\_

**(12a) Did you hear the fire alarm?** • Yes • No;

**(12b) If unable, did you see the strobe lights flashing?** • Yes • No

**(12c) If not, how were you alerted to the drill?** \_\_\_\_\_

**(13) If you heard the alarm, was the alarm:**

- too loud
- loud enough
- too quiet

**(14) If you heard the alarm, please answer the following:**

**(14a) Did you hear the alarm tone?** • Yes • No;

**(14b) If yes, what did it sound like?** \_\_\_\_\_

**(14c) Did you receive instructions through the speakers?** • Yes • No

**(14d) If yes, what were the instructions?** \_\_\_\_\_

**(15) When the alarm started to sound, what did you think it was?**

- a fire alarm
- a car alarm
- a security alarm
- other, specify \_\_\_\_\_
- you didn't know what the alarm was

**(16) What did you think was going on?**

- a real fire emergency
- a false alarm
- a test of equipment
- don't know
- a fire drill
- a weather emergency
- a security situation
- other, describe \_\_\_\_\_

**(17) Upon hearing the fire alarm and/or seeing the strobe, please number the following actions from what you did first (1) to what you did next (2), until you entered the stairwell?**

\_\_\_\_\_ continued prior activity

- \_\_\_\_\_ waited (for instructions •, to see what others were doing •, to see if anything else would happen •)
- \_\_\_\_\_ looked around
- \_\_\_\_\_ investigated – looked for the source of the alarm (where did you go? \_\_\_\_\_)
- \_\_\_\_\_ sought more information about the alarm
- \_\_\_\_\_ gathered coat / shoes, dressed (what things? \_\_\_\_\_)
- \_\_\_\_\_ gathered valuables (what things \_\_\_\_\_)
- \_\_\_\_\_ gathered emergency/coordinator supplies (what things? \_\_\_\_\_)
- \_\_\_\_\_ saved file/turned off computer
- \_\_\_\_\_ secured files/documents
- \_\_\_\_\_ secured office/room/space (shut door •, turn out light(s) •, other? \_\_\_\_\_)
- \_\_\_\_\_ followed instructions From whom? \_\_\_\_\_
- \_\_\_\_\_ gave instructions to others on what to do
- \_\_\_\_\_ discussed with others (inside the building •, outside of the building •), about what? \_\_\_\_\_
- \_\_\_\_\_ looked for others in the building
- \_\_\_\_\_ evacuated the floor
- \_\_\_\_\_ other \_\_\_\_\_ (please specify)
- \_\_\_\_\_ other \_\_\_\_\_ (please specify)

**(18) What were others doing around you?**

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**(19a) Did you feel at risk (in danger) at any time?**

- Yes – high level • Yes - moderate level • No.

**(19b) Did you feel that others were at risk at any time?**

- Yes – high level • Yes - moderate level • No.

**(20) What was the one thing that made you decide to evacuate?**

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**(21a) When you first became aware of the drill on your floor, were you:**

- alone • with friends/colleagues • in the presence of strangers

**(21b) How many people were with you? \_\_\_\_\_**

**(22) From the time you became aware of the drill until you entered the stair, how many minutes passed? \_\_\_\_\_min**

**(23a) Did you receive information/instructions that influenced your behavior while on your floor?**

- Yes • No;

**(23b) If Yes, where did it come from (mark all that apply):**

- The alarm  Staff member  Another evacuee  A manager  Other– Who? \_\_\_\_\_

**(23c) If Yes, what was this information?**

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**SECTION 3: Your evacuation during the drill**

**(24a) Was an evacuation coordinator (e.g. fire warden, Resident Assistant, etc.) present on**

the floor during today's fire drill?

- Yes • No

(24b) Are you an evacuation coordinator? • Yes • No

(25) Did you find the evacuation coordinator to be helpful to your evacuation? • Yes • No

(26) Did you have difficulty locating a stairwell, elevator, or exit? • Yes • No

(27) What was the primary reason which led you to a particular exit?

- I followed others
- I followed EXIT sign
- I knew the exit
- I used the way I came in
- Other \_\_\_\_\_

(28a) Did you evacuate? • Yes • No; *If no, please use additional comments to explain why*

(28b) If yes, how did you evacuate?

- Stairwell
- Moved to another floor
- Went to an area of refuge inside building
- Elevator
- Walked directly outside
- Other

(29) If you left by a stairwell, did you use... • Stair \_\_\_ • Stair \_\_\_ [*Designations, e.g., A, 1, north, blue, to be tailored to involved stairwells.*]

(30) If you left by a stairwell, how often do you use this stairwell?

- daily
- often
- occasionally
- never

(31a) When you were evacuating via the stair, were you

- alone
- with friends/colleagues
- in the presence of strangers

(31b) How many people were with you? \_\_\_\_\_

1 (32) If you left by a stairwell, please check any of the conditions you encountered:

- € furniture or other object(s) obstructed entry to stairwell
- € crowding in the stairs – too many people
- € difficulty opening stair or exit doors (which doors? \_\_\_\_\_)
- € uncomfortable handrails
- € poor lighting
- € emergency responders were coming up stairs
- € people in front of you were moving too slowly
- € people were standing / resting on the landing
- € confusion with which way to proceed
- € shoes were uncomfortable for the required distance
- € other, please specify \_\_\_\_\_

(33) From the time you entered the stair until you left the building, how many minutes passed? \_\_\_\_\_ min

(34a) Did you receive information or instructions that influenced your behavior while in stair/elevator?  Yes • No;

(34b) If Yes, where did it come from (mark all that apply):

- The alarm
- Staff member
- Another evacuee
- A manager
- Other– Who? \_\_\_\_\_

(34c) If Yes, what was this information? \_\_\_\_\_

**(35) If you exited the building, which exit did you use? [Designations, e.g., A, 1, north, blue, to be tailored to involved building.]**

- Exit \_\_\_\_\_
  - Exit \_\_\_\_\_
  - Exit \_\_\_\_\_
  - Other \_\_\_\_\_ (please specify)
- Exit \_\_\_\_\_
  - Exit \_\_\_\_\_
  - Exit \_\_\_\_\_

**(36a) Did you attempt to use an elevator?** • Yes • No

**(36b) If you used an elevator, what was your primary reason for not using a stairwell?**

- I have a condition which requires me to use an elevator
- Elevators are more convenient
- I could not find a stairwell
- Other \_\_\_\_\_

**Any Additional Comments:**

**Thank you for taking the time to help us improve  
emergency procedures and safety!**

**NOTE:** This questionnaire contains collection of information requirements subject to the Paperwork Reduction Act (PRA). Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subject to penalty for failure to comply with, a collection of information subject to the requirements of the PRA. The estimated response time for this questionnaire is 10 minutes. The response time includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this estimate or any other aspects of this collection of information, including suggestions for reducing the length of this questionnaire, to the National Institute of Standards and Technology, Attn., Erica Kuligowski, [erica.kuligowski@nist.gov](mailto:erica.kuligowski@nist.gov), 301-975-2309.