Area Contingency Planning Survey (Draft_21FEB17)

	Category	Sequence Group	Group Order	Question	Input Type / Metric	Notes
1	Organization Identification	1000	1	What is the name of your organization you are representing?	Text input (text limited)	
2	Organization Identification	1000	2	What is your organization type?	Drop Down menu select	Drop down: local, state, federal, non-profit, tribal, consultant/contractor, industry
3	Position Identification	2000	1	What best describes your position? Select your primary function.	Drop Down menu select	Drop down: responder, planner, managerial, outreach/coordination, other.
4	Position Identification	2000	2	Select your secondary function.	Drop Down menu select	
5	Position Identification	2000	3	Select your tertiary function.	Drop Down menu select	
6	Geographic span of activity	3000	1	Select the region/RRT that you PREDOMINANTLY work in? (May select more than one if appropriate)	Select all that apply list	List of 13 RRT Regions.
7	Geographic span of activity	3000	2	Select OTHER Regions that you have worked in?	Select all that apply list	List of 13 RRT Regions.
8	Geographic span of activity	3000	3	Select the State that you PREDOMINANTLY work in? (May select more than one if appropriate)	Select all that apply list	List of states.
9	Geographic span of activity	3000	4	Select OTHER states that you have worked in? (May select more than one if appropriate)	Select all that apply list	List of states.
10	Geographic span of activity	3000	5	With respect to ACP functions only, what percentage of your experience is in the Coastal Zone (USCG managed areas)?	Drop Down menu select	Drop down: 0%; 1-25%; 26-50%; 51-75%; 76-99%; 100%
11	Geographic span of activity	3000	6	With respect to ACP functions only, what percentage your experience is in the Inland Zone (EPA managed areas)?	Drop Down menu select	Drop down: 0%; 1-25%; 26-50%; 51-75%; 76-99%; 100%
12	Experience / familiarity with ACPs	4000	1	For any exercises you have participated in, to what degree have they tested contents of ACPs? (understanding that not all components of an ACP are tested in every exercise)	1-10 scale (radio button)	1=Don't test ACP at all; 10 = exercises truly test ACP content.
13	Experience / familiarity with ACPs	4000	2	How many ACPs have you worked with (this includes subordinate components such as a GRP/GRS or sub-area plans?	Number input	
14	Experience / familiarity with ACPs	4000	3	How many responses have you been involved with that utilized an ACP or subordinate components such as a GRP/GRS or sub-area plans?	Number input	
15	Experience / familiarity with ACPs	4000	4	How much of your experience with your ACPs is within the context of actual incident response (versus exercises)?	Drop Down menu select	Drop down: 0%; 1-25%; 26-50%; 51-75%; 76-99%; 100%
16	Experience / familiarity with ACPs	4000	5	How would you score your overall familiarity with the Area Contingency Planning process?	Drop Down menu select	Drop down: none, minimal, moderate, better than most, extensive. If response is "none" - add in skip logic to ensure they don't have to answer other relevant questions.
17	Experience / familiarity with ACPs	4000	6	Are you a member/participant of an Area Committee?	Drop Down menu select	Yes or no answer; add in skip logic for next three questions
18	Experience / familiarity with ACPs	4000	7	On average, how many Area Committee meetings do you participate in a year?	Number input	
19	Experience / familiarity with ACPs	4000	7	On an annual basis, what percentage of area committee meetings are you ABLE to attend?	Drop Down menu select	Drop down: 0%; 1-25%; 26-50%; 51-75%; 76-99%; 100%
20	Experience / familiarity with ACPs	4000	8	Overall, how would you rate OPPORTUNITES to participate in Area Committee meetings?	1-10 scale (radio button)	
21	Experience / familiarity with ACPs	4000	9	Overall, how would you rate your ABILTY to participate in Area Committee meetings?	1-10 scale (radio button)	
22	Experience / familiarity with ACPs	4000	10	Overall, with respect to actual incidents, how much did you personally consult an ACP for direction?	1-10 scale (radio button)	1= none; 10 = extensively

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23	Experience / familiarity with ACPs	4000	11	Do you/have you participated in area exercises?	Drop Down menu select	Y/N
24	Experience / familiarity with ACPs	4000	12	Overall, with respect to exercises, how much did you personally consult an ACP for direction?	1-10 scale (radio button)	1= none; 10 = extensively
25	Experience / familiarity with ACPs	4000	13	To what degree do the ACPs you have worked with address current risks?	1-10 scale (radio button)	1=They do not; 10= comprehensively
26	Experience / familiarity with ACPs	4000	14	Which section of ACPs have you used?	Select all that apply list	Contact information; Pre-identified response strategies; Interagency agreements of how roles and responsibilities will be handled; Resources at risk information; Response equipment availability; ICS implementation
27	Experience / familiarity with ACPs	4000	15	Considering your previously identified PRIMARY function, how many years experience do you have relative to it.	Number input	
28	Experience / familiarity with ACPs	4000	16	Considering your previously identified SECONDARY function, how many years experience do you have relative to it.	Number input	
29	Experience / familiarity with ACPs	4000	17	What percentage of your area contingency planning experience been overseen by the USCG?	Number input	
30	Experience / familiarity with ACPs	4000	18	When federal oversight has been involved, what percentage of your response experience been overseen by the USCG?	Number input	
31	Experience / familiarity with ACPs	4000	19	What percentage of your area contingency planning experience been overseen by the EPA?	Number input	
32	Experience / familiarity with ACPs	4000	20	When federal oversight has been involved, what percentage of your response experience been overseen by the EPA?	Number input	
33	Experience / familiarity with ACPs	4000	21	Considering your previously identified TERTIARY function, how many years experience do you have relative to it.	Number input	
34	ACP Usability/practicality	5000	1	On a scale of 1 to 10, how would you rate the overall usability/practicality of ACPs you have worked with (10 = maximum usability)? If highly variable, explain.	1-10 scale (radio button)	
35	ACP Usability/practicality	5000	2	Overall, rate the overall effectiveness of ACPs in guiding an actual incident?	1-10 scale (radio button)	1= Not effective; 10= Extremely effective
36	ACP Usability/practicality	5000	3	Overall, rate the overall effectiveness of ACPs in guiding an exercise?	1-10 scale (radio button)	1= Not effective; 10= Extremely effective
37	ACP Usability/practicality	5000	4	Of the following items, select the items that you think need the most improvement for purposes of making ACPs more useable.	Select all that apply list	currency of information; finding information; completeness of information; usable tools within ACP; Accessibility of ACP; Size of ACP; participation in plan development
38	ACP consistency	6000	1	If you have worked with 3 or more ACPs, how would you rate their consistency with respect to FORMAT/ARCHITECTURE on a scale of 1-10 (10=maximum consistency)?	1-10 scale (radio button)	
39	ACP consistency	6000	2	If you have worked with 3 or more ACPs, how would you rate their consistency with respect to POLICY on a scale of 1-10 (10=maximum consistency)?	1-10 scale (radio button)	
40	Negatives / Deltas	7000	1	Describe your number one "negative" experiences/observations you have had with respect to ACPs.	Text input (text limited)	
41	Negatives / Deltas	7000	2	Describe your number two "negative" experiences/observations you have had with respect to ACPs.	Text input (text limited)	
42	Negatives / Deltas	7000	3	Describe your number three "negative" experiences/observations you have had with respect to ACPs.	Text input (text limited)	
43	Positives	8000	1	Describe your number one (of three) positive experiences/observation you have had with respect to ACPs.	Text input (text limited)	
44	Positives	8000	2	Describe your number two (of three) positive experiences/observation you have had with respect to ACPs.	Text input (text limited)	
45	Positives	8000	3	Describe your number three (of three) positive experiences/observation you have had with respect to ACPs.	Text input (text limited)	
46	ACP improvements	9000	1	Describe your number one recommendation to improve ACPs.	Text input (text limited)	

	Category	Sequence Group	Group Order	Question	Input Type / Metric	Notes
47	ACP improvements	9000	2	Describe your number two recommendation to improve ACPs.	Text input (text limited)	
48	ACP improvements	9000	3	Describe your number three recommendation to improve ACPs.	Text input (text limited)	
49	ACP improvements	9000	4	If we developed a tablet/app for your ACP, would you use it in the field?	Drop Down menu select	Yes or no answer
50	ACP Accessibility	10000	1	Generally, do people know how to find current versions of ACPs?	Drop Down menu select	Y/N
51	ACP Accessibility	10000	2	How do you access ACPs in your Region(s)?	Drop Down menu select	Hard copy, online - do people know where to find plans?
52	ACP Accessibility	10000	3	Please rate your ability to access ACPs.	Drop Down menu select	None, limited, readily accessible
53	ACP Accessibility	10000	4	Do you know who to contact to access the plan/get help with the plan?	Drop Down menu select	Y/N
54	ACP Accessibility	10000	5	On a scale of 1-10, how engaged is the state in the Area Contingency Planning process?	1-10 scale (radio button)	1= None; 10 = extensively
55	ACP Accessibility	10000	6	Have you read the ACP(s) applicable to the areas you predominantly work in?	Drop Down menu select	Y/N