

2012 Great ShakeOut Earthquake Drill Evaluation

1. ABOUT THIS SURVEY

Your participation in this survey may help you evaluate your own ShakeOut activities and will help us improve the overall ShakeOut drill.

Your participation is voluntary and completely confidential; your answers will not be linked to your name or email address in any published documents. The IP address for the computer you use will be collected with your answers, but this information will be deleted later to protect your privacy. **You must be at least 18 years old to participate.**

The questionnaire will take about 10 to 15 minutes to complete.

This survey will close on December 31st. Please complete the questions before that date. You may quit at any time by clicking "Exit this Survey." You can stop and return later on the same computer to change or complete your entries, up until December 31st.

This survey is being conducted by the [California State University at Fullerton](#), [RiskRED](#), the [Southern California Earthquake Center \(SCEC\)](#), and [Western Washington University](#). Findings from this survey will be posted on the ShakeOut website at www.shakeout.org/evaluation.

If you have any questions or comments about this survey, please send a note to info@shakeout.org.

Thank You!

* 1. Would you like to proceed with the survey?

- YES, I WOULD LIKE TO PROCEED TO THE SURVEY
- NO, I DO NOT WANT TO COMPLETE THE SURVEY

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8. SCHOOLS: LOCATION

If you are NOT responding on behalf of a **K-12 SCHOOL OR GROUP OF SCHOOLS** organization, please use the "Previous" button at the bottom of the page (not your browser's "Back" button) to return to the last question.

* 15. State, province, country or territory where you or your educational facility is located:

If your state, territory or country is not listed, please select "all other locations" from the drop down menu and specify here:

9. SCHOOLS: LOCATION

16. County, regional district, village, municipality, parish or borough in which the school or group of schools for which your are responding is located. If more than one, write "multiple." If not applicable, write "NA."

* 17. School district or office of education with which your school or group of schools are affiliated:

(Enter "NA" if not applicable.)

10. SCHOOLS: DESCRIPTION

* 18. I am responding on behalf of:

- An individual public school
- An individual charter school
- An individual private school
- An individual home school
- A public school district
- An office of education
- A group of charter schools
- A group of private schools

* 19. The name of our school or group of schools is:

* 20. Approximate numbers in our school:

(Enter 0 if your school has no one in a particular category)

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# Schools (Enter 1 if you are responding for an individual school)	<input type="text"/>
# Preschool students	<input type="text"/>
# Elementary school students (including kindergarten)	<input type="text"/>
# Middle school / Junior High students	<input type="text"/>
# High school students	<input type="text"/>
# Adult education students	<input type="text"/>
# Teachers	<input type="text"/>
# Classroom aides and volunteers (on an average day)	<input type="text"/>
# Administrators	<input type="text"/>
# All other staff	<input type="text"/>

21. In case we have any questions about your responses to this survey, can you please let us know how we can contact you?

Name, telephone and email address will NOT be released or used for any other purpose, and is requested on a voluntary basis.

Position/Role	<input type="text"/>
Name	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

Thank you. Next, we would like to ask you the main survey questions.

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The following questions are about the participation of the group you are responding for in this and previous ShakeOut drills.

***27. The organization that I am responding for participated in THIS AND PREVIOUS ShakeOut drills in the following ways
(check all that apply):**

	Drop, Cover, Hold On	Emergency Building Evacuation	Other Response Simulation	ShakeOut Related Exercise	DID NOT PARTICIPATE	DON'T KNOW Activities
2012 ShakeOut (This year)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2011 ShakeOut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2010 ShakeOut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2009 ShakeOut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2008 ShakeOut (So. California ONLY)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***28. In our organization or school(s) the following number of people were involved in this year's drill (approximate OK):**

Staff (including faculty, if applicable)

Students (if applicable)

Others

(Customers/Clients/Patients/Visitors/Volunteers)

***29. We used the following ShakeOut resources for our drill (Check all that apply):**

- | | |
|---|---|
| <input type="checkbox"/> Drill broadcast or sound effects | <input type="checkbox"/> OTHER resources downloaded from ShakeOut website |
| <input type="checkbox"/> Documents from the ShakeOut website (manuals, checklists, sample letters, etc) | <input type="checkbox"/> NONE - WE DID NOT USE ANY SHAKEOUT RESOURCES |
| <input type="checkbox"/> ShakeOut Posters or Flyers | |

30. The following organizations were involved in our ShakeOut drill or drill planning in some way: (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Police Dept | <input type="checkbox"/> Parent Teacher / Student Association (PTA/PTSA) |
| <input type="checkbox"/> Fire Dept | <input type="checkbox"/> City Emergency Operations Center |
| <input type="checkbox"/> Red Cross | <input type="checkbox"/> Regional Emergency Operations Center |
| <input type="checkbox"/> Public Health | <input type="checkbox"/> School District Emergency Operations Center |
| <input type="checkbox"/> CERT Teams | <input type="checkbox"/> NO OTHER ORGANIZATIONS WERE INVOLVED |

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OTHER (Please specify)

*31. Our ShakeOut participation (up to and including this year) has led to improvements in the following areas (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Our Organization's Disaster Plan, policies or procedures | <input type="checkbox"/> Devoting more funds to emergency planning |
| <input type="checkbox"/> Reducing our physical exposure to risks | <input type="checkbox"/> Educating staff for disaster prevention |
| <input type="checkbox"/> Developing our preparedness to respond | <input type="checkbox"/> Involving staff more in disaster planning |
| <input type="checkbox"/> Seeking needed training | <input type="checkbox"/> Encouraging disaster planning at home |
| <input type="checkbox"/> Devoting more time to emergency planning | <input type="checkbox"/> NONE - THE SHAKEOUT DID NOT LEAD TO IMPROVEMENTS |
| <input type="checkbox"/> Other (Please specify) | |

*32. We experienced the following problems with our drill: (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Participants unclear about what to do when "Drop" or "Cover" or "Hold On" is not possible | <input type="checkbox"/> Participant resistance or non-participation |
| <input type="checkbox"/> Participants unclear about building evacuation procedures (if applicable) | <input type="checkbox"/> Absenteeism at the time of the drill |
| <input type="checkbox"/> Limited or rescheduled drill due to weather | <input type="checkbox"/> WE DID NOT EXPERIENCE PROBLEMS |
| <input type="checkbox"/> Distractions | |
| <input type="checkbox"/> Other (Please specify) | |

*33. We did (or will) evaluate this drill as follows: (Check all that apply)

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Informal discussion | <input type="checkbox"/> Not at all |
| <input type="checkbox"/> Formal written report | |

*34. My organization plans to participate in next year's ShakeOut:

Yes

No

Maybe (don't know yet)

Thank you. We would like to ask you three questions on your organization's preparedness.

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13. INSTITUTIONS: PREPAREDNESS

You are almost done! This page has a few more questions about preparedness measures in your organization, which will help us to track our collective improvements over time.

*35. Including the ShakeOut, our organization participates in the following types of drills:

	Never or almost never	1 X Every couple of years	1 X Year	2-3 X Year	4X Year or more
Fire drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drop, Cover, and Hold On drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency response simulation drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lock-down or shelter-in-place drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tornado or severe weather drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: please describe (these or any others)

*36. Our organization has: (check all that apply)

- An Emergency or Disaster Preparedness Plan
- An Emergency or Disaster Preparedness Committee
- A full-time Emergency or Disaster Preparedness Coordinator
- A part-time Emergency or Disaster Preparedness Coordinator
- NONE OF THE ABOVE

If you have NO emergency management coordinator please enter **0**, if part-time, please enter the **approximate percentage** of time devoted to these responsibilities:

*37. Which things has your organization done to prepare for earthquakes? Did you do them because of ShakeOut?

	DONE (Because of ShakeOut)	DONE (But NOT because of ShakeOut)	NOT DONE	NOT APPLICABLE
Encourage staff to prepare for disasters at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide staff training in earthquake preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have plans for an alternate work site/schedule /method for	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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continuity of operations
and services

Secure tall or heavy
furnishing and
equipment

Hazardous materials,
cleaning or laboratory
chemicals are limited,
isolated, eliminated or
secured

Buildings meet all
current standards for
earthquake safety

Comments:

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17. SATISFACTION

We would like to know how we can improve the ShakeOut in the future.

*53. Please rate how much you agree or disagree with the following statements.

	Strongly DISAGREE	Somewhat DISAGREE	Neither Nor AGREE	Somewhat AGREE	Strongly AGREE	NOT APPLICABLE
The ShakeOut website was easy to navigate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It was easy to register on the ShakeOut website.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I learned how to Drop, Cover, and Hold On because of the ShakeOut.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The ShakeOut helped me learn more about how to get ready for earthquakes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My organization (or household) did more to prepare for earthquakes in the last year because of the ShakeOut.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I knew what to do to participate in the ShakeOut drill.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Instructions for participating in the ShakeOut evaluation survey were clear.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend the ShakeOut earthquake drill to my family and friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The email messages I received about the ShakeOut were helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am comfortable using computers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am comfortable using the Internet.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

54. What motivated you (or your organization) to participate in this year's ShakeOut drill?

55. What did you like best about this year's ShakeOut drill?

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[Text input field]



56. What did you like least about this year's ShakeOut drill?

[Text input field]



57. What would make the ShakeOut better in the future?

[Text input field]



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18. DEMOGRAPHICS

You have completed the main survey questions. **THANK YOU!**

If you are willing, please describe yourself.

***58. I am:**

- Male Female PREFER
NOT TO SAY

**59. How old were you on
your last birthday?**

(If you prefer not to say,
SKIP)

Years

***60. What racial/ethnic group best
describes you?**

- | | |
|---|---|
| <input type="radio"/> White | <input type="radio"/> Native Hawaiian or other Pacific Islander |
| <input type="radio"/> Hispanic/Latino | <input type="radio"/> American Indian or Alaskan Native |
| <input type="radio"/> Black or African American | <input type="radio"/> Mixed |
| <input type="radio"/> Asian | <input type="radio"/> PREFER NOT TO SAY |
| <input type="radio"/> Other (please specify) | <input type="text"/> |

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19. THANK YOU

Thank you very much for your time!

If you would like a blank copy of this questionnaire, go to www.shakeout.org/evaluation.

We hope that this evaluation will help you to improve your preparedness at home, school and work. By sharing your experiences you have contributed to helping all of us to improve the outcomes of the ShakeOut! Results will be made available through the ShakeOut Web site in 2013.