

Part I: Survey Design Form

Robert Wood Johnson Foundation (RWJF) asks grantees and contractors about the methodology of any public opinion survey or research survey we fund to ensure it is well designed and adheres to our standards.

Please complete this form before your RWJF-funded survey goes into the field. If your survey requires IRB approval, we ask you complete this form before you submit your survey for final IRB review.

Please send your 1) completed form and 2) survey instrument to grantreports@rwjf.org, using the filename format: GrantID#.SurveyDevelopment.PDF

Once all materials are submitted, we will review and approve your survey within 10 business days.

If you have any questions, please email surveystandards@rwjf.org

Thanks,

Robert Wood Johnson Foundation Survey Standards





1. Funding ID:			
72	72458		
2 . P	Please specify the RWJF team this grant/contract is associated with:		
0	Healthy Weight for All Children		
0	Health Care Coverage		
0	Bridging Health and Health Care		
0	Value		
0	Healthy Places and Practices		
0	Equal Opportunity		
0	Vulnerable Populations		
0	21 st Century Leadership		
0	The Future of Nursing		
0	New Jersey		
•	Don't Know		
3. Is this survey being fielded by an RWJF communications firm?			
0	Yes		
•	No		





4. F	Please specify the organization conducting your survey:
Oth	ner (please specify)
5. I	s your survey a probability sample?
0	Yes
•	No
6. F	Please specify your survey population. Check all that apply.
	Children (Ages<18 years)
~	Adults (Ages 18-64 years)
	Seniors (Ages 65+ years)
7. F	Please select the specific population you will be surveying.
0	Health Policy Experts
0	Nurses
0	Parents
0	Physicians
0	Policy-makers
0	Providers





0	None
•	Other
Otł	ner (please specify) Tribal and county representatives in emergency prepared
8. F	Please select where you will be fielding your survey:
C	alifornia
Ple	ase select where you will be fielding your survey:
Otł	ner (please specify)
9. F	Please select the mode of your survey. Check all that apply.
~	Phone
	Mail
~	Face-to-face
	Web-based
	Other
Otł	ner (please specify) Telephone-based. However for cultural reasons imp

Questions 10 and 11 refer ONLY to online surveys:





10. Is the sample being used a լ	panel sample?	
C Is the sample being used a p	panel sample? Yes	
⊙ No		
11. If so, please indicate the co describe how the panel was cre	mpany from which the panel will be eated.	e purchased or briefly
		<u></u>
4		Þ
=	of dates the survey will be in the fie separate date ranges. Complete to	
	MM DD YYYY	
1. Start date:	2 / 1 / 2016 Month Day Year	
1. End date:	4 / 30 / 2016	
1. Liiu date.	Month Day Year	
2. Start date:	Month Day Year	

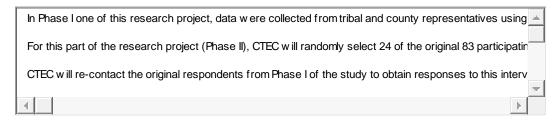


Month Day Year

2. End date:



13. Briefly describe the survey methodology, including sampling frame, sample selection procedure, sample size, number of completed interviews planned, contact procedures, weighting strategy (if applicable), and anticipated response rate and sampling error.



Briefly describe the survey methodology, including sampling frame, sample selection procedure, sample size, number of completed interviews planned, contact procedures, weighting strategy (if applicable), and anticipated response rate and sampling error.

14. Please provide the name and contact information of someone who can discuss the survey methodology in case there are questions.

Name:	Maureen Wimsatt
	D : (D: : 11
Title:	Project Principal Investigator
Email Address:	maureen.wimsatt@crihb.org
Phone Number:	916-929-9761 ext 1511

Please direct any questions to surveystandards@rwjf.org





Overview

The purpose of this interview is to learn more about cross-jurisdictional sharing (CJS) of emergency management services between tribal and county governments in California. In this second phase of our project, we are interested in hearing more about your experiences with CJS for emergency management, including:

- Your perception of the tribe-county CJS relationship;
- Historical and/or cultural barriers to your tribe-county CJS relationship;
- The value that you place on different aspects of CJS for emergency management services;
- Strengths and weaknesses of past CJS experiences;
- Current emergency management capacity;
- If applicable, specific provisions of MOUs or other CJS arrangements you have for sharing emergency management services; and
- For tribal jurisdiction representatives, whether the tribe has achieved or is interested in achieving national emergency management benchmarks.

Depending on whether your jurisdiction is currently involved in a tribe-county CJS arrangement, it should take you between 15 and 30 minutes to complete this interview. You may end your participation in the interview at any time.

Interview Questions

1. Name of the tribe where you do emergency management work, if applicable:
2. Name of the county or counties where you do emergency management work:
3. Your job title and department:
4. Type of jurisdiction that your department serves (select one):
O Tribe
O Tribal clinic
O Town or township
O City
O County
O Special district
 Multi-jurisdictional district (including combined city/county)





Please describe how you view the tribe-county	cross-jurisdictional	relationship 1	for sharing
emergency management services.			

- 6. What, if any, historical and/or cultural barriers have limited the development of your tribe-county cross-jurisdictional relationship for sharing emergency management services?
- 7. Describe the strengths and weaknesses of your jurisdiction's work in developing tribe-county CJS arrangements for emergency management.
- 8. Do you place no value, low value, or high value on:

	No value	Low value	High value
a. Formal arrangements for sharing emergency management services between tribes and counties? (example: MOU, mutual aid agreement)			
b. Informal arrangements for sharing emergency management services between tribes and counties? (example: verbal agreement/understanding, "handshake agreement")			
c. Having cross-jurisdictional consultations or contracted work before, during, or after an emergency? (example: tribe providing consultation to county during an emergency or vice versa)			
d. Having a group of people from both jurisdictions share tasks and make decisions together before, during, or after an emergency? (example: mutual aid arrangement outlining roles and decision-making authority of both jurisdictions)			
e. Tribe and county departments becoming one department to serve both jurisdictions? (example: merging tribe and county fire department to provide services to both jurisdictions)			

Comments:





9. How wo	uld you rate the current capacity of your emergency management services?
0	No capacity
0	Low capacity
0	Medium capacity
0	High capacity
managem	you be willing to share your jurisdiction's formal CJS arrangement for sharing emergency ent services (e.g., MOU or mutual aid agreement) so we can document what specific it includes?
0	Yes (if yes, interviewer will obtain agreement)
0	No (please specify):
0	Not applicable
managem	ion for tribes only) Has your jurisdiction achieved any benchmarks in emergency ent accreditation?
0	If yes: Please specify accreditation entity for which benchmarks were achieved:
	 National Emergency Response Framework
	 Centers for Disease Control and Prevention Public Health Emergency
	Preparedness Framework
	 National Association for City and County Health Officials
	Other (Please specify):
	Comments:
0	If no: Is your jurisdiction interested in achieving benchmarks in emergency management accreditation?
	o Yes
	o No
	Comments: