

## Community Needs Assessment Walking Survey

The Community Needs Assessment Walking Survey is a tool for enlisting older adults and others to assess the age-friendliness of a neighborhood or community. Focusing on such areas as safety, the presence of retail amenities and the availability of community services, the survey is designed to be completed by volunteers walking designated areas and recording their observations. The observations, when compiled, can be used to identify and begin a dialogue on areas in need of improvement. The survey was developed in 2010 by graduate students at NYU's Wagner School of Public Service in conjunction with the Mayor's Office and Department for the Aging. Included with the survey are a training manual for those coordinating the survey (called "team leaders") in a particular neighborhood as well as one for volunteers. The following packet contains all of the materials needed to conduct the survey in your neighborhood/community:

- Overview (9 pages)
- Survey Instrument (9 pages)
- Suggested Implementation Timeline (1 page)
- Training Manual for Survey Team Leaders (18 pages)
- Training Manual for Survey Volunteers (39 pages)

# **City for All Ages Community Needs Assessment Survey**

## **Implementation Overview for Community Leaders**



**Addressee:** Community Leaders

**Content:** Project Background and Overview



*About the Cover:*

**The City for All Ages Mosaic** by Thomas Coquerel and Douglas Chiu cover takes portraits from the “**GRANDPARENT PHOTO GALLERY**” series by photographer Willie Davis. The series honors the estimated 100,000 grandparents who are raising their grandchildren across the City. Members of DFTA’s Grandparent Resource Center (GRC), the 20 portraits of grandparents and their families capture the special bond between grandparent caregivers and their grandchildren. For more information on this series and the GRC, please visit DFTA’s website at:

<http://www.nyc.gov/html/dfta/html/caregiver/grandparents.shtml>

## **City for All Ages Community Needs Assessment Survey**

### **Implementation Overview**

The Department for the Aging (“DFTA”), along with The Deputy Mayor’s Office for Health and Human Services, asked a graduate school team to develop a community needs assessment to determine the age-friendliness of communities throughout New York City, neighborhood by neighborhood. Through research to better understand the physical, social and environmental challenges seniors face in their communities, the graduate school team developed a Community Needs Assessment Walking Survey (the “Survey”), to be used to identify aspects of communities that are important to seniors. This Survey focuses on safety, community amenities and community services. This Survey is designed to determine what is working in certain neighborhoods, and areas in need of improvement.

This Overview is two-fold: it gives a brief background of the reasons for developing this Survey, and is an instruction guide for local elected officials, government personnel, nonprofit program managers, executive directors, businesspeople, residents, local stakeholders or anyone interested in implementing the Survey in their community—collectively “Community Leaders”—on how to recruit and organize volunteers to administer the Survey. This Overview is only one component of a three-part Implementation Plan, which includes a Training Manual and a Survey Volunteer Manual.

The background of this community needs assessment is related to the increase in life expectancy and the growth of older populations throughout the world in recent years. This increase, and the reality that older people make up a large percentage of communities throughout the world, caused the World Health Organization to study the issue of aging. The WHO concluded that cities have a responsibility to support older people in many social and physical realms in order to allow them to age in place and to be vibrant participants of community life. Thus, the WHO developed “Global Age-friendly Cities: A Guide,” a report which highlights the importance of changing the physical, social, and political environments in which we all live to be more age-friendly for older people.

Using the WHO Report as a guideline, the New York City’s Mayor’s Office, the New York Academy of Medicine, and the City Council of New York City took charge of outlining a continuum of needs that affect older adults and created “Age Friendly NYC, Enhancing Our City’s Livability for Older New Yorkers.” The scope of the Age Friendly NYC report included a broad range of issues that seniors shared relating to how their communities can be improved. Based on this report, the graduate school team worked with DFTA and the Deputy Mayor’s Office of Health and Human Services to develop a Community Needs Assessment Survey Tool to determine the age-friendliness of New York City communities. The Survey is designed as a short walking survey that can be quickly and easily executed by volunteers, and includes a checklist of common elements of the urban streetscape seniors are likely to encounter in their daily routine, including sidewalks, crosswalks, streets and stores.

In order to implement the Survey, Community Leaders should actively recruit volunteers to participate in the Survey as both Team Leaders and Survey Volunteers. While both categories are volunteers, the Team Leaders have additional responsibilities, including training the Survey Volunteers implementing the Surveys, and assisting Community Leaders in their recruitment efforts. Team Leaders should be chosen by their willingness for additional responsibility. Using contacts through senior centers, City Council members, schools, AARP, various community organizations, neighborhood residents, and other local partners and stakeholders, Community Leaders should conduct outreach efforts to recruit volunteers. Phone calls, letters and e-mails may be used to recruit potential volunteers.

Team Leaders have the majority of responsibility, and report to their Community Leaders. Team Leaders should work with DFTA to reserve spaces near the determined Survey Areas that are large enough to hold training sessions. Community Leaders should provide Team Leaders with a Survey Volunteer contact list. Team Leaders and Community Leaders should determine which routes will be surveyed in their communities, and the Community Leaders should provide the route maps to the Team Leaders. Team Leaders train the Survey Volunteers, which should take approximately three hours. At the training sessions, Team Leaders hand out Volunteer Manuals to the Survey Volunteers, along with materials needed to survey (pencils, clipboards, identification badges or another identifying item, bottles of water, etc.). The details of the training are in the Training Manual and the Survey Volunteer Manual.

The Survey Volunteers should preferably be teams of two Survey Volunteers per Survey. We encourage senior to participate on these teams. One person should take on the role of Observer, while the other is the Recorder. The Observer looks for the elements listed on the Survey, and tells the Recorder what she or he observed. The Recorder then compiles the information on the Survey. It is estimated that Survey Volunteers conducting should take approximately 1-2 hours per Survey route.

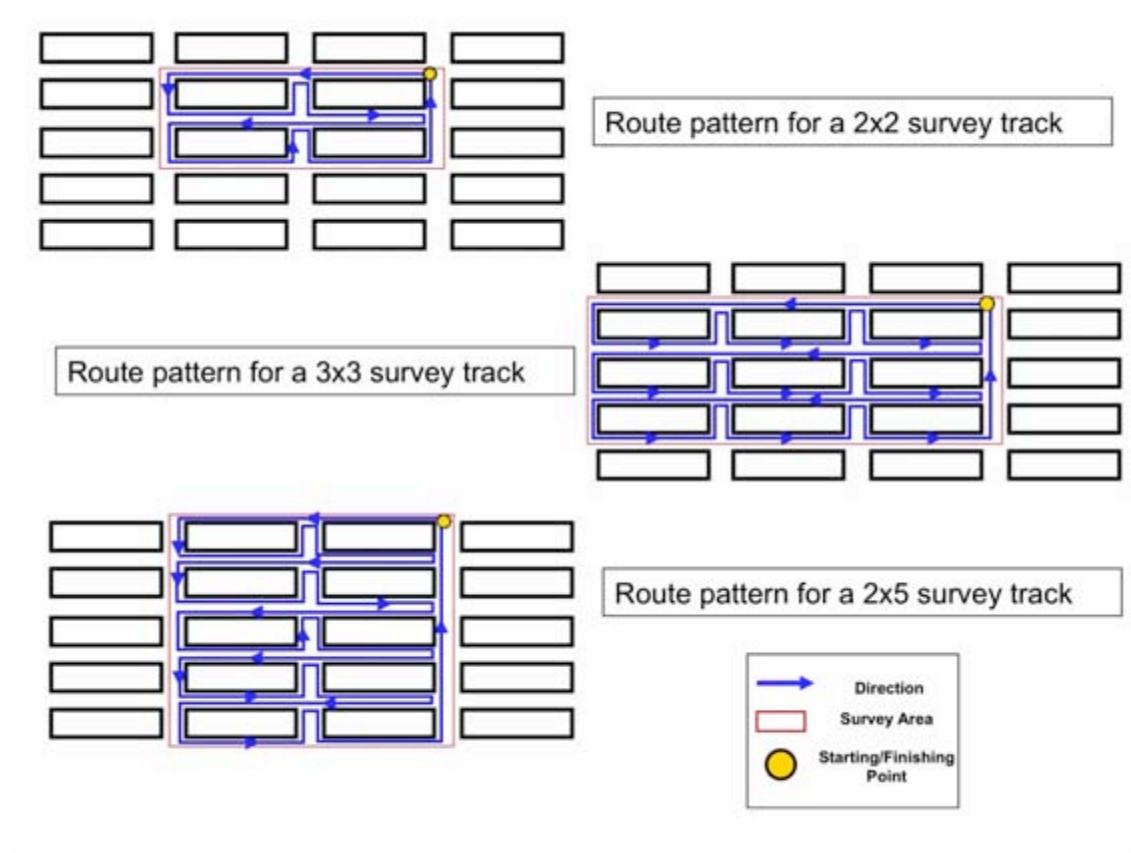
After the Survey Volunteers conduct the Survey, they should return to a predetermined location to meet with Team Leaders to return the Survey, and debrief. This should take approximately 15 minutes. The debrief details are in the Training Manual. The Team Leaders should then return the completed Surveys to the Community Leaders, who should send them to the appropriate City agencies to collect the data in a computerized format that can be analyzed at a later date.

The Implementation Plan process should follow a general timeline, and take approximately six weeks to complete from recruitment of Team Leaders and Survey Volunteers, to administering the Survey, and return of the Survey for data collection. A timeline is included as an attachment to this package.

Thank you for sharing your valuable time by participating in The City for All Ages Community Needs Assessment Walking Survey.

## **BASIC SURVEY PROCESS OVERVIEW**

The City for All Ages Community Needs Assessment Walking Survey is a walking survey, which requires Survey participants to make field observations on a pre-determined walking route. After a basic training conducted by the Team Leaders, teams of two Survey Volunteers should conduct the entire Survey, and walk the route only once. The routes are pre-determined based off generic patterns, examples of which are in Figure 1, which should be modified by the Community Leader and the Team Leader to fit census tracts. The Team Leaders should give maps of the pre-determined routes to the Survey Volunteers before they conduct the Survey.



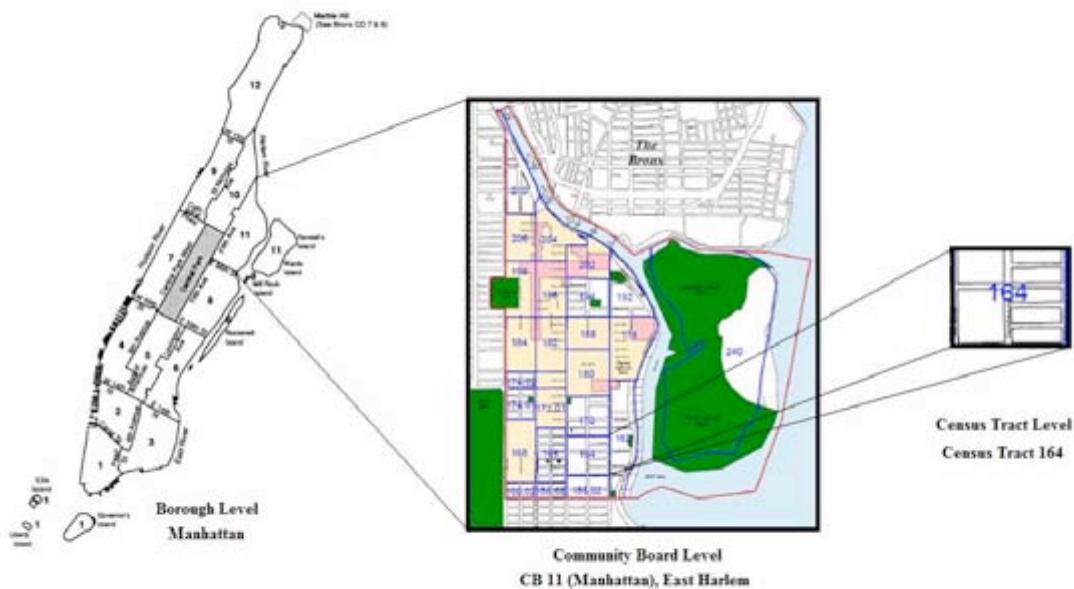
**Figure 1: Examples of Pre-Determined Route Patterns**

After the Survey Volunteer teams have observed and recorded information to the best of their knowledge and completed the route to its finish, they should go over the Survey results a second time to ensure both accuracy and legibility. Depending on the size of the group, time allotted and willingness of the participants, the Survey Volunteer teams may move on to further assigned Survey Areas. At the end of each day, the Surveys should be submitted to the Team Leaders, who quickly review the Surveys for accuracy. At the end of each week, Team Leaders submit the completed Surveys to their respective Community Leader, who then compile the Surveys to be sent to an appropriate party for data collection.

We ask that Community Leaders and Team Leaders be fully committed to Survey participant safety. The Survey should be conducted during daylight hours, as it will ensure visibility. In addition, a daytime survey should reflect the situations and community features that the elderly encounter on a daily basis. Survey Volunteers should always go in pairs. Team Leaders should give their contact information to their assigned Survey Volunteer teams, and check in periodically with the Survey Volunteers.

## Survey Areas

The Survey is designed for use in any neighborhood in the city. In terms of Survey implementation, each borough should be subdivided into their respective Community Board Districts. Community Board Districts will be subdivided into Census Tracts. Because of their reasonable size and correlation to population studies, the Census Tracts should be the primary unit of enumeration in this Survey. Census Tracts should be divided when necessary so that they are similar in number of blocks to be covered, and the Survey walking areas are not too large to be covered comfortably by Survey Volunteers. The standard area of an entire Survey should be a two by two block radius (or an area that is closest to the 2x2 model).



**Figure 2: Different Types of Survey Areas**

It is important to know that you should be looking on the GROUND FLOOR ONLY. Please only count items in the Survey if they have an entrance on the ground floor.

Please also count only what is on the side of the streets within the boundaries of your assigned area. If you are along the border, please do not count items that are on the opposite side of the street, if they are outside the boundaries of your assigned areas.

**FOR FURTHER INFORMATION:**

**Necessary Contact Information**

If Community Leaders would like to conduct the Survey, or would like further information on the Survey, they should contact the following groups:

<b>City Agency</b>	<b>Phone Number</b>
Department for the Aging (DFTA)	212-442-1111
Deputy Mayor's Office of Health and Human Services	212-788-2485

## **IMPLEMENTATION OVERVIEW DEFINITION OF TERMS**

**Community Leader** – Local elected officials, government personnel, nonprofit program managers, executive directors, businesspeople, residents, local stakeholders or anyone interested in implementing the Survey in their community.

**Observer** – The Observer is the Survey Volunteer NOT filling out the Survey, looking more closely for Survey elements, and relaying the information to the Recorder. The Observer is the Survey Volunteer who should fill out his or her demographic information at the end of the Survey.

**Recorder** – The Recorder is the Survey Volunteer filling out the Survey based on his/her findings, and the findings of the Observer.

**Survey Area** – The Survey Area is the standard area of an entire Survey, divided by Census tracts, which are then divided into a two by two block radius (or an area that is closest to the 2x2 model). Survey Volunteers should only observe items in their Survey Areas.

**Survey Volunteers** – Survey Volunteers conducting the Survey consist of teams of two people and should, whenever logistically possible, include a senior over 65 years of age, and a person from a younger generation. Each Survey Volunteer team should conduct an entire Survey, and consist of one Observer and one Recorder.

**Team Leader** – Level of leadership reporting to the Community Leader. Performs the training, and is responsible for Survey Volunteers. Team Leaders should collect and deliver the completed Surveys to their respective Community Leaders.

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## Community-Needs Assessment Walking Survey

1. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Day of the Week: \_\_\_\_\_

3. Start time: \_\_\_\_\_ a.m./ p.m. End time: \_\_\_\_\_ a.m. /p.m.

4. BLOCK CODE: \_\_\_\_\_

Thank you for participating in this survey. By completing this survey you are helping improve New York City's vibrant communities.

### OVERVIEW OF TOPICS COVERED IN SURVEY

#### **SAFETY – Page 2**

- Police presence Page 2
- Biking/skateboarding on sidewalk Page 2
- Cracked sidewalks Page 2
- Traffic lights/yield signs/pedestrian islands Page 2
- Benches Page 2
- Trash cans Page 2
- Vacant storefronts/abandoned buildings/closed stores Page 3
- Public restrooms/public drinking fountains Page 3
- Streetlamps Page 3

#### **AMENITIES – Page 4**

- Grocery stores/supermarkets/bodegas/delicatessens Page 4
- Laundromats Page 4
- Beauty shops/nail salons/barbershops Page 5
- Banks/Credit Unions/Check-cashing services Page 5
- Places of worship Page 5
- Senior Centers Page 5
- Social clubs Page 5
- Public spaces/parks Page 5

#### **SERVICES – Page 6**

- Community-based organizations/nonprofits Page 6
- Hospitals Page 6
- Pharmacies Page 6
- Schools Page 6
- Post Office Page 6
- Mail drop boxes Page 6
- Library Page 7
- Subway stations/bus stops Page 7
- Fitness clubs Page 7

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## SAFETY

**When following your assigned route in the prescribed order:**

1. **POLICE:** How many times did you see a police presence (police cars and/or police or other safety officers)?

1	2	3	4	5	6+	None
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2. **BIKING or SKATEBOARDING:** How many people did you see biking or skateboarding **ON** the sidewalks?

1	2	3	4	5	6+	None
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3. **SIDEWALKS:** How many dangerously cracked sidewalks did you pass?

1	2	3	4	5	6+	None
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4. **TRAFFIC LIGHT:** Did any traffic lights change before you fully crossed the street, walking at a normal pace?  Yes  No

If Yes, what are the names of the cross-streets?

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5. **YIELD TO PEDESTRIAN:** How many Yield to Pedestrian signs did you see?

1	2	3	4	5	6+	None
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6. **PEDESTRIAN ISLANDS:** How many streets included in your walk had pedestrian islands?

1	2	3	4	5	6+	None
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7. **BENCHES:** How many benches did you pass along the streets?

1	2	3	4	5	6+	None
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8. **TRASHCANS:** How many street corners included in your walk did not have a trashcan?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

9. **VACANT STOREFRONTS:** How many vacant storefronts did you pass?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

10. **ABANDONED LOTS/BUILDINGS:** How many abandoned buildings did you pass?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

11. **STORES:** How many stores were closed during regular business hours (do not include restaurants or other food service establishments)?

1	2	3	4	5	6+	None
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12. **RESTROOMS:** How many public restrooms did you pass?

1	2	3	4	5	6+	None
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13. **DRINKING FOUNTAINS:** How many drinking fountains did you pass?

1	2	3	4	5	6+	None
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14. **STREET LAMPS:** How many visibly damaged street lamps did you pass?

1	2	3	4	5	6+	None
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## Community Amenities

### When following your assigned route on the prescribed order:

1. **GROCERY STORES/SUPERMARKETS:** How many grocery stores or supermarkets did you pass?

1	2	3	4	5	6+	None
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*Please enter the first supermarket or grocery store that you pass and answer the following questions. (If there is no supermarket or grocery store in the survey area, please enter a convenience store, delicatessen, or bodega to answer the following questions below.)*

- a. Name of Store: \_\_\_\_\_
  
- b. Is it Handicap Accessible?  Yes  No
  
- c. Are Senior Discounts advertised?  Yes  No
  
- d. What are the prices of the following five items:
  - i. \_\_\_\_\_ Price of a conventional **half-gallon of 2% milk**
  
  - ii. \_\_\_\_\_ Price of one pound of conventional **boneless chicken breast**
  
  - iii. \_\_\_\_\_ Price of one loaf of conventional **white bread**
  
  - iv. \_\_\_\_\_ Price per pound of conventional **tomatoes**
  
  - v. \_\_\_\_\_ Price per pound of conventional **red apples**
  
- 2. **BODEGAS/DELICATESSENS/CONVENIENCE STORES:** How many bodegas, delicatessens, and convenience stores did you pass?

1	2	3	4	5	6+	None
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3. **LAUNDROMATS**: How many Laundromats did you pass?

1	2	3	4	5	6+	None
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4. **BEAUTY SHOPS**: How many beauty shops, nail salons or barbershops did you pass?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

If Yes, were any Handicap Accessible?  Yes  No

5. **BANKS**: How many banks or credit unions did you pass?

1	2	3	4	5	6+	None
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If Yes, were any Handicap Accessible?  Yes  No

6. **CHECK CASHING**: How many check cashing or advance pay services did you pass?

1	2	3	4	5	6+	None
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7. **WORSHIP**: How many places of worship did you pass?

1	2	3	4	5	6+	None
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If Yes, were any Handicap Accessible?  Yes  No

8. **SENIOR CENTERS**: How many senior centers did you pass?

1	2	3	4	5	6+	None
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If Yes, were any Handicap Accessible?  Yes  No

9. **SOCIAL CLUBS**: How many social clubs or fraternal clubs and veterans' organizations did you pass?

1	2	3	4	5	6+	None
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10. **Parks and Community Gardens**: How many Public Parks and/or Community Gardens did you pass?

1	2	3	4	5	6+	None
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## Services

### When following your assigned route on the prescribed order:

1. **Community-Based Organizations (CBOs):** Did you pass community/social service/nonprofit organizations? *Check all that apply.*

- [ ] Community Health/Mental Health Clinics  
[ ] Charitable Organization (e.g. Salvation Army, YMCA)  
[ ] Children and Family Centers (e.g. Boys & Girls Clubs)  
[ ] Settlement Houses  
[ ] Food Pantries/Soup Kitchens  
[ ] Public Assistance or Job Centers  
[ ] Private Medical Clinics  
[ ] Dental Clinics  
[ ] Other (please explain): \_\_\_\_\_  
[ ] Other (please explain): \_\_\_\_\_

2. **HOSPITAL:** Did you pass a hospital?  Yes  No

3. **PHARMACIES:** How many pharmacies did you pass?

1	2	3	4	5	6+	<b>None</b>
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4. **SCHOOLS:** How many schools did you pass?

1	2	3	4	5	6+	<b>None</b>
---	---	---	---	---	----	-------------

5. **POST OFFICE:** Did you pass a post office?  Yes  No

If Yes, were any Handicap Accessible?  Yes  No

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**6. MAILBOX:** How many mailboxes did you pass?

1	2	3	4	5	6+	None
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**7. LIBRARY:** Did you pass a library?  Yes  No

**8. SUBWAY:** How many subway station entrances did you pass?

1	2	3	4	5	6+	None
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How many entrances were visibly **handicap accessible?**

1	2	3	4	5	6+	None
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**9. BUS STOPS:** How many bus stops did you pass?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

How many of the bus stops were sheltered?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

**10. FITNESS CLUBS:** How many fitness clubs did you pass?

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

If Yes, were any Handicap Accessible?  Yes  No

If Yes, were any advertised as affordable?  Yes  No

**If you have seen anything that did not fit any of the categories, but you felt should be noted, please describe below:**

**Additional Comments:**

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## SURVEY TAKER PROFILE

1. Gender Female \_\_\_\_\_ Male \_\_\_\_\_

2. What is your age range? Mark [x] in box that applies

[ ] 21 and Under [ ] 55 to 64

[ ] 22 to 34 [ ] 65 to 74

[ ] 35 to 44 [ ] 75 to 84

[ ] 45 to 54 [ ] Decline

3. Are you of Hispanic, Latino, or Spanish origin?

[ ] No [ ] Yes

4. What is your race? Mark [x] in all boxes that apply

[ ] American Indian and/or Alaska Native

[ ] Asian

[ ] Black, African American

[ ] Native Hawaiian and/or Other Pacific Islander

[ ] White

[ ] Other, please specify:

[ ] Decline

5. What was the weather condition when this survey was conducted?

Check off the box(es) that best applies.

[ ] Sun [ ] Snow

[ ] Rain [ ] Other \_\_\_\_\_

[ ] Wind

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**The survey is complete**  
**Thank you for your participation**

**Implementation Plan:  
Training Timeline**

Task	Responsible Party(ies)	Week 1					Week 2					Week 3					Week 4					Week 5					Week 6				
		Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri	Mon	Tues	Wed	Thurs	Fri
Recruitment of volunteers from senior centers, schools, nonprofit organizations	Community Leaders																														
Identify Team Leaders	Community Leaders																														
Organize training space	Team Leaders																														
Procure training materials	Team Leaders																														
Training session with Volunteer Teams 9 a.m.-12 p.m.	Team Leaders Survey Volunteers																														
Survey Implementation 1-4 p.m.	Survey Volunteers																														
Survey Debrief 4:30-5:00 p.m.	Team Leaders Survey Volunteers																														
Review and organization of Surveys	Team Leaders																														
Return of Surveys to Community Leader	Team Leaders																														
Review of completed Surveys, send to appropriate party for processing data	Community Leaders																														
Process data for analysis	Appropriate Party																														

# **City for All Ages Community Needs Assessment Survey**

## **Training Manual for Team Leaders**



**Addressee:** Team Leaders

**Content:** Training Manual and Background Information for Team Leaders  
Training Manual for Survey Volunteer Instruction



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<http://www.nyc.gov/html/dfta/html/caregiver/grandparents.shtml>

# TRAINING MANUAL FOR TEAM LEADERS

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## **I. Welcome Statement**

To the Team Leaders,

Thank you for participating in The City for All Ages Community Needs Assessment Survey. The following document will both serve to familiarize yourself with the project, as well as provide training instructions for the Survey Volunteer team. Please review the document carefully before you begin training Survey Volunteers.

## **II. Introduction to the Project**

In 2007, Mayor Michael Bloomberg launched *Age Friendly NYC*, a series of goals to assess current City services and develop future strategies for elderly New Yorkers. The City for All Ages Community Needs Assessment Survey is one of nearly 60 initiatives in place to achieve these goals.

As part of the City for All Ages initiative, the City needs to have a better understanding of the physical, social, and environmental challenges seniors face in their communities. Through the use of The City for All Ages Community Needs Assessment Survey, trained Survey Volunteers under your supervision will collect critical information. The assessment tool is designed as a short walking Survey that can be quickly and easily executed by teams of Survey Volunteers. The Survey includes a checklist of common elements of the urban streetscape seniors are likely to encounter in their daily routine, including sidewalks, crosswalks, streets and stores.

City agencies are working to improve neighborhoods so that New Yorkers of all ages can live, work and play in safe and enjoyable environments. However, the City needs your help in gathering reliable information at the local level. The information provided by each Survey will be used to better plan for all communities citywide to be more age-friendly.

### **III. Introduction to Being a “Team Leader”**

Your role is critical as an intermediary between the Survey Volunteer teams and the Community Leaders. You are responsible for the training of Survey Volunteers along the guidelines set forth in this training document.

- You are a liaison between the Community Leaders and the Survey Volunteer Teams.
- You will collect the Surveys at the end of each day, and deliver them to the Community Leaders.
- You will go over the data with your Survey Volunteers after completion of the Survey, during the Debrief session.
- You will help assist Survey Volunteers with issues they encounter in the field.
- You will conduct yourself in a manner that is fitting of a community representative.

# TRAINING MANUAL

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## Training Manual Instructions for Team Leaders

Do not read items aloud that are **bold, underlined and italicized**.

These are for YOUR REFERENCE ONLY.

### **Chapter 1: Before the Survey Volunteer Training**

Suggested time: N/A

Location: N/A

**The night before, please call the names and phone numbers listed on a Survey Volunteer contact list given to you by the Community Leader. You should confirm the date and time of the training and remind them of the pre-determined location. In addition, please remind the Survey Volunteers to bring a form of identification, to wear comfortable walking shoes and bring a mobile phone, if they have one.**

**The morning of the training, please arrive one hour before the training. Familiarize yourself with the training site. You should arrange the chairs and tables in a "classroom style," meaning the desks and chairs should face in one direction, towards the front of the room. During check-in, you will stand by the door, but during instruction, please stand at the front of the room.**

## **Chapter 2: Survey Volunteer Check-in**

Suggested time: 30 minutes

Location: Training site

**Please ask for a form of identification, and confirm the information on the Survey Volunteer list that was provided to you by your Community Leader.**

**Please invite the checked-in Survey Volunteers to sit down and converse among themselves.**

## **Chapter 3: Icebreaker Activity**

Suggested time: 15 minutes

Location: Training site

**Please introduce yourself; then, going around the room, ask the volunteers to:**

State their name, current occupation, and a fun fact about themselves.

**If the Check-in takes longer than the suggested time, just ask the Survey Volunteers to state their name.**

## **Chapter 4: Introduction**

Suggested time: 15 minutes

Location: Training site

### **Welcome and thank volunteers for participating in The City for All Ages Community Needs Assessment Survey.**

e.g. "Welcome. Thank you for committing your time and energy by participating in The City for All Ages Community Needs Assessment. On behalf of our community, we thank you for making a difference."

**If a Community Leader attends the training session, have him/her first welcome and greet all the volunteers. If a community official is present, ask if he/she wishes to make a quick statement.**

### **Introduce the purpose (READ ALOUD):**

The City for All Ages Community Needs Assessment is part of a larger effort by the City to improve neighborhoods so that New Yorkers of all ages can live, work and play in safe and enjoyable environments. The City needs your help in gathering reliable information at the local level. The information provided by each Survey will be used to better plan for all communities citywide to be more age-friendly.

The purpose of the Survey is to determine the age-friendliness of communities by taking an inventory of what exists and what does not. Each item on the Survey will help inform policy and change in your community. An example of this would be found in the grocery store section.

### **Have the volunteers turn to Page 4 in the Survey. Hold the Survey up at this page.**

The Survey is asking for prices and the existence of grocery stores. Here, the Survey is not asking for the mere existence of the grocery stores, it is trying to record where there is affordable and nutritious food for seniors.

## **Chapter 5: The Volunteer Manual Walkthrough**

Suggested time: 1.5 Hours

Location: Training site

### **Introduce the Survey, ask that questions be saved for later, unless otherwise indicated.**

The Survey is conducted as a walking Survey of your assigned area within a Community Board District.

You will walk in pairs. In each pair, there are two roles, a Recorder and an Observer. The Recorder is responsible for the Survey. He or she will fill out the Survey. The Observer will announce to the Recorder every element that he or she sees on the street in the survey area. The Observer is the person who should fill out his/her demographic information at the end of the Survey.

You will be walking on a predetermined route.

### **Show example map of the predetermined route given to you by your Community Leader. Pass this item around. If no predetermined route was provided, use Appendix A.**

It is important to know that you should only be looking on the GROUND FLOOR ONLY. You can only count items in the Survey if they have an entrance on the ground floor.

You should also count only what is on the side of the streets within the boundaries of your assigned area. If you are along the border, please do not count items that are on the opposite side of the street, if they are outside the boundaries of your assigned areas.

### **Show example of streetscape photo. This will be provided by your Community Leader. Ask the Survey Volunteers to see if they see items on the Survey in the photo. Ask them if the item on the opposite street (i.e. outside of the survey area) is counted in the Survey. If no photo was provided, use Appendix B.**

### **Pause for questions. Continue after the final question is addressed.**

### **Read the following section aloud:**

Now, please pull out the Survey Volunteer Manual. You can bring this with you while conducting your Survey.

I will now read from this manual. It will help your understanding of how to do the Survey, as well as help define some of the items we are looking for in the Survey. I would like to ask that if you have any questions, please write them down to ask at the end of the walkthrough.

### **READ SURVEY VOLUNTEER MANUAL VERBATIM.**

### **After finishing the text, go to the next Chapter.**

## **Chapter 6: Wrap up**

Suggested time: 30 minutes

Location: Training site

**Provide a forum for a question and answer section. Ask if the volunteers have any questions regarding the subject material.**

**At the end of the final question, please ask the volunteers to go outside to participate in a “live exercise.” You and the Survey Volunteers will walk the block of the training site as one group. Please ask the Survey Volunteers to point out examples of items on the Survey and answer any questions that they may have during this exercise.**

**At this point, please divide the team into pairs. Try to accommodate friends/relatives/colleagues/couples; however, if there are elderly in the group, try to pair the elderly with someone of a different age group.**

**Thank the Survey Volunteers for their attention, and remind them that if problems arise, they can call you. Remind the Survey Volunteers to regroup for The Debrief (Chapter 7)**

**At this point, the Survey Volunteer pairs can begin the Survey.**

## **Chapter 7: Debrief**

Suggested time: 15 minutes

Location: To Be Determined (After the Survey has been conducted)

**The Debrief will serve as the feedback mechanism for the Survey. You should ask what the Survey Volunteers thought of the Survey process, and if they had any questions or comments regarding the Survey itself.**

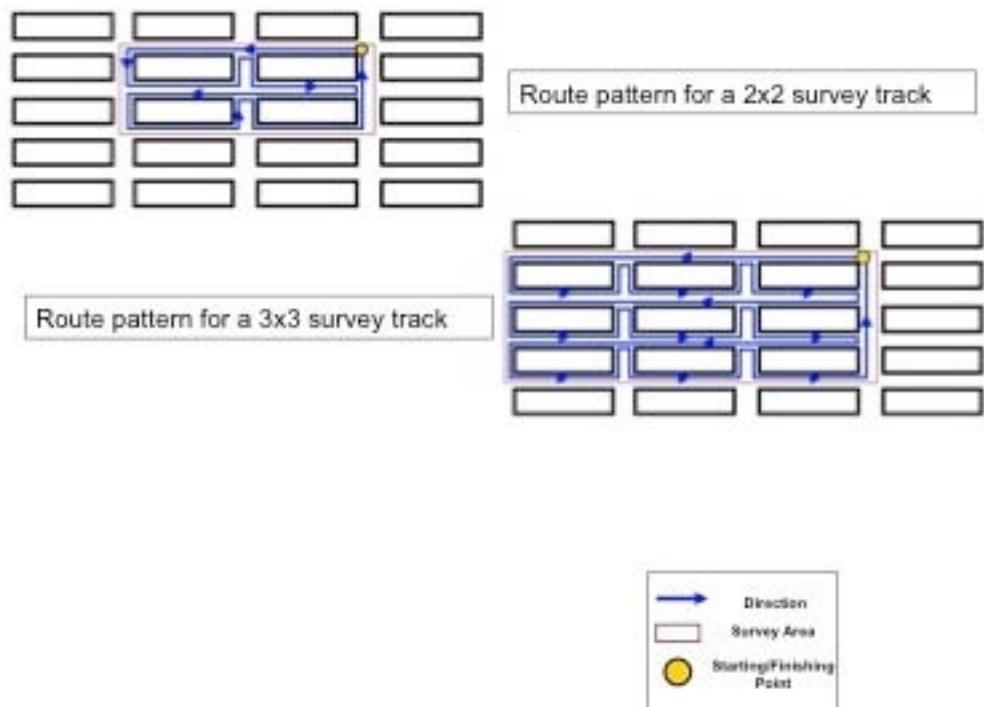
**Thank the Survey Volunteers for participating, and remind them of the difference they are going to make in their community.**

**THE TRAINING MANUAL IS COMPLETE.**

**Thank you for taking on the additional responsibility of being Team Leaders. Your participation is vital in helping to make communities more age-friendly.**

## Appendix A

### Example of Predetermined Route



---

These are general examples of predetermined route patterns

**Appendix B**

**Example of Streetscape Photo**



**True or False?**

Count the Laundromats on the opposite side of the street, even if they are outside of the Survey area.

# **City for All Ages Community Needs Assessment Survey**

## **Training Manual for Survey Volunteers**



**Addressee:** Survey Volunteers

**Content:** Training Manual

*About the Cover:*

**The City for All Ages Mosaic** by Thomas Coquerel and Douglas Chiu takes portraits from the “**GRANDPARENT PHOTO GALLERY**” series by photographer Willie Davis. The series honors the estimated 100,000 grandparents who are raising their grandchildren across the City. Members of DFTA’s Grandparent Resource Center (GRC), the 20 portraits of grandparents and their families capture the special bond between grandparent caregivers and their grandchildren. For more information on this series and the GRC, please visit DFTA’s website at:

<http://www.nyc.gov/html/dfta/html/caregiver/grandparents.shtml>

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## HOW TO FILL OUT THE SURVEY

When filling out the survey, you will be checking off boxes when you see the item at the **ground level** on **YOUR** side of the prescribed survey area. When checking off the boxes, make sure that you mark the box with a **SINGLE** diagonal strikethrough like the example below.



**SENIOR CENTERS:** How many senior centers did you pass?

<del>1</del>	2	3	4	5	6+	None
--------------	---	---	---	---	----	------

Do **NOT** make an “x” mark. See below:



**SENIOR CENTERS:** How many senior centers did you pass?

<del>X</del>	2	3	4	5	6+	None
--------------	---	---	---	---	----	------

Once you have completed the entire survey, go back to each item on the page and circle the last box that you marked off so that the final count is recorded. Please see the example below.

**BEAUTY SHOPS:** How many beauty shops, nail salons or barbershops did you pass?

<del>1</del>	<del>2</del>	<del>3</del>	<del>4</del>	5	6+	None
--------------	--------------	--------------	--------------	---	----	------

This means that at the end of your walking survey, you recorded four (4) beauty shops. The final count for beauty salons is 4.

Survey Volunteer ID

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**Survey Volunteer ID:** Each survey volunteer will receive a unique identification number during the check-in process from the Team Leader. Please write in the identification number in the boxes above. Please put one number **PER** box.

**Community Needs Assessment Walking Survey**

1. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Day of the Week: \_\_\_\_\_

3. Start time: \_\_\_\_\_ a.m./ p.m. End time: \_\_\_\_\_ a.m. /p.m.

4. BLOCK CODE: \_\_\_\_\_

The **block code** is the **Community District Number** followed by a **dash** and the **Census Tract number**. If the Census Tract is subdivided then the code should end with .01, .02, .03, etc.

Thank you for participating in this Survey. By completing this Survey you are helping improve New York City's vibrant communities.

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## OVERVIEW OF TOPICS COVERED IN SURVEY

Please note that this is a “quick guide” or overview of the topics covered in your walking survey. Please use these page numbers to find items on the survey.

### SAFETY – Page 2

- Police presence Page 2
- Biking/skateboarding on sidewalk Page 2
- Cracked sidewalks Page 2
- Traffic lights/yield signs/pedestrian islands Page 2
- Benches Page 2
- Trash cans Page 2
- Vacant storefronts/abandoned buildings/closed stores Page 3
- Public restrooms/public drinking fountains Page 3
- Streetlamps Page 3

### AMENITIES – Page 4

- Grocery stores/supermarkets/bodegas/delicatessens Page 4
- Laundromats Page 4
- Beauty shops/nail salons/barbershops Page 5
- Banks/Credit Unions/Check-cashing services Page 5
- Places of worship Page 5
- Senior Centers Page 5
- Social clubs Page 5
- Public spaces/parks Page 5

### SERVICES – Page 6

- Community-based organizations/nonprofits Page 6
- Hospitals Page 6
- Pharmacies Page 6
- Schools Page 6
- Post Office Page 6
- Mail drop boxes Page 6
- Library Page 7
- Subway stations/bus stops Page 7
- Fitness clubs Page 7

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**SAFETY****When following your assigned route in the prescribed order:**

1. **POLICE:** How many times did you see a police presence (police cars and/or police or other safety officers)?

Walk on your side of the prescribed Survey Area and count the number of police presence. Check off one box **PER** police presence. Try to avoid double counting- if you see a police vehicle drive down your Survey Area twice, only count it once.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



**The following are considered “Police Presence.” Please check off one box if you see:**

- ✓ A police vehicle with officers. (**NOTE:** A police vehicle, regardless to the number of officers in it is counted **ONCE**)
- ✓ A police officer on foot patrol in your Survey Area.
- ✓ A crossing guard in your Survey Area.
- ✓ A traffic control officer in your Survey Area.



2. **BIKING or SKATEBOARDING:** How many people did you see biking or skateboarding **ON** the sidewalks?

Walk on your side of the prescribed Survey Area and count the number of people that are riding their bicycle or skateboarding on the sidewalk that you are surveying. Check off one box **PER** person skateboarding/biking. **NOTE:** You are only counting a person **IF** they are biking or skateboarding **on the sidewalk**. Do **NOT** count a person who is biking or skateboarding on the street.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

--	--	--	--



**3. SIDEWALKS:** How many dangerously cracked sidewalks did you pass?

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>	<b>None</b>
----------	----------	----------	----------	----------	-----------	-------------

Walk on your side of the prescribed Survey Area and count the number of dangerously cracked sidewalks. Check off one box **after each** cracked sidewalk.



A dangerously cracked sidewalk is considered the following:

- ✓ One or more pieces of a sidewalk are missing or sidewalk was never built or completed.
- ✓ One or more pieces of the sidewalk are cracked to such an extent that one or more pieces of the sidewalk may be loosened or easily removed.
- ✓ There is a clear indication that a person may trip/fall due to a vertical surface difference between pieces of a sidewalk due to cracks.
- ✓ Improper slope, which means sidewalk contains pieces that do not drain toward the curb and retain water, sidewalk needs to be replaced to provide for satisfactory drainage.<sup>1</sup>

**4. TRAFFIC LIGHT:** Did any traffic lights change before you fully crossed the street, walking at a normal pace?

When you walk in your Survey Area and reach a large intersection, wait until the light turns red and the crossing signal is allowing you to cross the street. Cross the street at a normal walking pace and look at the traffic light. If the traffic light turns green before you are able to completely cross the street, then check the "Yes" box. If you are able to completely cross the street at a normal walking pace before the traffic light changes, then check the "No" box. Please write down the names of the cross-street where you were unable to cross the street in time for the traffic lights to change.

<sup>1</sup> <http://www.nyc.gov/html/dot/html/faqs/sidewalkfaqs.shtml#defect>

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Yes     No

If Yes, what are the names of the cross-streets?

---



5. **YIELD TO PEDESTRIAN:** How many Yield to Pedestrian signs did you see?

Walk on your side of the prescribed Survey Area and count the number of Yield to Pedestrian signs that you see. Check off one box PER sign. **A Yield to Pedestrian sign can usually be found at the end of the street.**

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **Yield to Pedestrian sign** tells the motorist that a pedestrian has the right of way and should therefore make a complete stop or slow down. It is usually found in yellow and black colors or, less frequently, black and white.

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**6. PEDESTRIAN ISLANDS:** How many streets included in your walk had pedestrian islands?

Walk down your Survey Area and count the number of Pedestrian Islands that you pass. Check off one box **PER** Pedestrian Island.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



**Pedestrian Island** is defined as any public space next to or separating a roadway that can provide somewhere to stand for a pedestrian.<sup>2</sup>



**7. BENCHES:** How many benches did you pass along the streets?

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<sup>2</sup> <http://www.nybc.net/programs/sharetheroadmodule.pdf>

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Walk on your side of the prescribed Survey Area and count the number of **PUBLIC** benches that you see. Check off one box **PER** bench. This question refers to benches that can be used by the public (i.e. **NOT** a bench from a private dwelling or establishment). Also, do **NOT** count benches that are found under bus shelters.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>	<b>None</b>
----------	----------	----------	----------	----------	-----------	-------------



**8. TRASHCANS:** How many street corners included in your walk did not have a trashcan?

Walk on your side of the prescribed Survey Area and count the number of street corners that did not have a trashcan. **NOTE:** You are only checking off a box if there is **NOT** a trashcan in the corner.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>	<b>None</b>
----------	----------	----------	----------	----------	-----------	-------------



**9. VACANT STOREFRONTS:** How many vacant storefronts did you pass?

Walk on your side of the prescribed Survey Area and count the number of vacant storefronts that you pass. Check off one box **PER** vacant storefront.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>	<b>None</b>
----------	----------	----------	----------	----------	-----------	-------------

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**A Vacant Storefront** is defined as a storefront that has a “FOR RENT,” “SPACE AVAILABLE” or “FOR LEASE” sign.



**10. ABANDONED LOTS/BUILDINGS:** How many abandoned buildings did you pass?

Walk on your side of the prescribed Survey Area and count the number of abandoned lots and/or abandoned buildings that you pass. Check off one box **PER** building or lot.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



**Abandoned Lot/Buildings** is defined as property that has left the possession of its owner. Some identifying features include boarded up windows and doors, unkempt areas surrounding the building, and littered trash.



**11. STORES:** How many stores were closed during regular business hours (do not include restaurants or other food service establishments)?

Walk on your side of the prescribed Survey Area and count the numbers of stores that are closed during “business hours.” **Business hours** refers to the hours between **9am to 5pm**. This question should identify the number of stores that would normally be open during a 9am-5pm day.

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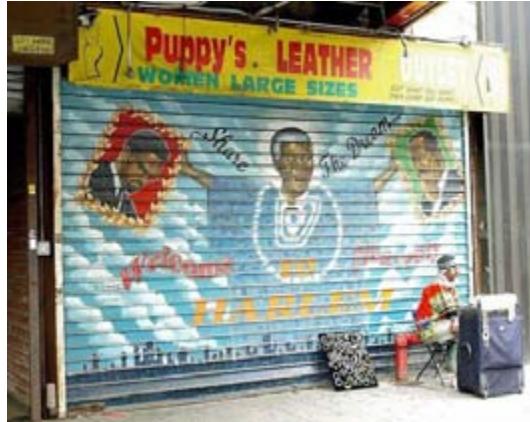
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>
----------	----------	----------	----------	----------	-----------

**None**

Stores closed during business hours may be identified by the following:

- ✓ Stores that do not look vacant but have a "Closed" sign during a 9am-5pm day.
- ✓ Stores that clearly look like they are in business; **HOWEVER**, the doors are locked or a gate is down.

**NOTE:** Do **NOT** include restaurants or similar food-service establishments, as they tend to be open during non-traditional hours.



**12. RESTROOMS:** How many public restrooms did you pass?

Walk on your side of the prescribed Survey Area and count the number of public restrooms that you pass. Check off one box **PER** public restroom.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6+</b>
----------	----------	----------	----------	----------	-----------

**None**

A **public restroom** is defined as a restroom that is open to everyone to use. **NOTE:** Do **NOT** include a public restroom that is in a private facility (i.e. Barnes & Noble, Starbucks, Dunkin' Donuts).

**13. DRINKING FOUNTAINS:** How many drinking fountains did you pass?

Walk on your side of the prescribed Survey Area and count the number of public water fountains that you see. Public drinking fountains are generally identified as a drinking fountain that keeps the public hydrated and are usually found in public parks. Check off one box **PER** public water fountain.

--	--	--	--

1	2	3	4	5	6+
---	---	---	---	---	----

None
------



**14. STREET LAMPS:** How many visibly damaged street lamps did you pass?

Walk on your side of the prescribed Survey Area and count the number of street lamps that look visibly damaged. Since this survey will be conducted during the day, the surveyor should look at street lamps that look visibly damaged such as the following:

- ✓ A broken light
- ✓ The head of the lamp is missing
- ✓ Loose wires are showing
- ✓ Access door is off or loose

Check off one box **PER** damaged street lamp.

1	2	3	4	5	6+
---	---	---	---	---	----

None
------



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## Community Amenities

### When following your assigned route on the prescribed order:

1. **GROCERY STORES/SUPERMARKETS:** How many grocery stores or supermarkets did you pass?

Walk on your side of the prescribed Survey Area and count the number of grocery stores and supermarkets that you pass. Check off one box **PER** grocery store/supermarket.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **supermarket/grocery store** is defined as a store that sells primarily food (i.e. Key Food, Associated, Fair Trade).



Please enter the first supermarket or grocery store that you pass (if there is no supermarket or grocery store, please enter a convenience store, delicatessen, or bodega to answer the following questions below.

a. Name of Store: \_\_\_\_\_

Identify the name of the supermarket or grocery store and write it in Section A.

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b. Is it Handicap Accessible?

Identify if the grocery store or supermarket is **Handicap Accessible**. A store is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes     No



c. Are Senior Discounts advertised?

Look throughout the store for signs that advertise **Senior Discounts**. If you find senior discounts, check off the “Yes” box. If you do not find senior discounts, check off the “No” box.

Yes     No



A **senior discount** refers to discounts given to a person that is considered a senior citizen. Senior discounts can be eligible for people that are 50 years old and above or 60 years old and above.

d. What are the prices of the following five items:

i. \_\_\_\_\_ Price of a conventional **half-gallon of 2% milk**

While in the supermarket or grocery store, write down the price of a **conventional** half-gallon of 2% milk. **Conventional** refers to the generic brand/lowest price.

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ii. \_\_\_\_\_ Price of one pound of conventional **boneless chicken breast**

While in the supermarket or grocery store, write down the price of ONE pound of **conventional** boneless chicken breast. **Conventional** refers to the generic brand/lowest price.

iii. \_\_\_\_\_ Price of one loaf of conventional **white bread**

While in the supermarket or grocery store, write down the price of one loaf of **conventional** white bread. **Conventional** refers to the generic brand/lowest price.

iv. \_\_\_\_\_ Price per pound of conventional **tomatoes**

While in the supermarket or grocery store, write down the price per pound of **conventional** tomatoes. **Conventional** refers to the generic brand/lowest price.

v. \_\_\_\_\_ Price per pound of conventional **red apples**

While in the grocery store or supermarket, write down the Price per pound of **conventional** red apples. **Conventional** refers to the generic brand/lowest price.

2. **BODEGAS/DELICATESSENS/CONVENIENCE STORES:** How many bodegas, delicatessens, and convenience stores did you pass?

Walk on your side of the prescribed Survey Area and count the number of bodegas/delicatessens/convenience stores that you pass. Check off one box **PER** bodega/delicatessen/convenience store.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **bodega/delicatessen/convenience store** is defined as a small store that sells a limited amount of food, candy, drinks. It carries a limited amount of products and generally stays open during late hours.

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3. **LAUNDROMATS:** How many Laundromats did you pass?

Walk on your side of the prescribed Survey Area and count the number of Laundromats that you pass. Check off one box **PER** Laundromat.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



4. **BEAUTY SHOPS:** How many beauty shops, nail salons or barbershops did you pass?

Walk on your side of the prescribed Survey Area and count the number of beauty shops that you pass. Check off one box **PER** beauty shop.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------

 A **beauty shop** is considered to be a place where people get their beauty needs met such as manicure, pedicure, haircuts, waxing, and tanning. The following can be considered a beauty salon:

- ✓ Hair salon
- ✓ Barber shop
- ✓ Nail Salon
- ✓ Spa
- ✓ Tanning Salon

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**If Yes**, were any Handicap Accessible?

A beauty shop is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes    No



5. **BANKS:** How many banks or credit unions did you pass?

Walk on your side of the prescribed Survey Area and count the number of banks/credit unions that you pass. Check off one box **PER** bank/credit union.

1	2	3	4	5	6+
---	---	---	---	---	----

None
------



A **bank** is defined as an establishment that allows a person to cash a check at no fee to its customers, open a savings account and/or credit card, or apply for a loan.

A **credit union** is defined as a cooperative establishment which allows its members to take out a loan at a low interest rate.

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If Yes, were any Handicap Accessible?

Identify if the bank/credit union is Handicap Accessible. A bank/credit union is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes     No



6. **CHECK CASHING:** How many check cashing or advance pay services did you pass?

Walk on your side of the prescribed Survey Area and count the number of check cashing or advance pay service that you pass. Check off one box **PER** check cashing/advance pay service.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **check cashing/advance pay service** is defined as an establishment that allows a person to cash a check for a fee and/or take out a loan at a high interest rate.

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7. **WORSHIP**: How many places of worship did you pass?

Walk on your side of the prescribed Survey Area and count the number of places of worship that you pass. Check off one box **PER** place of worship.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **place of worship** is defined as a place where people gather to practice their religion. Examples of these places include, but are not limited to, the following:

- ✓ Church
- ✓ Temple
- ✓ Synagogue
- ✓ Mosque



If Yes, were any Handicap Accessible?

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Identify if the place of worship is Handicap Accessible. A place of worship is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes     No



8. **SENIOR CENTERS:** How many senior centers did you pass?

Walk on your side of the prescribed Survey Area and count the number of senior centers that you pass. Check off one box **PER** senior center.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



A **senior center** is defined as a community facility with regular operating hours and staff that provides meals, classes, recreational activities, and a range of health and social services to meet the diverse needs of mature, older adults and assist them in maintaining healthy and independent lives.



If Yes, were any Handicap Accessible?

--	--	--	--

Identify if the senior center is Handicap Accessible. A senior center is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes     No



9. **SOCIAL CLUBS:** How many social clubs or fraternal clubs and veterans' organizations did you pass?

Walk on your side of the prescribed Survey Area and count the number of social clubs or fraternal clubs and veterans' organizations that you pass. Check off one box **PER** social club.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



**Social/fraternal clubs and veterans' organizations** are defined as a group of people associated for a common purpose or mutual advantage, usually in an organization that meets regularly. Examples of social/fraternal clubs and veterans' organizations are the Elks, Masons, VFW, Association of Italian Americans.

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**10. *Public Parks and Community Gardens:*** How many Public Parks and/or Community Gardens did you pass?

Walk on your side of the prescribed Survey Area and count the number of public parks and/or community gardens that you pass. Check off one box **PER** park/community garden. **NOTE:** Do not count parks, gardens or green spaces that are in private dwellings or private establishments.

1	2	3	4	5	6+	None
---	---	---	---	---	----	------



**Public Park** is defined as an area of public land, usually laid out with walks, drives, playgrounds, gardens, etc., for public recreation.

**Community Gardens** is defined as a piece of land that is gardened by a group of people from the community.

Survey Volunteer ID

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## Services

### When following your assigned route on the prescribed order:

1. **Community-Based Organizations (CBOs)**: Did you pass community/social service/nonprofit organizations? *Check all that apply.*

[ ] Community Health/Mental Health Clinics



**Community Health/Mental Health Clinics** is defined as medical and mental health establishments run by several specialists working in cooperation and sharing the same facilities.

**Community Health Centers** are community-based organizations that serve populations with limited access to health care. These include low income populations, the uninsured, those with limited English proficiency, individuals and families experiencing homelessness, and those living in public housing.



[ ] Charitable Organizations (e.g. Salvation Army, YMCA)



**Charitable Organization** is defined as a type of nonprofit organization or fund created and operated for charitable purposes. Examples of charitable organizations are the Salvation Army, YMCA, and Catholic Charities.

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[ ] Children and Family Centers (e.g. Boys & Girls Clubs))



**Children and Family Centers** are Community-Based Organizations, such as a Boys and Girls Club, which serve as safe places for children to learn, grow and have fun in a safe environment.



[ ] Settlement Houses



**Settlement Houses** are defined as a center in a disadvantaged area that provides services for the community.

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[ ] Food Pantries/Soup Kitchens



**Food Pantries** is defined as place where food is contributed and made available to poor or displaced people to bring to their homes.

**Soup Kitchens** are places where meals are offered on site free or at very low cost to the needy. Oftentimes food pantries and soup kitchens are located in churches and other religious organizations, and Community-Based Organizations.



[ ] Public Assistance or Job Centers



**Public Assistance Center** is a place where a person can apply for assistance such as food stamps, social security benefits, and/or public housing. It may be marked with a Human Resources Administration (HRA) sign.

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[ ] Private Medical Clinics: \_\_\_\_\_



**Private Medical Clinics** is defined as a private health facility that treats outpatients often in a community and is generally smaller than a hospital.



[ ] Dental Clinics: \_\_\_\_\_



**Dental Clinics** is defined as a place that practices dentistry.



[ ] Other (please explain): \_\_\_\_\_

[ ] Other (please explain): \_\_\_\_\_

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**2. HOSPITAL:** Did you pass a hospital?

Walk on your side of the prescribed Survey Area and observe if there is a hospital on your side of the street. Check off the “Yes” box if there is a hospital or the “No” box if there is not a hospital.

Yes     No



**Hospital** is defined as a building designed to diagnose and treat the sick and/or injured. It usually has a staff of doctors and nurses to aid in the treatment of patients



**3. PHARMACIES:** How many pharmacies did you pass?

Walk on your side of the prescribed Survey Area and observe if there are pharmacies on your side of the street. Check off one box **PER** pharmacy.

1	2	3	4	5	6+	None
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**A pharmacy** is defined as an establishment that sells drugs (medication). It is also known as a drugstore.

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**4. SCHOOLS:** How many schools did you pass?

Walk on your side of the prescribed Survey Area and observe the number of schools on your side of the street. Check off one box **PER** school. Please include charter, private, and public schools.

1	2	3	4	5	6+	None
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A **school** is defined as an establishment which people (children and adults) attend to learn and receive an education.



**5. POST OFFICE:** Did you pass a post office?

Walk on your side of the prescribed Survey Area and observe if there is a post office on your side of the street. Check off the "Yes" box if there is a post office or the "No" box if there is not a post office.

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Yes     No



**Post Office** is defined as an independent agency of the federal government which is in charge of mail delivery for individuals and/or businesses. Do **NOT** include privately owned and operated mail delivery organizations, such as DHL, UPS and FedEx.



If Yes, were any Handicap Accessible?

Identify if the post office is Handicap Accessible. A post office is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign

Yes     No



#### 6. MAILBOX: How many mailboxes did you pass?

Walk on your side of the prescribed Survey Area and observe the number of mailboxes on your side of the street. Check off one box **PER** mailbox. **NOTE:** Only include mailboxes that are operated and maintained by the US Postal Service (USPS). Do not include brown drop boxes operated and maintained by the USPS. Do not include mailboxes that are operated and maintained by private non-USPS companies such as DHL, UPS, and FedEx.

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1	2	3	4	5	6+
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None



**7. LIBRARY:** Did you pass a library?

Walk on your side of the prescribed Survey Area and observe if there is a library on your side of the street. Check off the “Yes” box if there is a library or the “No” box if there is not a library.

Yes     No



**Library** is defined as a place in which there are literary materials, such as books, periodicals, newspapers, pamphlets, prints, records, and tapes.



**8. SUBWAY:** How many subway station entrances did you pass?

Walk on your side of the prescribed Survey Area and observe the number of subways on your side of the street. Check off one box **PER** subway.

1	2	3	4	5	6+
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None

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A **Subway** is defined as an underground railway run by the MTA for mass transit of people in New York metropolitan area.



How many entrances were visibly **Handicap Accessible**?

Identify if the subway is Handicap Accessible. A subway is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a Handicap Accessible sign



1	2	3	4	5	6+	None
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**9. BUS STOPS:** How many bus stops did you pass?

Walk on your side of the prescribed Survey Area and observe the number of bus stops on your side of the street. Check off one box **PER** bus stop. **NOTE:** Only include bus stops from the MTA.

1	2	3	4	5	6+	None
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**Bus stop** is defined as a place where public transport buses stop to allow passengers to use public transportation.



How many of the bus stops were sheltered?

Walk on your side of the prescribed Survey Area and observe the number of bus shelters on your side of the street. Check off one box **PER** bus shelter. **NOTE:** Only include bus shelter stops from the MTA.

1	2	3	4	5	6+	None
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**Bus shelter** is defined as a covered structure at a bus stop providing protection against the weather for people waiting for a bus.

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**10. FITNESS CLUBS:** How many fitness clubs did you pass?

Walk on your side of the prescribed Survey Area and observe the fitness clubs on your side of the street. Check off one box **PER** fitness club.

1	2	3	4	5	6+	None
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**Fitness Clubs** is defined as a place with facilities and equipment for people to maintain or improve their physical fitness.

If **Yes**, were any Handicap Accessible?  **Yes**  **No**

Identify if the fitness club is Handicap Accessible. A fitness club is considered to be **Handicap Accessible** if it has the following:

- ✓ A ramp that leads to the entrance
- ✓ The store is at ground level
- ✓ The store displays a handicap accessible sign



If **Yes**, were any advertised as affordable?  **Yes**  **No**

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If you identify a fitness center, look around the front of the store for any signage that advertises special discount offers or savings deals. If you see a sign that has special discount offers or savings deal then check the “Yes” box. If you do not see a sign that has special discount offers or savings deal, then check off the “No” box.



**If you have seen anything that did not fit any of the categories, but you felt should be noted, please describe below:**

Walk on your side of the prescribed Survey Area, if there is anything that you think should be part of the survey, please write down the name of the item in this space and write a quick explanation of why you feel the missing item should be added to the survey.

**Additional Comments:**

At the end of conducting the survey, please take a few moments to write down some comments and impressions you had from your experience of the Community Needs Assessment Walking Survey. Those comments are important to improve the Survey in the future.

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## **SURVEY TAKER PROFILE**

**NOTE: This section should be filled out ONLY by the Survey Observer.**

When you finish the previous sections on the survey, please answer the following questions

**1. Gender** Female \_\_\_\_\_ Male \_\_\_\_\_

Check off the "Female" box if the survey observer was female. Check off the "Male" box if the survey observer was Male.

**2. What is your age range? Mark [x] in box that applies**

- 21 and Under       55 to 64
  - 22 to 34       65 to 74
  - 35 to 44       75 to 84
  - 45 to 54       Decline

Check off the box that is representative of the age range of the survey observer.

### **3. Are you of Hispanic, Latino, or Spanish origin?**

- [ ] No [ ] Yes

Check off the box that corresponds to the survey observer's origin. Check off "Yes" if the observer is from **Hispanic, Latino, or Spanish origin** and check off "No" otherwise.

**4. What is your race? Mark [x] in all boxes that apply**

- American Indian and/or Alaska Native
  - Asian
  - Black, African American
  - Native Hawaiian and/or Other Pacific Islander
  - White
  - Other, please specify:
  - Decline

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Check off the box(es) that best represent the survey observer's race. The survey observer can be from various origins. In that case check off all boxes that are needed to describe the race of the survey observer.

**5. What was the weather condition when this survey was conducted? Check off the box(es) that best applies.**

[ ] Sun

[ ] Snow

[ ] Rain

[ ] Other \_\_\_\_\_

[ ] Wind

Check off the box(es) that best describe the weather conditions during the time of the survey. If you consider that the weather was sunny and windy, check off the two boxes: "Sun" and "Wind." If you have any doubts about the weather or if the weather cannot be described within the boxes proposed, check off the "Other" box and describe the weather in your own words.

**The survey is complete**  
**Thank you for your participation**

When you are finished with the survey, hand in the completed survey to your assigned Team Leader.