

COMMUNITY PREPAREDNESS INDEX GUIDE

Save the Children

National Center for Disaster Preparedness, Columbia University

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To request a username and password to complete the Community Preparedness Index (CPI), or to ask questions, please contact Save the Children at GetReady@SaveChildren.org.

For more information about the CPI, please visit Save the Children's Get Ready Get Safe website at: <http://www.SaveTheChildren.org/CPI>

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SUMMARY

The Community Preparedness Index (CPI) is a community assessment tool for emergency preparedness that can be used by interagency partners within a local jurisdiction that are responsible for the safety and protection of children during and after emergencies. The CPI is similar to a survey and provides questions pertaining to the regulatory and emergency preparedness practices of seven child-serving sectors: Child care centers, Family child care homes, Public schools, Private schools, Hospitals, Foster care, and Emergency shelters. The resulting data is for use by the community to identify and set priorities for preparedness activities. Although the data is shared with Save the Children and Columbia University, individual community results will not be shared publicly and the data would only be used for aggregate reporting, such as aggregate reports of results by geographic region or population size.

Ideally, the CPI would be completed collaboratively by a working group of knowledgeable representatives from the seven sectors, which may include both local and state-level representatives. The CPI Guide provides details on how the CPI works, including technical information on completing the online CPI survey; the types of knowledge needed from each sector to complete the CPI; ideas for forming in-person or virtual working groups; and how the CPI results can be interpreted and used for future planning.

It is important to review this Guide before beginning the online CPI survey. Some basic but important rules about using the online tool include:

- Only one online user, per community, at a time.
- Click the FORWARD arrow to save responses. The BACK arrow does not save responses.
- Incorrect answers can affect the values. If you don't know the answer to a question, select "Don't know." You can also leave the question blank if you intend to complete it later.
- Do not use the "back," "go back," or "prior page" buttons or arrows of the Internet browser to return to an earlier screen in the survey. Always use the arrows at the bottom of the current screen.
- Print and save a copy of the summary page for each completed section.
- Fill out the "Lead Organizations" section last, after you have completed and viewed your values for the other eight sections.
- There is no "log out" button. You can exit the survey by closing the survey's browser. Be sure to save your answers first by clicking the FORWARD arrow at the bottom of the screen.

The CPI questions can be viewed outside of the online survey at the CPI website: <http://www.SavetheChildren.org/CPI>. If the CPI answers are readily available, because they were gathered in advance or the user is sufficiently knowledgeable, each section should take 45 minutes or less to complete.

"The CPI is a great starting point for emergency managers to find out how well their community's children are cared for in disasters." – David Grizzle, Office of Emergency Management, Norman, OK

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1 INTRODUCTION

On any given day, the majority of America's 74 million children are in the custody of institutions including public and private schools, child care and day care centers, and hospitals, among others. Children depend upon the emergency preparedness of these institutions to ensure their safety and protection during and after disasters. Given children's unique health, developmental and security needs, the consequences of inadequate preparedness may be devastating for children and their families. In recent years, catastrophic disasters such as Hurricane Katrina and Hurricane Sandy, Midwest tornados and floods, and wildfires in California have destroyed entire communities, resulting in loss of life and the displacement of children and their families from homes, schools, jobs and social safety nets. However, most fatalities, injuries and damage caused by disasters are preventable.

Emergency preparedness that addresses the complex needs of children is challenging because the systems providing services to this population are diffusely spread across a number of different sectors. Before a disaster, institutional providers need to address preventable hazards in buildings, establish leadership roles and emergency communication methods, and exercise disaster response plans. In the aftermath of a disaster, institutions may also need to provide children access to safe shelter and play spaces, physical and mental health assessment and services, and educational continuity. When children's needs are unmet, recovering households bear the burden. This burden is felt most by families struggling with grief and physical injuries, lost income, damaged or lost homes, and the challenges of navigating disaster relief systems. Therefore, improvements in the emergency preparedness, safety and continuity of institutions that care for children can strengthen the resiliency of the whole community and help families to achieve a faster and more effective recovery.

"When communities integrate the needs of children and adults with disabilities and others with access and functional needs into their community wide planning initiatives, they maximize resources, meet their obligations and strengthen their ability to prepare for, protect against, respond to, recover from and mitigate all hazards." – Craig Fugate, Administrator, Federal Emergency Management Agency, 2011

In the seven years since Hurricane Katrina, Save the Children has emerged as a national leader in ensuring children's well-being during domestic emergencies. To assist communities in determining sector-specific levels of preparedness, in 2013, Save the Children partnered with the National Center for Disaster Preparedness at Columbia University to develop the Community Preparedness Index (CPI). The CPI is a community assessment tool, similar to an online survey, that can be used by local jurisdictions to identify strengths and weaknesses in preparedness, policies, leadership and response coordination of institutions including public and private schools, child care centers, family child care homes, foster care, hospitals and emergency shelters. The output of the CPI is a quantitative indication of a local jurisdiction's preparedness for addressing children's needs during a major disaster or emergency. The CPI was developed and tested with input from local preparedness experts including members of the International Association of Emergency Managers (IAEM) Children and Disasters Caucus, the Los Angeles County Children in Disasters Working Group, and individual experts from across the country in emergency management, public health and hospital preparedness, and child protection. This initiative builds upon recommendations of the National Commission on Children and Disasters' *2010 Report to the President and Congress*, which urged federal, state and local leaders to ensure children's needs are included in emergency management and disaster readiness at all levels.

The CPI is both a community assessment tool and a process. By completing the CPI online survey, users will generate quantitative measures of their jurisdiction's preparedness. The outcome is a snapshot of how well the jurisdiction is doing in developing policies and protocols to protect children. The measures can provide insights on sectors requiring improvements or clarifications of authority and can be used to develop benchmarks and indicators of progress in preparedness.

The CPI is also a process tool that can be used to facilitate collaborative planning and communications with agency leaders and community advocates involved in the protection of children. The process can be used to:

- 1) *Bring together new partners:* The tool can be used to identify agencies and organizations that are responsible for addressing the needs of children in disasters, and leaders and experts within those organizations who can contribute to an assessment of community-wide preparedness. Partners may be recruited from a variety of sectors, including emergency management, education, child care, public health, police and fire services, family and emergency medicine, family and child welfare, child protection, juvenile justice, and child advocacy, among others. Use of the tool can also help

determine where there may be a lack of leadership or point person for specific issues.

- 2) *Provide a task-oriented framework for a new or existing children's working group:* The tool can be used over the course of several weeks to several years to develop baseline and on-going assessments of the preparedness of institutions and identify benchmarks of progress for each sector.
- 3) *Identify gaps and areas needing clarification:* Through the process of completing the online CPI, groups will identify areas in need of improvement within their emergency plans, exercises, communications, leadership structures, policies and regulations. They will also identify issues requiring clarification.
- 4) *Assess and prioritize needs:* A comparison of the sector-level quantitative values generated by the CPI can help identify areas in the greatest need of focus, prioritization and leadership.

This Guide includes strategies and practical tips for developing a working group, completing the online CPI survey and interpreting the quantitative values. As an overview, Section 2 provides strategies for engaging in a community assessment process and lessons learned from existing children's working groups. Section 3 provides detailed information on the format and utilization of the CPI, including technical information about the tool that should be reviewed before you begin. Section 4 discusses how to interpret the CPI results, and Section 5 lists useful tools and resources for addressing the needs of children in disasters. The Appendix also includes additional detailed information on the CPI's technical specifications and scoring algorithms that may be useful to working groups.

"I found the tool to be very useful in identifying the strengths and possible weaknesses in our current policies and procedures." – Katrina Alexander, Westchester County, NY

2 STRATEGIES FOR ENGAGING IN A COMMUNITY ASSESSMENT PROCESS

A coordinated approach to addressing the needs of children in community preparedness efforts should involve a broad constellation of government agencies, community organizations and service providers that assist children, youth and families. The following section provides strategies for cities and counties to form a cross-sector working group to complete the CPI and facilitate on-going collaboration on the emergency management functions of organizations that serve youth.

The following recommendations and strategies for forming a working group are drawn from recommendations developed by Save the Children, the Administration for Children and Families, the Federal Emergency Management Agency (FEMA), the National Commission on Children and Disasters, and academia.

WORKING GROUP DEVELOPMENT STRATEGIES

I. DETERMINE THE JURISDICTION

The focus of the CPI is broader than just the public sector, and includes family child care homes, child care centers, foster care settings, public and private schools, hospitals and emergency shelters. While city and county jurisdictions are considered the audience for the CPI, the substantive focus is on the types of facilities where children may be located when a disaster strikes and where children and their guardians may go after a disaster for treatment or temporary shelter. As you consider the recruitment of sector-specific representatives, it is possible that some of the organizations or entities with oversight or regulatory authority for child-serving institutions in your local jurisdiction may not be physically located there, such as state-level government agencies. Therefore, it should be decided at the outset which geopolitical entity (city, county, tribe, district, parish, borough, census area, etc.) will be referenced in the CPI, so that all the contributors to the CPI survey are referring to the same jurisdiction.

II. DETERMINE WHAT SECTIONS OF THE CPI WILL BE COMPLETED

Ideally, all sections of the CPI should be completed to generate the overall quantitative measure of the community's preparedness; however, some jurisdictions may choose to complete specific sections only. Reasons for this may include difficulty recruiting knowledgeable sector representatives, the lack of a sector in the jurisdiction (e.g., private schools), or the desire to focus on a specific

sector only. The choice of sections will dictate the necessary experts needed for the project's completion.

III. DETERMINE THE TYPE OF WORKING GROUP THAT WILL BE FORMED

To complete the CPI, there are several types of collaboration strategies that could be considered. During the process of completing the CPI, it may not be necessary for the working group to gather physically in one place. For example, the group leaders could assign the questionnaire sections to sector representatives and have conference calls to discuss and resolve areas of uncertainty and disagreement. The possibility of having a virtual working group should be considered early in the CPI process. Below are several suggestions on approaches to forming a children's working group.

- 1) *Long-term children's working group or task force:* Some communities have established or are considering establishing a permanent children's working group or task force to address children's needs in emergency preparedness, response, recovery and mitigation. The CPI could serve as a task-oriented framework for a new or ongoing assessment process undertaken by existing groups, or serve as the seminal task for the formation of a new group. Existing long-term working groups, like the Los Angeles County Children in Disasters Working Group, meet regularly and engage in activities such as planning, exercises and assessments of established benchmarks. L.A. County was one of the first working groups to pilot the CPI.
- 2) *Collaboration of emergency management subcommittees:* The CPI could also be completed by one or more subcommittees of a broader emergency management working group or task force. These could include issue-oriented groups, such as a family reunification working group, or stakeholder-oriented groups, such as a child care working group. The collaboration of multiple subcommittees for the purpose of completing the CPI would require a designated leader to set the agenda, assign tasks and ensure that all sections are completed and entered into the online CPI survey.
- 3) *One-time working group:* A working group could also be formed temporarily specifically for the purpose of completing the CPI. Even without a long-term agenda, the formation of a short-term working group can help organizations make contacts, assess preparedness gaps and identify critical partners in disaster response and recovery.
- 4) *Workshop series:* The completion of the CPI survey could also be done over the course of a series of in-person workshops that involve representatives from each relevant sector. This may be the best approach for jurisdictions that have difficulty

recruiting committed working group members that are sufficiently knowledgeable about their sector's preparedness policies and practices. Workshop meetings could include staff who have the ability to conduct research and retrieve information from their sector's experts between meetings.

5) *One-time workshop*: Sector representatives could be assigned to work on sections of the CPI independently, and come together for one meeting after completion of their questions to discuss their answers and complete the Community-wide and Lead Organizations sections as a group. In this scenario, it may best to have representatives complete their questions on paper and assign one person to complete all data entry for the CPI during or after the workshop.

IV. IDENTIFY A LEADER AND CHAMPIONS

It can be daunting to form a working group of diverse stakeholders for a voluntary community assessment process. Therefore, it is critical to identify a senior-level working group leader or co-leaders, and supporting champions who have been working on policy on children and disasters. Leadership could come from an emergency management agency or support organization that has broad access to those participating in community-level emergency management exercises and working groups, or an executive office such as the Mayor's Office.

To identify local champions that advocate for the needs of children in disasters, working group leaders should contact agencies and organizations that are already actively involved in child advocacy and protection policy, such as directors of child and family welfare agencies, American Red Cross chapters, and organizations that have testified before a local or state legislature regarding child protection issues. Other leaders may be identified among representatives of organizations that were involved in providing policy recommendations and input to the National Commission on Children and Disasters. (To view these organizations, see: <http://archive.ahrq.gov/prep/nccdrpt/nccdrptaph.htm>).

V. IDENTIFY AND RECRUIT WORKING GROUP MEMBERS

Box 1 provides ideas on where to identify working group members and examples of the types of roles they may hold, and Box 2 provides a general overview of the type of information a working group representative would need to contribute effectively to the CPI. It may be difficult to identify one person from each sector who has this broad range of knowledge, but the representative could be someone who has access to other people in the sector with knowledge regarding emergency planning regulations and policies, as well as actual planning practice in the sector. If the working group leader cannot obtain a knowledgeable representative for some sections of the CPI, the best course is to fill out the CPI as much as possible and mark items as “Don’t know” so that the working group can clearly identify areas needing leadership and clarification at the end of the process. In some cases, the working group may need to identify state-level experts to help complete the CPI, particularly in jurisdictions where the state has regulatory authority for some of the jurisdiction’s child-serving institutions. For example, in some jurisdictions, the state is responsible for the safety and emergency preparedness of foster care.

**Box 1. Potential agencies with expertise for the sectors featured in the CPI:**

- **Child care centers:** Local or state level child and family welfare or public health agencies; child care coalitions and professional associations; child care licensing and accreditation agencies

For example: Representatives from the community outreach and registrar departments for the county's Child Care Council

- **Family child care homes:** Local or state level child and family welfare or public health agencies; child care coalitions and professional associations; child care licensing and accreditation agencies

For example: Assistant Commissioner, Administrator for Early Intervention, or Health Educator from the city, county or state Department of Education

- **Public schools:** Local or state department of education; school district offices; school boards; school Superintendents of large or sole school districts in the jurisdiction
- **Private schools:** Local or state department of education (the U.S. Department of Education provides a [publication regarding state regulation of private and home schools](#)); private school executive boards

For example: Dean of Students, School Resource Officer or Director of the School Emergency Response Team of one of the jurisdiction's large school districts

- **Hospitals:** Hospital directors (if only a small number exist in the locality); local or state department of health; hospital associations; hospital emergency preparedness planning committees

For example: County-level Hospital Group Coordinator or Office of Emergency Management's lead Hospital contact

- **Foster care:** Local or state agencies, such as child and family services, family and protective services, social services, or human services; coalitions or associations of foster family agencies; agencies providing youth residential, resource family and adoption licensing

For example: Emergency Operations Coordinator from the city, county or state Department of Social Services

- **Emergency shelters:** Emergency management agencies; Local organizations involved in [Voluntary Organizations Active in Disasters \(VOAD\)](#), such as American Red Cross chapters or Medical Reserve Corps

For example: Executive Director or Emergency Services Lead from the local or state chapter of the American Red Cross or the State Medical Reserve Corps Director

- **Community-wide and Lead organizations* sections:** Emergency management agencies (that coordinate agency leads for Emergency Operation Centers during emergencies); Emergency Services Lead of organizations in the community that are involved in the oversight or protection of children/minors

*It may not be necessary to identify a specific expert for completing the Lead Organization section of the CPI. It is likely the names of the lead organizations will emerge organically as a user completes the other sections of the CPI. Note that the Lead Organization section of the CPI is locked until the others sections are fully completed.

The effective formation of a voluntary working group requires leads to have a strong mission, agenda and incentives to persuade representatives to make time in their busy schedules to actively participate. The CPI provides a task-oriented framework for developing a baseline assessment of community preparedness across institutions that serve children and families before, during and after disasters. Communities that already make children a priority in community preparedness can leverage previously established goals and outcomes. For communities new to this focus, the incentives may be less clear. However, examples of the need to prepare can be clearly drawn from recent disasters that had serious impacts on children and their families. For example, the 2011 Joplin tornado in Missouri destroyed a high school, hospital and 19 child care centers, leaving families struggling with the need to find alternative care providers for children. Hurricane Isaac in Louisiana in 2012 increased the number of families needing access to pediatric mental health care and funding assistance to afford child care. Hurricane Sandy in 2012 caused 697 child care providers and 86 Head Start Centers in the states of Connecticut, New Jersey and New York to close. The severe disruption of government services and sector continuity jeopardized the recovery of thousands of families with children. All of these communities created effective children's task forces in the aftermath of a disaster. The creation of these task forces before a disaster has the potential to improve the response and accelerate the coordination of recovery resources.

Box 2. Working group members representing each sector should ideally have knowledge of, or access to knowledge of:

- The scope of the sector, such as the number of regulated and unregulated entities and the number of children served
- Sector-level laws, regulations and policies regarding safety, emergency management planning, and frequency of emergency exercises
- The sector's current practice in emergency management planning and disaster preparedness, including the type of emergencies entities plan for and the common components of emergency plans and exercises
- Lead individuals or offices responsible for the sector's emergency management planning, including the emergency plans of the sector's regulated entities
- Lead individuals or offices responsible for the sector's emergency response, including evacuation, sheltering, communication, continuity of operations, and emergency services for children

Other experts that may be useful include those who have knowledge of, or access to knowledge of:

- The use of and reporting for federal and state emergency management-related funding to the sector (e.g., DHS and CDC cooperative agreement grants for emergency preparedness)
- The sector's representative(s) to the jurisdiction's Emergency Operations Center, established during an emergency or disaster
- Sector participation in a recent emergency management exercise

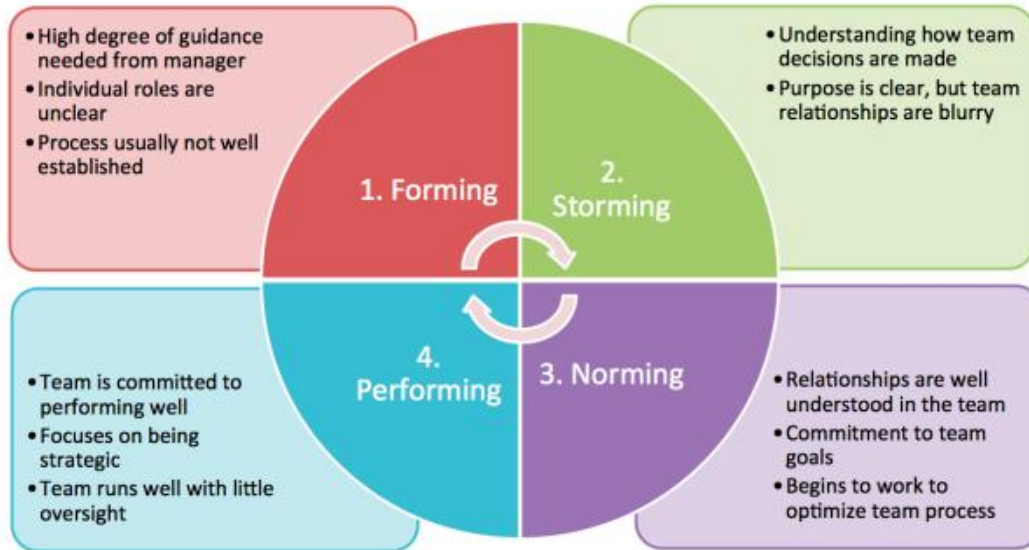
Note: It may not be possible to identify knowledgeable sector representatives for each of these aspects; however, this process can help identify where there are gaps in authority, regulation, planning and coordination that can be used to develop tasks and benchmarks towards improved preparedness.

VI. STRATEGIES FOR SUCCESSFUL WORKING GROUPS

Group development involves the process of bringing together new people, identifying knowledge gaps, developing goals, assigning tasks, reaching consensus and achieving goals. Bruce Tuckman first characterized the phases of the group development as “forming, storming, norming and performing.”¹

¹ Tuckman, B. W. (1965). Developmental sequence in small groups. *Psychological Bulletin*, 63, 384-399. Available from <http://aneesha.ceit.uq.edu.au/drupal/sites/default/files/Tuckman%201965.pdf>

Figure 1. Tuckman’s stages of group development



Adapted from “How Atlassian does it: 3 tips for remote teamwork,” by D. Radigan, 2013, accessed at <https://blogs.atlassian.com/2013/07/how-atlassian-does-it-3-tips-for-remote-teamwork/>

During the initial group “forming” phase, groups may be challenged by unclear objectives, uncommitted members, confusion, low morale and poor listening. Leaders can meet these challenges by facilitating opportunities for group members to get to know one another and learn how each individual responds to teamwork activities. Through this process, people become more comfortable with each other and professional and personal relationships are initiated.

During a potential “storming” phase, characterized by disagreements about the group’s structure and roadmap, groups may be challenged by lack of cohesion, subjectivity, conflicts and inconsistency. It is important for group leaders to remain accessible and firm on task delegation, and steer group discussions away from small details and tangential topics.

During a group’s “norming” phase, which is the phase when participants agree upon their goals and modes of communication, the group may face challenges confirming roles, opening risky issues and addressing low productivity. During this phase, it is important for group leaders to encourage members to actively participate and

provide honest opinions. The group shouldn't necessarily avoid a challenging task or major unknown for the purpose of getting work done quickly.

Finally, the "performing" phase is when the group completes their tasks and goals, which in this case will be the CPI. At this point, groups may experience creativity, initiative, flexibility, pride, learning, confidence, high morale and a sense of success. It is important for group leaders to acknowledge accomplishments, however small, and maintain positive momentum in order to implement the next phase of addressing preparedness gaps. After completing the CPI, some group members may resign from the group due to other priorities. It is important for group leaders to anticipate turnover and consider adequate replacements for people who cannot contribute to the next phase of work.

Best Practice: Westchester and Putnam Counties

In New York's Westchester and Putnam Counties, two jurisdictions that served as pilot communities for the CPI, the community working groups took similar approaches to completing the CPI:

- First, the CPI Team Leader brought representatives from the various sectors together as a group to provide an overview of the CPI and process.
- Second, the Team Leader sent out copies of the section questions to multiple experts within each sector. For example, in Westchester County, the Team Leader reached out to one knowledgeable and well-connected person within the Department of Human Services, who then reached out to her community partners.
- In some cases, an existing sector working group, such as Putnam County's Child Care Council, was able to send the questions to individual experts, collect and review the answers, and resolve inconsistencies in answers through consensus before providing them to the Team Leader.
- Once the Team Leader collected answers from the various experts and sector working groups, she entered them into the online survey to produce the quantitative results.
- In Putnam County, the CPI process led to actionable steps for future work on a child preparedness initiative.

VII. LESSONS LEARNED FROM EXISTING WORKING GROUPS

One challenge to leading working groups is maintaining momentum and participant interest. Some strategies to keep members invested and actively engaged in the CPI process include:

- Link the mission of the working group to addressing specific challenges to local response and recovery identified during recent emergencies and disasters or recent community exercises;
- Make the CPI activity a bottom-up process by providing opportunities for people to ask questions and take their own approaches to identifying information for the CPI. Rather than taking responsibility for all challenges during the CPI process, group leaders should expect working group members to develop solutions through brain storming, consensus and collaboration;
- Establish sub-groups by sector or a combination of sectors that are led by a member of the working group;
- Set a regular date and time for meetings (e.g., the second Tuesday of the month at 1:00pm), or use a meeting appointment tool like [Meeting Wizard](#) or [Doodle](#) to identify meeting dates and times that work for the most members;
- Assign actionable tasks to work group members within the first 1-2 meetings;
- Keep members consistently updated with workgroup outcomes and upcoming meeting agendas, but avoid long emails. Also avoid 'Reply All' email chains that fill Inboxes and create confusion (this can be done by placing members' email addresses in the BCC field of group emails);
- Gain support and recognition for the working group activities from a high-level office, such as the Mayor's or Governor's Office; and
- Provide food at meetings.

To ensure the sustainability of the working group throughout the completion of the CPI and ongoing activities to address community preparedness, working group leaders may need to establish some strategies early on to ensure the working group can continue during turnover in membership. Some strategies include:

- Plan to designate or elect a new working group leader and subgroup leaders every 1-2 years for long-term working groups;
- Include a Recorder on the leadership team who is responsible for taking and sharing notes, storing documents in one accessible location, sending meeting times and agendas, and completing the data input to the CPI (this could be the responsibility of an intern or recent graduate);

- Identify funding to support meetings and members' travel expenses. Some possible sources of federal funding include grant funding provided through the CDC and DHS Emergency Preparedness cooperative agreements to states and large cities, and the U.S. Department of Education's Readiness and Emergency Management for Schools (REMS) grant program.

VIII. HELPFUL RESOURCES FOR MAINTAINING WORKING GROUPS

The following resources provide additional information on forming and supporting working groups:

[Administration for Children and Families \(ACF\) Children and Youth Task Force in Disasters: Guidelines for Development](#): The Children and Youth Task Force model brings together Whole Community child- and youth-serving agencies, organizations and professionals in a single forum for shared strategic coordination to meet the needs of children and youth during and after disasters. This model has been successfully implemented in such disparate disasters as the 2011 Joplin, Missouri tornado and 2012 Hurricanes Isaac and Sandy. This document is designed to introduce Whole Community partners to the Disaster, Children and Youth Issues Task Force concept. It provides recommendations to states, Tribes, territories and local communities interested in launching their own task forces, and outlines how the U.S. Department of Health and Human Services' (HHS) Administration for Children and Families (ACF) can provide support. The guidelines are intended for emergency management, human services and public health professionals to support a coordinated, integrated and effective approach to children's needs in emergency preparedness, response and recovery.

[National Commission on Children and Disasters 2010 Report to the President and Congress](#): The National Commission on Children and Disasters was an independent, bipartisan body established by Congress and the President to identify gaps in the Nation's disaster preparedness, response and recovery for children, and make recommendations to close the gaps. In 2010, the Commission recommended jurisdictions "distinguish and comprehensively integrate the needs of children across all inter- and intra-governmental disaster management activities and operations," and "incorporate education, child care, juvenile justice, and child welfare systems into disaster planning, training, and exercises." The document includes additional background information to help support and justify the development of children's working groups at the federal, state and local level.

3 HOW TO USE THE CPI

OVERVIEW OF THE CPI

The Community Preparedness Index (CPI) is a survey tool for local jurisdictions that produces a quantitative value of the jurisdiction's preparedness for addressing children's needs during a major disaster or emergency across a range of sectors.

The CPI survey contains nine sections, one for each sector. Five of the sections address the preparedness of facilities where children are likely to be located when a disaster occurs (Public Schools, Private Schools, Child Care Centers, Family Child Care Homes, and Foster Care settings). Two sections address the preparedness of settings where children are likely to be moved and cared for once a disaster has occurred (Hospitals and Emergency Shelters), and one section (Community-wide) addresses cross-cutting issues that are not limited to any particular sector or facility that serves children. Finally, the Lead Organizations section aims to characterize in depth the supervisory agencies and organizations identified in the prior sections. Other sectors were considered for inclusion in the CPI, such as preschools, early intervention, and non-governmental and afterschool programs, but the included sectors were identified as top priorities through the content validity process.

The eight sections that focus on where children may be located when a disaster occurs and in the immediate aftermath all include questions designed to identify the legal or de facto lead organizations that are responsible for maximizing the level of preparedness of child-serving facilities. Some of these agencies and organizations may be mentioned more than once within a section and/or across multiple sections. In order to avoid duplicate questions about a single organization, the survey sections automatically apply the names of all the identified organizations to the Lead Organizations section, which can only be started after the other eight sections are completed. The Lead Organizations section prompts you to answer a series of questions for up to ten of the organizations provided. If you have identified more than ten organizations throughout the CPI, you should select the ten most important or influential organizations and complete the questions using those organizations.

Also, the Public Schools section may be more complex to complete if your jurisdiction includes more than one public school district. The Public Schools section begins by asking if all of the school districts operating in your community are subject to substantially similar state, county and local laws with respect to emergency preparedness. If you respond affirmatively, there is only one set of questions to complete in regards to public schools in your jurisdiction. However, if

your jurisdiction has multiple school districts and there is significant variation in the regulatory regime for emergency preparedness across districts, the CPI captures that variation by prompting you to answer the public school questions for each major school district (up to 3). Note that if your jurisdiction has multiple school districts, but one district accounts for at least 75% of public school K-12 enrollment, the CPI requests that you answer the Public School section questions with respect to that one large district only.

The questions have several formats, including: “yes/no/don’t know” questions; “select all that apply” questions; frequency questions (e.g., once/twice/more than twice); scaled questions (e.g., substantive/moderate/none); and some fill-in questions (e.g., number of child care centers that are not legally recognized). Appendix II provides more details on the types of questions within the CPI.

HOW THE CPI WORKS

The major sections (Public Schools, Private Schools, Child Care Centers, Family Child Care Homes, Hospitals and Lead Organizations) have 13-64 questions, and the minor sections (Foster Care, Emergency Shelters, and Community-wide Questions) have 8-10 questions. As you fill out the survey (one user at a time), you will navigate through the CPI by clicking an arrow at the bottom of each screen to take you forward or backward. You may work on these sections in any order you wish, and you can go into and out of sections without completing them. In order to save answers in the CPI, be sure to click the FORWARD arrow at the bottom of each screen.

When you have completed all of the required questions in a section of the CPI, you will reach a summary page that restates all of the questions in that section with the answers you provided. The next and final screen in each section will show you the **section value** (on a scale of 0 – 100%) that your community earned for that section, based upon your answers. The **overall value** for the entire index will appear at the beginning of the “Submit Survey” section, and will be based on the values received for the individual sections of the index.

The online CPI survey contains an embedded set of calculations (invisible to the user) that aggregate your answers into a value for each section, and ultimately into an overall CPI value. A detailed description of these calculations and their underlying assumptions are included in Appendix III. The CPI overall value is the simple arithmetic mean of the individual section values for the nine sections of the CPI.

Important rules when completing the CPI online:

- Only one user, per community, at a time (to avoid overwriting input by multiple users).
- Click the FORWARD arrow to save responses. The BACK arrow does not save responses.
- Incorrect answers can affect the values. If you don't know the answer to a question, select "Don't know." You can also leave the question blank if you intend to complete it later.
- Do not use the "back," "go back," or "prior page" buttons or arrows of the Internet browser to return to an earlier screen in the survey. Always use the arrows at the bottom of the current screen.
- Print and save a copy of the summary page for each completed section.
- You can only fill out the "Lead Organizations" section last, after you have completed and viewed your values for the other eight sections.
- There is no "log out" button. You can exit the survey by closing the survey's browser. Be sure to save your answers first by clicking the FORWARD arrow at the bottom of the screen.

THE CPI PROCESS: A CHECKLIST

1. Review the CPI questions

The CPI website (<http://www.SavetheChildren.org/CPI>) includes PDFs of the questions for each section of the CPI. Appendix II provides more details on the various types of questions that are included.

Also, the survey questions include some skip logic; therefore, not all questions may be prompted when you complete the CPI online.

2. Contact appropriate experts for your working group

See Box 1 for guidance on the types of agencies and organizations that may have relevant experts for your working group, and Box 2 for an overview of the type of information representatives would need to have, or have access to. If you cannot obtain a knowledgeable representative for certain sections of the CPI, rather than skip the section, the best course is to fill out the index as much as possible and mark items as "Don't know" so that the working group can clearly identify areas needing clarification and improvement at the end of the process.

3. Create a plan for how you will fill out the CPI

Each jurisdiction will have only one username and password, and only one person should be logged in at a time (if multiple people are logged in, data may be accidentally deleted or overridden). The best way to complete the CPI is to assign one person to complete the data entry for the entire survey. For ease, each sector representative could fill out the answers to the questions on paper first (downloadable from <http://www.SavetheChildren.org/CPI>)

4. Complete the online CPI survey

Similar to other online surveys, the user will **log in** to the CPI using a username and password provided by Save the Children. After entering the password and clicking the FORWARD arrow, the user arrives at the “Index Contents” screen, which lists the nine sections of the CPI. By selecting the button next to one of the sections and clicking the FORWARD arrow, the user moves to the first screen of the chosen section. Once within a given section, the user can go forward or backward at will.

To save your responses on any page, you must click the FORWARD arrow and successfully advance to the following page.

Changing a previously-entered answer is as simple as clicking the BACK arrow as necessary to return to the screen with the question you wish to change, selecting the new desired answer, and then clicking the FORWARD arrow. One must always click the FORWARD arrow to save an answer, including a changed answer.

In most cases, the user can temporarily skip over questions and return to those questions at a later time. However, some questions will not permit the user to advance to the next question before providing an answer. In cases where a user clicks FORWARD before having provided necessary answers, the index will generate an error message that reads, **“An error has occurred on this page. Please fix this error and try again.”** The survey will also highlight the specific place on the screen where the user needs to make a selection with the phrase **“a response is required.”**

To exit from the survey, first click the FORWARD arrow at the bottom of the screen in order to save any answers you entered on the screen you are currently working in. Then simply close the tab of your Internet browser. There is no “log

out” or “sign off” button. Everything you entered through the last time you clicked the FORWARD arrow is saved.

Sections do not need to be completed in order (except for the Lead Organizations section, which should only be started after the other sections are fully completed). Additional technical instructions for using the CPI are provided in Appendix I.

5. Optimize your values

To optimize your values, be sure to fill out the CPI questions as accurately and completely as possible. For example, be sure to select all answers that apply when promoted with a multiple choice question. If you do not have an answer to a question for any reason, select “Don’t know” or leave it blank. Previously selected answers can be changed as long as the survey is not submitted.

6. Retrieve and save your quantitative results for each section

When a section is fully completed by answering all the section questions, the screen will display a summary of your entered answers as well as the quantitative value for that section. You’ll want to save this summary by creating a PDF of the screen, printing a hard copy, or copying and pasting the results into a Word document. You’ll also want to save the final summary and quantitative value that will be displayed when the entire CPI is completed and before you click “Submit.” *It is important to save these values because once the survey is submitted to Save the Children, you will not be able to retrieve your results.*

7. Submit your results

The final online screen, which you will view in the survey after you have answered all of the questions and received your overall CPI value, contains the following alert:

“After submission, you WILL NOT BE ABLE TO ACCESS this index or the answers you provided.”

One you click “Submit,” you will no longer be able to access your results. Therefore, as mentioned previously, it is important to save your section-specific and overall results before submitting the survey.

The results are submitted to Save the Children, but the individual results will not be made public. Save the Children and its partner, Columbia University, may develop reports using aggregate results, such as reports on preparedness levels in geographic regions or in large cities vs. rural areas.

8. Document the workgroup process

It may be useful to document what was learned throughout the process of completing the CPI, such as the development of new interagency communications for emergency preparedness, new information learned about partner organizations, and strategies discussed by the group for improving institutional preparedness. Documenting accomplishments of the working group may help maintain interest and momentum, and provide accountability for funders, stakeholders and local leadership. It also provides historical documentation for new working group leaders and members who may join later and sustain the group long-term.

4 INTERPRETING CPI FINDINGS

What the results will look like

Each section value is intended to represent the community's preparedness expressed relative to a theoretical "best case," which is based upon weighted values developed by the National Center for Disaster Preparedness.

Each completed section of the CPI will produce a quantitative value, and the CPI will also generate an overall value, which is an average of the section values.

What the quantitative values mean

The quantitative values will mean different things to different groups. For example, some communities may have clear areas of improvements. Others may have more complex challenges. It will be up to communities to decide priority areas for improvements in preparedness based upon the results of the CPI. Some resources for improving the emergency preparedness of child-serving institutions are provided in Chapter 5.

The selection and weighting of answer selections in the CPI were based on feedback to a content validity survey with local experts, particularly feedback from members the IAEM Children in Disasters Caucus. Naturally, these values and weightings are subjective. However, the quantitative values are intended to provide communities a way to distinguish and prioritize activities, leadership roles and policies that need to be established, clarified or improved.

Pilot testing of the CPI found that sections with a value of 65 or greater is a positive indicator that many preparedness activities and policies are in place and only small improvements are needed. A section with a value of 40-64 is a positive indicator that a value could be improved with moderate improvements to activities and policies. A section value of 0-39 indicates that more significant improvements are needed.

Reasons why values may be lower than expected

There are several reasons why the section values may be lower than expected. First, a section may have several "Don't know" answers selected or several questions that were skipped. These answers result in zero points. Review the section responses carefully to ensure a definitive answer is provided whenever possible. If you go back to change answers or add answers to skipped questions, some new questions may

be prompted due to the skip logic, so be sure all the questions promoted are completed.

Also, there are many questions that request users to “select all that apply.” If a user selects only one answer when several answers apply, that question will result in a lower value that is not representative of the community’s preparedness. Review the answer selections for “select all that apply” questions carefully to ensure all correct answers have been selected.

How the values can be used

The values generated by the CPI may be used to establish your community’s baseline of preparedness and benchmarks for future activities. One way to use the values is to create a gap assessment by reviewing sections with low values and questions with ‘No,’ ‘Don’t know,’ and skipped questions. From this list, the group can identify priorities and needed partners to develop goals and benchmarks, assign tasks and continuously evaluate progress. Groups may choose to address priorities by starting with those they deem most important. They could also begin with those tasks that can be accomplished with fewer resources, such as reviewing existing policies, and gradually accomplish larger goals, such as adding or improving preparedness regulations, increasing oversight to the development of disaster plans, and enhancing drills and exercises. The working group can track progress by completing the CPI on a regular basis (once every 1-3 years).

Although not part of the CPI survey, the development of an interagency working group for completing the CPI is a significant first step towards improved communication and collaboration among organizations that will be coordinating the preparedness, response and recovery of critical child and family services. The CPI can be used regularly as a tool to evaluate progress of the established working group. Communities that have submitted a CPI can begin a subsequent survey by requesting a new username and password from Save the Children.

The following chapter provides a list of preparedness and planning resources for each sector that describe ways in which institutions can improve preparedness, response and recovery to better meet the needs of children.

5 USEFUL RESOURCES AND TOOLS

Child Care Centers and Family Child Care Homes:

[Protecting Children in Child Care During Emergencies: Recommended State and National Regulatory and Accreditation Standards for Family Child Care Homes](#): Child Care Aware (formerly called NACCRA) and Save the Children developed this document to help those in child care leadership positions take the steps necessary to ensure the child care community is prepared for the many types of emergencies — natural, technological and man-made — that occur each year in the United States. These steps include reviewing and revising state child care regulations and providing the training and technical assistance child care providers need to be prepared for emergencies.

[GSA Childcare Emergency Preparedness Toolkit](#): Childcare Occupant Emergency Plans (OEPs) are used to address preparedness, and must be written, implemented and maintained. OEPs require coordination among facility management and occupants, as well as with external emergency response agencies. The GSA Toolkit includes a Child Care OEP Checklist, which assists providers in developing and evaluating an OEP specifically for child care in GSA controlled spaces.

Child Welfare and Foster Care Agencies:

[Coping With Disasters and Strengthening Systems: A Framework for Child Welfare Agencies](#): Developed by the National Child Welfare Resource Center for Organizational Improvement, this publication has a dual purpose—to help managers think through what they might put in place to cope with disasters, and to highlight how taking these steps can improve systems for serving children and families. This publication draws on an extensive literature review and recent presentations by and consultations with state staff members who have experienced disasters.

[Disaster Preparedness Resource Guide for Child Welfare Agencies \(Annie E. Casey Foundation\)](#): This guide offers best practices for disaster management at child welfare agencies. Its recommendations are firmly rooted in published disaster-related research and the advice of human services and preparedness experts. The guide's recommendations are meant to be adaptable for use by agencies in states and tribes across the United States.

Public and Private Schools:

[Practical Information on Crisis Planning: A Guide for Schools and Communities](#): This guide, developed by the U.S. Department of Education, is intended to give schools, districts and communities the critical concepts and components of good crisis planning, stimulate thinking about the crisis preparedness process, and provide examples of promising practices.

Emergency Shelters and Lead Organizations:

[FEMA's Children in Disasters Guidance](#): FEMA provided this supplemental resource with the FY2012 Homeland Security Grant Program. The resource includes guidance for states and localities to incorporate children into their planning and purchase of equipment and supplies; provide training to a broad range of child-specific providers, agencies, and entities; and enhance exercise capabilities related to children, such as evacuation, sheltering and emergency medical care. The guide includes *Standards and Indicators for Disaster Shelter Care for Children and Supplies for Infants and Toddlers in Mass Care Shelters and Emergency Congregate Care Facilities*.

Hospitals:

[Children in Disasters: Hospital Guidelines for Pediatric Preparedness](#): This guide, developed by the Centers for Bioterrorism Preparedness Planning Pediatric Task Force, provides hospitals (especially those that do not normally admit children and/or have no pediatric intensive or obstetrical/newborn services) with useful, proactive strategies and tools for providing protection, treatment and acute care for children during a disaster.

Local Public Health Agencies:

[National Association of County & City Health Officials \(NACCHO\) Toolbox](#): The Toolbox is a free, online collection of local public health tools produced by members of the public health community. Tools within the Toolbox are materials and resources public health professionals and other external stakeholders can use to inform and improve their work in the promotion and advancement of public health objectives. Current examples of tools include, but are not limited to, case examples, presentations, fact sheets, drills, evaluations, protocols, templates, reports and training materials.

APPENDIX I TECHNICAL Q&A

1. *How do I save my answers in the survey?*

Clicking the FORWARD arrow saves whatever information you have entered in a screen. Clicking the BACK arrow does not. Once you have clicked FORWARD and saved the input on a screen, backing up to earlier screens will not change or erase your input.

2. *How do I change a previously selected answer?*

Changing a previously entered answer is as simple as clicking the BACK arrow as necessary to return to the screen with the question you wish to change, selecting the new desired answer, and then clicking the FORWARD arrow. You must always click the FORWARD arrow to save an answer, including a changed answer.

3. *How can I save our section-specific and overall results?*

When you reach the section summaries, which include your survey questions, responses and quantitative values, you can save the results a number of ways: 1) print a hard copy of the page, 2) save a PDF of the page to your computer, or 3) copy and paste the results into a Word document.

4. *I received the error message: "An error has occurred on this page. Please fix this error and try again." What now?*

For some questions, a response is required before the user can advance to the next question. If you received this error message, the survey will also highlight the specific place on the screen where the user needs to make a selection with the phrase "a response is required."

A number of questions in the CPI ask you if the community has a lead organization for a particular preparedness function. If you answer YES and click the FORWARD arrow, the next screen will ask for the name of the organization. If the user clicks the FORWARD arrow without providing a name, the survey will generate the error messages described above, and will prevent you from advancing to other questions until the spaces provided for names is filled in.

The intention of these error messages is not to prevent forward progress in the survey, but rather to emphasize that the selected answers are critical. If you do not yet have the correct answer, you can work around the error messages by inserting a

place-filler answer (e.g., xyz). The survey software cannot judge what is a real answer and what is a place-filler, so any text you provide will remove the error message. Just don't forget to go back and provide the correct answer!

5. *On the summary page of one of the sections, I see a number of questions I did not answer marked with "Skipped." How did I skip these questions?*

Skip logic is embedded in the survey. Skip logic is a feature that changes what question or page a respondent sees next based on how they answer the current question. Generally, skip logic questions are questions asking for more detail about previously selected answers. If you have temporarily deferred answering a question in the survey and progressed through subsequent questions, the answer for such questions also will appear as "Skipped" in the summary. Be sure to go back and fill in any questions you deliberately deferred. Due to the skip logic, if you add an answer to a question you left blank or change an answer to a question, this may prompt new questions that you did not see before. When going back to add or change answers, check to see that all the questions displayed have been answered. Once you have done this, your summary should read correctly - any remaining "Skipped" questions in your summary do not need to be completed.

6. *How many users can be logged in with our username and password?*

Only one user should enter data into the online CPI survey. This is because multiple logged-in users can overwrite each other's input. For example, if Michael enters the survey, provides an answer to Question 1 and then exits the survey, but subsequently Elizabeth enters the survey and answers Question 1 again, Elizabeth's answer will permanently replace Michael's answer. To avoid data corruption, collect survey responses in advance and assign one person to enter all the answers into the online survey.

7. *Can I go back into the survey or view my results after it has been submitted?*

Once you have clicked the FORWARD arrow on the bottom of the final "Overall Score" screen, you will no longer be able to access the survey or the answers you provided. This is an unavoidable feature intrinsic to the online survey software. However, at any time before seeing this alert and advancing from the final screen, you can save or print hard copies of the section summaries, which include the questions, your answers and the values generated. It is critical that you take advantage of opportunities to save your answers and values. Otherwise, you will lose the record of this experience with the CPI.

8. *How do I exit the survey? I do not see a “Log out” button.*

To exit from the online CPI, first click the FORWARD arrow at the bottom of the screen in order to save any answers you entered on the screen you are currently working in. Then simply close the tab of your Internet browser in which you have the survey open. There is no “log out” or “sign off” button or tab.

9. *We would like to change a large number of responses that we’ve already entered. Is it possible to start a new CPI survey?*

In the course of completing the survey, you may determine that you wish to make very substantial changes and that it would be more practical to simply begin an entirely new version of the survey. In order to begin an entirely new CPI, you can request access to a new survey by contacting Save the Children to receive a new CPI password. This will then become the new password for the community, and will allow all members of the committee to access the new CPI survey.

10. *What happens to our quantitative values if we skip entire sections in the CPI survey?*

Each completed section will produce a quantitative value, but if entire sections are skipped, the CPI will not be able to generate an overall value at the end of the survey. If a skipped section is completed with the answer “Don’t know” throughout, it can be expected that the overall value generated at the end of the CPI will be very low.

APPENDIX II TYPES OF QUESTIONS IN THE CPI

The CPI contains eight distinct types of questions, which occur in various combinations in each of the nine sections:

1. YES/NO/DON'T KNOW questions, such as:

Do state or local building regulations include structural and engineering standards designed to protect school buildings against the kind of natural hazards to which the school system is most at risk?

- Yes*
- No*
- Don't know*

2. SELECT ALL THAT APPLY questions, such as:

Does AT LEAST ONE state, county or local agency maintain a database containing the following information for family child care homes? (Select all that apply)

- Normal operating location*
- Intended evacuation location*
- Children with special healthcare needs*
- Children with disabilities and access & functional needs*
- Children with limited English-speaking ability*
- Age distribution of children*
- Gender distribution of children*
- Don't know*

In these questions, the user can select either “Don't know” or any combination of the other answers (a user cannot select “Don't know” and other answers).

3. FREQUENCY questions, such as:

The minimum frequency for hospitals to conduct a functional exercise of their emergency response plan is:

- Once a year*
- At least once every 2 years*
- Less frequently than every 2 years*
- There is no minimum frequency*
- Don't know*

In these kinds of questions, the user must select only one answer.

4. LEAD ORGANIZATION questions:

These are the questions within the major sections of the CPI (Child Care Centers, Family Child Care Homes, Public Schools, Private Schools and Hospitals) that determine whether or not a user must complete the “Lead Organization” section of the CPI.

A typical Lead Organization question looks like this:

Is any governmental or non-governmental organization formally designated or commonly recognized as the lead organization to help private schools in the community be prepared for Evacuation in advance of an emergency?

- A public agency or not-for-profit organization is the lead organization, AND this is formally designated in statute, regulation or executive order*
- There is a de facto lead organization, but it is not formally designated in statute, regulation or executive order*
- There is no formally designated or de facto lead organization for this element of preparedness*
- Don't know*

5. OTHER SCALAR questions, such as:

How would you characterize the nature of governmental review of private school emergency response plans?

- Substantive / constructive (for example, officials read the plans carefully and provide direction on how to improve plans)*
- Formulaic / compliance oriented (for example, officials review that the plans have been completed or meet the technical requirements for submission, but offer little or no direction to schools)*
- Typically no feedback or minimal feedback*
- Don't know*

6. SOURCE OF REQUIREMENT questions:

Each of the major sections of the CPI asks detailed questions about an institution's obligations to address evacuation, sheltering in place, drills and exercises, emergency medical and behavioral health services, communications, continuity of operations planning and other elements of preparedness. A typical question looks like this:

Identify the requirements for child care centers to address the following elements of preparedness for COMMUNICATING WITH PARENTS/GUARDIANS, STAFF AND LOCAL RESPONSE AGENCIES: (select as many as apply of the first three answer options OR any one of the last three answer options)

- The law requiring child care centers to have a written emergency plan specifies this**
- Laws unrelated to emergency plans require this to be addressed**
- A Lead agency requires child care centers to address this**
- Child care centers are NOT REQUIRED to address this, but DO anyway**
- Child care centers are NOT REQUIRED to address this and do NOT**
- Don't know**

7. SCREENING questions:

Each of the major sections of the CPI contains three questions that serve to direct the user to appropriate detailed questions about particular dimensions of preparedness. The three questions are almost identically worded in all of the major sections.

SCREENING questions related to the laws that require child-serving facilities to have emergency response plans, for example:

Do the legal provisions that require child care centers to have emergency response plans require that such plans address (Select all that apply):

- Evacuation*
- Sheltering in place*
- Communicating with parents/guardians, emergency responders and staff before, during and after emergencies*
- Pediatric emergency medical situations*
- Emergency mental/behavioral health services for children*
- Facility continuity of operations*
- Conducting exercises and drills*
- The needs of children with disabilities or access & functional needs in a disaster*
- None of the above*
- Don't know*

SCREENING questions related to other laws (unrelated to plan requirements) that address preparedness, for example:

Does state, county or local municipal law require child care centers to be prepared for any of the following in advance of an emergency (other than requirements for an emergency plan): (Select all that apply)

- Evacuation*
- Sheltering in place*
- Communicating with parents/guardians, emergency responders and staff before, during, and after emergencies*
- Pediatric emergency medical situations*
- Emergency mental/behavioral health services for children*
- Facility continuity of operations*

- Conducting exercises and drills*
- The needs of children with disabilities or access & functional needs in a disaster*
- None of the above*
- Don't know*

SCREENING questions related to voluntary preparedness that is not mandated/imposed by law or by a regulatory/supervisory body, for example:

Do child care centers routinely address the following elements of emergency preparedness even if they are not required to do so under state, county or local municipal law, or by their regulatory/supervisory agencies:

- Evacuation*
- Sheltering in place*
- Communicating with parents/guardians, emergency responders and staff before, during and after emergencies*
- Pediatric emergency medical situations*
- Emergency mental/behavioral health services for children*
- Facility continuity of operations*
- Conducting exercises and drills*
- The needs of children with disabilities or access & functional needs in a disaster*
- None of the above*
- Don't know*

9. INFORMATION ONLY questions:

These are fill-in questions, such as the aggregate enrollment of all school systems and the enrollment of each of the three largest school systems, or the number of child care centers that are not legally recognized.

Neither the SCREENING questions nor the INFORMATION ONLY questions are taken into account in generating the section values or the overall CPI value.

APPENDIX III EXPLANATION OF THE WEIGHTED SCORING

Introduction

The scoring algorithm in the Community Preparedness Index (CPI) uses weights to signify relevance associated with response options that likely hold greater value in measuring community preparedness. During the content validity exercise, two rounds of data were collected from experts with content expertise in community preparedness. The raters were asked to rank the relevance and importance of preparedness activities and policies on a 4-point scale (“4” = Critical and essential item, “3” = Very important item, “2” = Moderately important item, and “1” = Less important item). These ratings were then averaged. Items with a content validity score (CVI) ≥ 3 were weighted 1.5 times greater than items with a CVI < 3 .

Each of the nine sections of the CPI generates a value based upon how a user answers the questions in that Section.² The overall CPI value, seen on the ‘Submit Answers’ page, is the simple arithmetic average (mean) of the separate values for the previous nine Sections. The denominator of this mean always will be nine (9), even if the value for any Section is zero.

There are two Sections of the CPI – the “Lead Organization” Section and the “Public Schools” Section – where the Section value itself may be the mean of several sub-values. If a user does not identify any Lead Organizations and, therefore, does not complete the Lead Organizations questions even once, the value for the Lead Organizations Section of the CPI will be zero.

Section scores/values were calculated using the following steps:

Step 1: Each answer option was assigned a raw value by NCDP, between 0.25 and 3.

Step 2: Raw values were adjusted to be expressed on a 0-1 scale.

Step 3: The weight derived from the content validity exercise was assigned to each question.

Step 4: The weighted, adjusted values were summed and divided by the number of questions in the Section. This quotient was capped at 1.0.

² For clarity, hereafter the capitalized word “Section” refers to a Section of the CPI.

Raw values:

Raw values for most 'yes or no' questions represent a 1 or 0 value respectively. Some 'select all that apply' questions are simply zero-value screening questions that may or may not lead to an additional section of the survey, where follow-up questions would be scored. Other 'select all that apply' questions give 1 point for each answer selected.

The 'Lead Organization' table in each Section assigns a 1.5, 1, or 0 value for a designated lead organization, a de-facto lead organization, or no lead organization, respectively.

The detail-oriented grids for each Section (i.e., evacuation, sheltering in place, communication, etc.) are assigned a value of 1 for every preparedness task indicated in the survey. An extra 0.5 is given if there is a law in place for that preparedness task, and an extra 0.25 is given if there is a lead organization that requires it.

Overall value:

The overall value is the average of the Section values. Section values are not weighted for this overall calculation. If a Section is not completed, or if it is completed with only 'Don't know' responses, the value for that Section will be zero. Incomplete Sections may lower the overall value. Communities may choose to only focus on section-specific values.

APPENDIX IV CONTRIBUTING SUBJECT MATTER EXPERTS

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