City of Chandler	Parks Needs A	ssessment Survey:	Final Findings (2020)

Section 6 Survey Instrument



Dear City of Chandler Resident,

Your response to the attached/linked survey is very important.

The City of Chandler's Community Services Department is conducting a Parks Strategic Master Plan needs assessment survey. The results of this survey will be used to establish priorities for improvements to our current park system and future park development.

Your household was one of a limited number selected at random to receive this survey, therefore it is very important that you participate. We greatly value your time and feedback.

The City of Chandler has selected ETC Institute, an independent consulting company, as our partner to administer this survey. They will compile the data received and present the results to the Chandler City Council. **Your responses will remain confidential.**

We expect this survey to take approximately 10-15 minutes to complete, however, each question is important. The time you invest in completing this survey will help us take a resident-driven approach to making decisions about the future of our municipal park system.

Please return your completed survey in the enclosed postage-paid envelope addressed to ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061.

If you have questions, please feel free to contact me at 480-782-2707 or andy.bass@chandleraz.gov.

Sincerely,

Andy Bass, Community Services Director

City of Chandler - Parks Needs Assessment Survey

Let your voice be heard today! The City of Chandler would like your input to help determine park experience priorities for our community. Parks contribute significantly to your quality of life, and your opinions are very important to us. This survey will take 10-15 minutes to complete. We greatly appreciate your time. If you would prefer to complete the survey on-line, please go to ChandlerParkSurvey.org.

	ne City of Chandler.				/4\ NI = t I			
	(1) Very Important (2) Important				(4) Not Impo (5) Not at al			
	(3) Neutral				(9) Don't Kr			
e	verall, how would you rate you xperiences offered by the Cit tilized in the past year?							
	(1) Very Satisfied (2) Satisfied (3) Neutral				(4) Dissatist (5) Very Dis (9) Don't Kr	satisfied		
li: p	lease indicate if you or any nested below in the past 12 mon lease rate the facilities of this leans "Poor". Type of facility	ths by cire	cling ei ng a sc	ther "Yes" ale of 4 to	or "No" ı 1, where	next to eac	th facility "Excelle	. If "\ nt" a
		this fa	_	Excellent	Good	Fair	Poor	Don't
1. 2.	General Parks Trails	Yes Yes	No No	4	3	2 2	1 1	
3.	Diamond Athletic Fields (baseball, softball, t-ball)	Yes	No	4	3	2	1	
4.	Multi-Purpose Athletic Fields (soccer, football, lacrosse, field hockey, rugby)	Yes	No	4	3	2	1	
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6. Please indicate your level of agreement with the following statements concerning some potential benefits of the City of Chandler's Park system.

	The Parks system in Chandler	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
01.	Improves my (my household's) physical health and fitness	5	4	3	2	1	9
02.	Helps to reduce crime in my neighborhood and keep kids out of trouble	5	4	3	2	1	9
03.	Makes Chandler a more desirable place to live	5	4	3	2	1	9
04.	Preserves open space and protects the environment	5	4	3	2	1	9
05.	Increases my (my household's) property value	5	4	3	2	1	9
06.	Improves my (my household's) mental health and reduces stress	5	4	3	2	1	9
07.	Provides positive social interactions for me (my household)	5	4	3	2	1	9
08.	Provides clean/aesthetically pleasing landscaping along public streets	5	4	3	2	1	9
09.	Helps to attract new residents and businesses	5	4	3	2	1	9
10.	Promotes tourism to the city and the region	5	4	3	2	1	9
11.	Positively impacts economic/business development	5	4	3	2	1	9
12.	Is age-friendly and accessible to all age groups	5	4	3	2	1	9

7.					ANT to you and members of the list in Question 6, or circle
	1st:	2nd:	3rd:	4th:	NONE

8. Please indicate if you or any member of your household has a need for each of the Park <u>facilities</u> listed below by circling "Yes" or "No". *If "Yes"*, please rate all of the following parks FACILITIES of this type on a scale of 5 to 1, where 5 means the needs of your household are "100% Met" and 1 means "0% Met".

	Tune of Facility	Do you have a need		If "Yes	", how wel	are your r	are your needs being met?		
	Type of Facility	for this	facility?	100% Met	75% Met	50% Met	25% Met	0% Met	
01.	Adventure area (ropes course, zipline, etc.)	Yes	No	5	4	3	2	1	
02.	All Abilities Playground/Park	Yes	No	5	4	3	2	1	
03.	Amphitheater	Yes	No	5	4	3	2	1	
04.	Community gardens	Yes	No	5	4	3	2	1	
05.	Covered picnic areas/ramadas	Yes	No	5	4	3	2	1	
06.	Cricket Fields	Yes	No	5	4	3	2	1	
07.	Diamond Athletic Fields, Baseball (Teen/Adult)	Yes	No	5	4	3	2	1	
08.	Diamond Athletic Fields, Girls Fast Pitch Softball	Yes	No	5	4	3	2	1	
	Diamond Athletic Fields, Little League	Yes	No	5	4	3	2	1	
10.	Diamond Athletic Fields, Softball (Youth/Adult)	Yes	No	5	4	3	2	1	
11.	Disc Golf Course	Yes	No	5	4	3	2	1	
12.	Equestrian trails	Yes	No	5	4	3	2	1	
13.	Large community parks	Yes	No	5	4	3	2	1	
14.	Multi-Purpose Fields (Football/Lacrosse/Rugby)	Yes	No	5	4	3	2	1	
15.	Multi-Purpose Fields (Soccer)	Yes	No	5	4	3	2	1	
16.	Off-leash dog park	Yes	No	5	4	3	2	1	
17.	Open space conservation areas/trails	Yes	No	5	4	3	2	1	
18.	Outdoor basketball/volleyball courts	Yes	No	5	4	3	2	1	
19.	Paved walking and biking trails	Yes	No	5	4	3	2	1	
20.	Pickleball courts	Yes	No	5	4	3	2	1	
21.	Playgrounds	Yes	No	5	4	3	2	1	
22.	Skateboarding/BMX/pump tracks	Yes	No	5	4	3	2	1	
23.	Small neighborhood parks	Yes	No	5	4	3	2	1	
24.	Soft surface walking and biking trails	Yes	No	5	4	3	2	1	
25.	Splash pads	Yes	No	5	4	3	2	1	
26.	Tennis courts	Yes	No	5	4	3	2	1	
27.	Other:	Yes	No	5	4	3	2	1	

9.	Which FOUR facilit [Write-in your answe					•	
	1st:	2nd:	3rd:	4th:	NONE		
10.	Do you feel the athle	etic fields at curr	ent locations a	re easily acces	sible?	(1) Yes	(2) No

11. Please indicate if you or any member of your household has a need for each of the experiences listed below by circling "Yes" or "No". *If "Yes"*, please rate all of the following park and trail experiences of this type on a scale of 5 to 1, where 5 means the needs of your household are "100% Met" and 1 means "0% Met".

	Type of Program Do you have a need for this experience?			If "Yes", how well are your needs being met?				
	Type of Frogram	for this ex	perience?	100% Met	75% Met	50% Met	25% Met	0% Met
01.	Adult Baseball	Yes	No	5	4	3	2	1
02.	Adult Flag Football	Yes	No	5	4	3	2	1
03.	Adult Soccer	Yes	No	5	4	3	2	1
04.	Adult Softball	Yes	No	5	4	3	2	1
05.	Archery	Yes	No	5	4	3	2	1
06.	Basketball	Yes	No	5	4	3	2	1
07.	Cricket	Yes	No	5	4	3	2	1
08.	Equestrian Riding	Yes	No	5	4	3	2	1
09.	Fishing	Yes	No	5	4	3	2	1
10.	Fitness and Wellness	Yes	No	5	4	3	2	1
11.	General Visitation of Parks	Yes	No	5	4	3	2	1
12.	Mountain Biking	Yes	No	5	4	3	2	1
13.	Nature Programs	Yes	No	5	4	3	2	1
14.	Outdoor/Adventure Programs	Yes	No	5	4	3	2	1
15.	Park Experiences for Individuals with Special Needs	Yes	No	5	4	3	2	1
16.	Pickleball	Yes	No	5	4	3	2	1
17.	Reservation/rental of athletic fields	Yes	No	5	4	3	2	1
18.	Reservation/rental of picnic shelters	Yes	No	5	4	3	2	1
19.	Rugby	Yes	No	5	4	3	2	1
20.	Sand Volleyball	Yes	No	5	4	3	2	1
21.	Socialization with Dogs	Yes	No	5	4	3	2	1
22.	Special Events	Yes	No	5	4	3	2	1
23.	Swimming	Yes	No	5	4	3	2	1
24.	Tennis	Yes	No	5	4	3	2	1
25.	Walking/Jogging/Biking/Hiking	Yes	No	5	4	3	2	1
26.	Youth Baseball	Yes	No	5	4	3	2	1
27.	Youth Football	Yes	No	5	4	3	2	1
28.	Youth Lacrosse	Yes	No	5	4	3	2	1
29.	Youth Soccer	Yes	No	5	4	3	2	1
30.	Youth Softball	Yes	No	5	4	3	2	1

12.		•	•				T IMPORTANT to estion 11, or circle
	-	1st:	2nd:	3rd:	4th:	NONE	

13. The following is a list of actions the City of Chandler could take to improve the park and trail system. Please indicate your support for each potential action by circling the corresponding number to the right of the item.

Types of Improvements	Very Supportive	Somewhat Supportive	Not Sure	Not Supportive
Improvements to <i>Existing</i> Facilities				
01. General repair and increase maintenance of parks	4	3	2	1
02. Improve existing athletic fields (synthetic turf, lighting, etc.)	4	3	2	1
03. Improve existing trail systems (paved trails, mountain biking trails, unpaved walking trails, etc.)	4	3	2	1
04. Add/expand trails/walking loops in existing parks	4	3	2	1
05. Improve ADA/disabled persons accessibility at parks	4	3	2	1
06. Improve/expand open space/natural turf areas in existing parks	4	3	2	1
07. Improve restroom facilities in existing parks	4	3	2	1
08. Add playgrounds to existing parks	4	3	2	1
09. Add splash pads to existing parks	4	3	2	1
10. Add amphitheater to an existing park	4	3	2	1
11. Add Wi-Fi/Other Technology improvements to existing parks	4	3	2	1
12. Add fitness equipment along walkways/trails	4	3	2	1
13. Add more dog parks (large dogs and small dogs)	4	3	2	1
Developing <u>New</u> Facilities				
14. Generally develop new parks that meet the highest needs of the community	4	3	2	1
15. Develop new sports facilities (athletic fields, disc golf, basketball, pickleball, etc.)	4	3	2	1
16. Develop new off-leash dog parks	4	3	2	1
17. Develop new walking, biking, equestrian trails with connections to other amenities	4	3	2	1
18. Develop new area for community-wide events	4	3	2	1
19. Develop area for remote control activities (i.e. drones, model airplanes)	4	3	2	1
20. Develop an outdoor adventure area (ropes course, ziplines, etc.)	4	3	2	1
21. Develop a new skate/bike park (skateboards, BMX, pump tracks, etc.)	4	3	2	1
22. Design and develop more parks that focus on passive experiences	4	3	2	1
14. Which FOUR of the items listed in Question 13 would you be your answers below using the numbers from the list in Question				? [Write-in
1st: 2nd: 3rd: 4th: _		NONE		

19.	Develop area for remote control activities (i.e. drones, model airplanes)	4	3	2	1
20.	Develop an outdoor adventure area (ropes course, ziplines, etc.)	4	3	2	1
21.	Develop a new skate/bike park (skateboards, BMX, pump tracks, etc.)	4	3	2	1
22.	Design and develop more parks that focus on passive experiences	4	3	2	1
14.	Which FOUR of the items listed in Question 13 would you I your answers below using the numbers from the list in Question				? [Write-ir
	1st: 2nd: 3rd: 4th: _		NONE		
15.	Please rate your level of satisfaction with the overall value th City of Chandler Parks and Trail System.	at your h	ousehold	l receives	from the
	(2) Satisfied(5) Dissatisfie () Very Dissa () Don't Kno	atisfied		
16.	Counting yourself, how many people in your household are.				
	Under age 5: Ages 15-19: Ages 35-44: Ages 5-9: Ages 20-24: Ages 45-54: Ages 10-14: Ages 25-34: Ages 55-64:	Age Age	s 65-74: s 75+:		
17.	What is your age? years				
18.	Are you or other members of your household of Hispanic, La (1) Yes (2) No	atino, or S	Spanish a	incestry?	

19.	Which of the following best describes your race? [Check all that apply.]
	(1) Asian(3) Native American(5) White/Caucasian(2) African American/Black(4) Pacific Islander(6) Other:
20.	Your Gender: (1) Male (2) Female
21.	How many years have you lived in Chandler? years

This concludes the survey – Thank you for your time!

Please return your completed survey in the enclosed return-reply envelope addressed to:

ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061