Sample Surveys

Law Enforcement Staff

1. Please identify your area of work:

   ___ Police department

   ___ Sheriff’s department

   ___ Other: ________________________________________________

2. Are there policies and procedures in your department to assist you when responding to crimes against persons with disabilities?

   ___ Yes ___ No ____ Not aware of any

3. What kinds of training have you received with regard to persons with disabilities?

   __________________________________________________________

   __________________________________________________________

4. Do you think you would benefit from more training regarding serving individuals with disabilities?

   ___ Yes ___ No
5. What resources or information could your law enforcement department provide that would help you improve services when working with persons with disabilities? Check all that apply.

___ Communication resources (e.g., American Sign Language interpreters)

___ Resource list of service providers

___ 24-hour crisis response

___ More training about persons with disabilities

___ More training about working with persons with specific disabilities; please specify what type: ____________________________________________

___ Other: ____________________________________________

6. What barriers have you experienced when linking crime victims with disabilities to community services? Check all that apply.

___ Lack of departmental training on resources available

___ Lack of or ___ delayed response from adult protective services

___ Lack of or ___ delayed response from domestic violence agency

___ Lack of or ___ delayed response from sexual assault agency
___ Lack of needed 24-hour crisis response

___ Transportation of victim

___ Transportation of suspect

___ Other: ___________________________________________________________________

7. How many years have you been in law enforcement? _________

8. Is there anything we haven’t asked that you’d like us to consider?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

We appreciate your time, ideas, and participation in this survey. THANK YOU!