

APPENDIX 1

Community Needs & Interests Questionnaire

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

This questionnaire is designed to gather information about community needs and interests related to cable communications, and to determine your knowledge and/or use of the Public, Educational and Government (PEG) Access resources that are available to Lexington residents. The information gathered will be used to assess whether current services and resources are adequate and appropriate, and help to identify changes, if any, that might be made to meet future cable-related needs and interests.

1. Do you currently subscribe to a cable TV service in Lexington?

Yes No If "No," go to Question 6

2. Which company provides your cable TV service?

AT&T Comcast RCN

3. Please rate your cable company's performance in the following areas: **VERY**

	EXCELLENT	GOOD	FAIR	POOR	POOR
a. Customer service assistance	_____	_____	_____	_____	_____
b. Telephone response time	_____	_____	_____	_____	_____
c. Responsiveness to billing problems	_____	_____	_____	_____	_____
d. Timely response to technical problems	_____	_____	_____	_____	_____
e. Signal quality on cable-system	_____	_____	_____	_____	_____
f. Reliability of cable system	_____	_____	_____	_____	_____
g. Value/Cost of basic service	_____	_____	_____	_____	_____
h. Value/Cost of Internet access (broadband)	_____	_____	_____	_____	_____
i. Availability of info about Lexington	_____	_____	_____	_____	_____
j. Coverage of events about Lexington	_____	_____	_____	_____	_____
k. Information about local programming	_____	_____	_____	_____	_____
l. Schedule for airtime of local programs	_____	_____	_____	_____	_____
m. Info on how to use "The Studio"	_____	_____	_____	_____	_____

4.a. What types of programming would you like to have more readily available on your cable company's channel line-up? Check all that apply.

- | | | |
|---|---|--|
| <input type="checkbox"/> Arts/Cultural | <input type="checkbox"/> Local news, activities, events, etc. | <input type="checkbox"/> News & Info. |
| <input type="checkbox"/> Children's | <input type="checkbox"/> Documentaries | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Classic Movies | <input type="checkbox"/> Educational programming | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Comedy | <input type="checkbox"/> Music | <input type="checkbox"/> Recent Movies |
| <input type="checkbox"/> Other types of programs? _____ | | |

4.b. If you checked any of the above, would you pay more to receive additional channels devoted to those types of programming in your basic package?

Yes No Maybe

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

5. Please indicate how important you think it is for you to receive the following special services from your cable company, if such services are offered in the future:

	VERY IMPORTANT	IMPORTANT	NOT IMPORTANT	NOT NEEDED
a. Telephone service	___	___	___	___
b. Movies on demand	___	___	___	___
c. Interactive shopping	___	___	___	___
d. Interactive video games	___	___	___	___
e. Video teleconferencing (2-way video)	___	___	___	___

f. If you indicated "Very Important" or "Important" regarding any of the above special services, would you be willing to pay an additional fee to obtain them?

___ Yes ___ No ___ Maybe

6.a. Do you currently subscribe to a satellite TV service in Lexington?

___ Yes ___ No If "No," go to Question 7

6.b. Using a scale of "1" (lowest) to "10" (highest), indicate your level of satisfaction with your satellite TV service:

___ 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ 9 ___ 10

7. a. Do you or your family use a computer in your home to access the Internet?

___ Yes ___ No If "No," go to Question 8

b. In an average week, how long is your home computer used to access the Internet?

___ Under 5 hours ___ 5 - 15 hours ___ Over 15 hours

c. Has a personal or business "Web site" been created with your home computer?

___ Yes ___ No

d. Do you use your computer and Internet access to telecommute and/or to work out of your home?

___ Yes ___ No

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

8. Certain improved services could be received through your television or home computer by using a high-speed connection to the Internet provided by the cable system. Please indicate how important you think it is to receive the services described below *through your TV or home computer*.

	VERY IMPORTANT	IMPORANT	<i>Not</i> NOT VERY IMPORTANT	IMPORTANT AT ALL
a. Access to Library resources (card catalog magazine articles, encyclopedias, etc.)	_____	_____	_____	_____
b. Ability to vote, renew your driver's license or obtain government permits from home	_____	_____	_____	_____
c. Ability to send and receive e-mail and information to and from teachers, school administrators, and School Committee members	_____	_____	_____	_____
d. Access to <u>government</u> information (Town government meeting agendas, a listing of Town services and how to obtain them, government reports, etc.)	_____	_____	_____	_____
e. Access to public safety information (e.g., from police and fire departments)	_____	_____	_____	_____
f. Ability to participate in interactive distance learning classes from your home	_____	_____	_____	_____

AT&T COMCAST SUBSCRIBERS: PLEASE ANSWER QUESTIONS 9 - 13
RCN SUBSCRIBERS: PLEASE ANSWER QUESTIONS 14 - 18
IF NOT A CABLE TV SUBSCRIBER: PLEASE GO TO QUESTION 19

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

9. Are you aware of any of the following cable channels on the AT&T Comcast cable TV service:

a. Channel 8 (run by AT&T Comcast at "The Studio"), with programs produced by staff and members of the community including high school sports, coverage of Selectmen's Meetings and Town Meeting sessions, and programming from the Hancock Church.

Yes No

b. Channel 9 -- Community Bulletin Board.

Yes No

c. Channels 63, 64, and 98, featuring other local programs including religious programming produced through the Hancock Church studio.

Yes No *If "No" to all Questions 9a-c, go to Question 19*

10. Have you ever watched a program on these channels?

Yes No *If "No," go to Question 19*

11. How often did you watch programs on these channels during the past month?

More than 10 times 6 - 10 times 1 - 5 times Never

12. Is the signal quality for programs on these channels equal to the signal quality for programs on the other channels of the cable system?

Yes No Don't Know

13. Please describe or provide the names of programs that you have watched on these channels:

AT&T COMCAST SUBSCRIBERS: PLEASE GO TO QUESTION 19

RCN SUBSCRIBERS: PLEASE ANSWER QUESTIONS 14 - 18

IF NOT A CABLE TV SUBSCRIBER: PLEASE GO TO QUESTION 19

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

14. Are you aware of any of the following cable channels on the RCN cable TV service:

a. Channel 8 -- Bulletin Board with customer information.

Yes No

b. Channels 15 and 16, featuring local programs including Selectmen's meetings and Town Meeting sessions and religious programming produced through the Hancock Church studio.

Yes No *If "No" to both Questions 14a and 14b, go to Question 19*

15. Have you ever watched a program on these channels?

Yes No *If "No," go to Question 19*

16. How often did you watch programs on these channels during the past month?

More than 10 times 6 - 10 times 1 - 5 times Never

17. Is the signal quality for programs on these channels equal to the signal quality for programs on the other channels of the cable system?

Yes No Don't Know

18. Please describe or provide the names of programs that you have watched on these channels:

ALL QUESTIONNAIRE RESPONDENTS: PLEASE GO TO QUESTION 19

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

19. Prior to this focus group workshop, were you aware that community organizations could have programs about their services and activities appear on the local Lexington channels on both cable TV services?

Yes No If "No," go to Question 24

20. a. Have you and/or your colleagues ever thought about using the cable system to improve outreach, disseminate information or improve the understanding of an issue that relates to your organization's work in the Town of Lexington?

Yes No If "No," go to Question 24

b. If "Yes", please describe your idea:

c. Did you produce a program?

Yes No

d. Did you try to produce a program but were unable to do so?

Yes No If "No," go to Question 21

e. Please describe the obstacle(s) that you encountered:

21. Have you ever appeared on or participated in the production of a program to show on Lexington's local cable channels?

Yes No If "No," go to Question 24

22. How many programs have you appeared on or participated in the production of during the past two years?

More than 10 6 - 10 1 - 5 None

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

23. Please rate the quality of the following services provided by the AT&T Comcast staff:

	EXCELLENT	GOOD	FAIR	POOR	VERY POOR
a. <u>Efforts to outreach</u> to residents about “the studio” facilities, services, and programming	_____	_____	_____	_____	_____
b. <u>Orientations</u> about “the studio” facilities and how the public can use the services and resources	_____	_____	_____	_____	_____
c. <u>Training services</u> to teach program production skills	_____	_____	_____	_____	_____
d. <u>Assistance in planning</u> the creation of the program(s) on which you have appeared or for which you have participated in the production	_____	_____	_____	_____	_____
e. <u>Production</u> of program(s) on which you have appeared or for which you have participated in the production	_____	_____	_____	_____	_____
f. <u>Maintenance of the production equipment</u> to keep it in good working condition	_____	_____	_____	_____	_____
g. <u>Promotion</u> of the program(s) on which you have appeared or for which you have participated in the production, keeping the community well informed about it	_____	_____	_____	_____	_____
h. <u>Playback</u> of programs on local cable channels on time as scheduled, and assuring good signal quality	_____	_____	_____	_____	_____

24. How important do you think it is to have local cable TV channels that feature programs about the Town of Lexington, its residents, its organizations, its local events, its schools, and its Town government?

Very Important
 Important
 Not Very Important
 Not Important at All

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

25. Please indicate your level of interest in seeing each of the following types of programs that are now or could be provided on local cable TV channels in the future.

	VERY INTERESTED	INTERESTED	<i>No</i> NOT VERY INTERESTED	INTEREST AT ALL
a. Town Meeting	_____	_____	_____	_____
b. Board of Selectmen Meetings	_____	_____	_____	_____
c. Community festivals, local events	_____	_____	_____	_____
d. Consumer protection programs	_____	_____	_____	_____
e. Courses from colleges and universities	_____	_____	_____	_____
f. Environmental awareness programs	_____	_____	_____	_____
g. Ethnic and cultural programs	_____	_____	_____	_____
h. Events/activities sponsored by the Town	_____	_____	_____	_____
i. Foreign language programs	_____	_____	_____	_____
j. High School equivalency courses	_____	_____	_____	_____
k. Informational programs about services, activities of local organizations/clubs	_____	_____	_____	_____
l. Information regarding public emergencies	_____	_____	_____	_____
m. K through 12 instructional courses	_____	_____	_____	_____
n. K through 12 music/drama productions	_____	_____	_____	_____
o. Local business news and information	_____	_____	_____	_____
p. Local health and wellness programs	_____	_____	_____	_____
q. Local sports and recreational activities (Little league baseball, hiking, etc.)	_____	_____	_____	_____
r. Programs about activities and concerns for persons with disabilities	_____	_____	_____	_____
s. Programs on Town government services	_____	_____	_____	_____
t. Programs on issues facing the Town	_____	_____	_____	_____
u. Programs about K-12 school activities	_____	_____	_____	_____
v. Programs about Lexington arts, history, culture and tourism	_____	_____	_____	_____
w. Religious programming w/local churches	_____	_____	_____	_____
x. School Committee Meetings	_____	_____	_____	_____
y. Board of Appeals Meetings	_____	_____	_____	_____
z. Senior citizen activities and concerns	_____	_____	_____	_____
ii. Special events and activities from area colleges and universities	_____	_____	_____	_____
iii. Indicate any other types of local programs that you would like to see: _____				

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

26. How much of each cable TV subscriber's monthly bill do you think should go towards providing the types of programs and services listed on the previous two pages?
 one dollar two dollars three dollars this amount: \$ _____
27. The current contracts with the cable companies require that six channels be set aside (free of cost) for use by the Town and its residents to provide non-commercial, local communications.
- a. Should all six (6) of these channels continue to be set aside (free of cost) for use by the Town and its residents in the new contracts with the cable companies?
 Yes No Maybe
- b. If "No", how many channels should be set aside for this purpose?
 none 1 2 3 4 5
28. How important do you feel it is to have a non-profit organization (a "Community Media Center") whose responsibility it is to see that programming is scheduled and shown simultaneously on both cable systems in the Town of Lexington?
 Very Important Important Not Very Important Not Important at All
29. Should the Town of Lexington create a non-profit Community Media Center to assist local organizations and residents with access to training, production equipment, distribution and technical expertise to improve understanding of local issues and general communications in the Town of Lexington?
 Yes No Maybe
30. If such a Community Media Center were created in Lexington, would you and/or your organization use its services and resources?
 Yes No Maybe
31. Would you be interested in learning how to make a program to show on a local cable TV channel, using equipment provided free of charge?
 Yes No Maybe

COMMUNITY NEEDS & INTERESTS QUESTIONNAIRE

Thank you very much for your assistance. You are invited, but not required, to provide any of the following information about yourself and/or the organization you are associated with:

Name: _____

Organization: _____

Address: _____

Telephone Number: _____

E-mail _____

Please comment on this Focus Group Workshop if you wish:

