

Healthy Landscapes Program Survey and Evaluation Form



Presented by the University of Rhode Island Cooperative Extension Water Quality and GreenShare Programs, College of the Environment and Life Sciences

1) Who performs your home landscaping activities?
(check all that apply)

- Professional Landscaper
- Other non-professional
(student, neighbor, etc.)
- We do our own landscaping
- Other (please explain)

2) About what percentage of your property consists of lawn?

- 0 to 10%
- 11 to 25%
- 26 to 50%
- 51 to 75%
- more than 75%

3) Have you ever reduced lawn area by installing other landscaped areas such as mulched beds, gardens, walkways?

- Yes
- No

4) Would you be interested in reducing lawn area, replacing it with other sustainable landscape options?

- Yes
- No
- Maybe, I need more information

5) Do you water your lawn?

- Yes
- No

6) If yes to # 5, what method is used? (check all that apply)

- In-ground sprinkler system
- Portable sprinklers
- Other _____

7) If yes to # 5, do you know how much water you apply to your lawn?

- Yes
- No

8) If yes to # 5, how often do you water your lawn each week? _____

9) What is your drinking water supply?

- Town Water
- Private Well
- Both

10) When you water outdoors, do you use: (check all that apply)

- Town Water
- Private Well
- Rain barrel or cistern
- Surface water supply (pond or stream)
- Other (please explain) _____

11) Would you consider establishing lawn grasses that are typically more drought tolerant?

- Yes
- No
- Maybe, I need more information

12) Would you consider installing a rain barrel or cistern to collect roof runoff for landscape watering?

- Yes
- No
- Maybe, I need more information

13) Are fertilizers and pesticides applied to your lawn?

- Yes
- No
- I'm not sure

14) If yes to #13, what basis is used for these applications? (check all that apply)

- Professional landscaper handles it
- Hired help (non-professional) handles it
- I/family member follow advice given by the products and/or store employees (Scott's 4-step program, etc.)
- Based on periodic soil tests and identifying pest problems as they occur – use recommendations from URI Master Gardener Program, etc.
- Other basis _____
- No fertilizers and pesticides are applied

15) When did you last have your soil tested?

- This year
- Last year
- Within the last 5 years
- Within the last 10 years
- Never had the soil tested

16) If you found that there were environmental concerns with your current application of fertilizer and pesticides, would you be willing to reduce or change your activities?

- Yes
- No
- Maybe, I need more information

Thank you, please fill out both sides

17) On my property, I have the following: (Please check all that apply)

- Vegetable garden
- Flower garden(s)
- Compost pile

18) If you have a dog, do you pick up solid waste after it and dispose of it in the trash or toilet?

- Never
- Only when I go for walks, I leave it in the yard
- I always pick up after my dog on walks, and periodically in the yard
- I make my dog go in "natural areas" such as woodlands.
- Not applicable, I don't have a dog.

19) Does your property border or contain a stream, pond, wetland, coastal shore, or other drainage feature?

- Yes
- No

20) If yes to #19, how much of this water resource is buffered by natural vegetation within 25 to 50 feet?

- Very little, we keep it in lawn for access and view
- A small portion is buffered by trees, shrubs & groundcovers
- About half the area is buffered by trees, shrubs & groundcovers
- Almost all the area is buffered by trees, shrubs & groundcovers except for some small access areas
- Not applicable

21) If yes to #19, would you consider enhancing these water resource areas with natural buffer vegetation?

- Yes
- In areas, it is important that I maintain some access and view
- No
- Maybe, I need more information
- Not applicable

22) If information and/or assistance were available to you, how willing do you think you would be to change your current yard and garden practices?

- Very willing
- Somewhat willing
- Not at all willing
- Need more information

23) What type of practices are you interested in learning more about? (Check all that apply)

- Proper fertilizing techniques
- Alternative pest control techniques
- Water conservation techniques
- Sustainable planting techniques
- Yard waste management
- Proper pet waste management

- Composting
- Proper disposal of household hazardous materials
- Other _____

24) What factors would influence your decision?

(Circle your choice)

Cost	1 (a lot)	2	3	4	5 (not at all)
Ease of implementation	1	2	3	4	5
Lawn appearance	1	2	3	4	5
Impact on water quality	1	2	3	4	5
Time required	1	2	3	4	5

About this program

As a result of this program, are there any steps that you may be interested in applying at home? If yes, please list here:

What did you like most about this program?

What would you change or add to the program?

How did you hear about this program (i.e. newspaper, flyer, word of mouth, neighbor, email, etc.)

About the presenter(s) please circle one:

(1) Strongly Disagree (2) Disagree (3) Agree (4) Strongly Agree

Was a subject matter expert	1	2	3	4
Was easy to understand	1	2	3	4
Was skilled in listening and questioning	1	2	3	4
Gave clear, straight-forward answers	1	2	3	4
Remained focused on program objectives	1	2	3	4

Your overall rating of this program (please circle one)

Excellent very good good fair poor very poor

Optional: we would like to follow up with you in the future to determine if the information you received at this program has resulted in any changes or new plans for your yard. The follow up will include a mail or email survey and/or other notices.

Name: _____
 Address: _____
 City/town: _____
 Phone Number: _____
 Email: _____

Thank you, please fill out both sides