

MASCNA 2019 Inventory Questionnaire

Please, answer all of the questions on this form to the best of your ability. If you do not know, please make note of that too. We need to know what is NOT communicated as well as what IS. Additionally, since groups, as a whole, may not be able to provide the level of input those individuals who have been to the MASCNA meetings can, please fill out more than one form and specify whether you are a group or an individual.

Circle One: Group Individual

If a Group, please write Group name, day, and town _____

Does your group send a representative (GSR) to Maine Area Service Committee of Narcotics Anonymous (MASCNA)? Why or Why not?

Rate each of the following questions. *Feel free to include additional comments wherever you like.*
1 Not at all 2 Needs improvement 3 Adequate 4 Good 5 Excellent 0 Don't Know

How well has the area served local groups this year? _____

How well does the area communicate with local groups? _____

How well does the area respond to the needs of local groups? _____

How well is the area managing its donations and area treasury? _____

How effectively does the area demonstrate responsibility and accountability? _____

How fully does the area train and support members who serve on the area service committee?

How well does the area service committee foster an atmosphere of courtesy and mutual respect?

How completely does the area provide opportunities for communication about committee concerns to the local members and groups? _____

How well is a sense of unity fostered within the area service body? _____

How positively is a sense of unity shown within local groups? _____

How well has the area fostered the willingness of the local fellowship to volunteer for service positions? _____

How well does the area practice continuity and rotation? _____

How well does the area function in maintaining a full complement of trusted servants, with no open commitments? _____

How fully does the area create an environment where the conscience of the body guides the decisions and direction of the area? _____

How well has the area done this year in making NA's message more widely known in the larger community? _____

How well is the area communicating with those in the community who interact with addicts?

How completely does the area respond to the needs of the larger community? _____

How well is the area using human and financial resources to carry NA's message of recovery in an efficient and effective way? _____

How fully trained and supported are the trusted servants who interact with members of the community?

How well has the area built cooperative relationships with those in the larger community?

How easily can those in the larger community reach an NA member who is in a position to respond to their questions or requests? _____

Is there any particular area of service and/or area function that you perceive is outstanding?

Please identify: _____

Is there any particular area of service and/or area function that you perceive would need improvement?

Please identify: _____

Please fill out this form at your group's monthly business meeting and do one of the following:

- 1. Return it to your GSR or any person attending the monthly ASC Meeting .**
- 2. Mail to MASCNA Planning Committee - PO BOX 5309, Portland, ME 04101**
- 3. Email to area_inv@namaine.org (electronic copies of this form are also available at www.namaine.org)**