



National Report Card Survey 2009

▶ Section 1: The Attribute of Leadership

1. *What is the name of your Safe Community?

For example: Safe Communities Winnipeg, Kamloops Injury Prevention Network, Safe City Brampton, etc.

1a. Do you have a Charitable Registration number issued by Revenue Canada?

Yes

No

No answer

2. Which of the following has had re presentation at your Safe Community Leadership Table in the last year? Indicate in the box provided, the year in which the organization became a member.

Check any that apply

- | | |
|---|--------------------------------------|
| Agriculture and Rural Safety Organizations | Band or Tribal Council |
| Local Public Health Units | Municipal |
| Health Care Services (Local Hospitals & Clinics etc.) | Regional |
| School Boards | Provincial |
| Community College | Fire |
| University | Police |
| Local Government or Band/Tribal Council Staff. | Emergency Paramedic Services (EMS) |
| Worker's Compensation Board (WCB) | Red Cross |
| Ministry of Labour | Neighbourhood Watch |
| Ministry of Transportation | Provincial Safety Committees |
| Child Youth Services | Chamber of Commerce |
| Victim Services | Health & Safety Training Agencies |
| Women's Services | YMCA (or equivalent) |
| Local Business Supporters | Sport and Recreation Organizations |
| Community Volunteers | Mothers Against Drunk Driving (MADD) |
| Trade Unions | Seniors Associations |
| Other (please specify) | Think First Chapter |

2a. In the past 12 months, has the composition of your Safe Community Leadership Table changed? (Has anyone left or joined?)

Check only one of the following

Please enter your comment here:

Yes (if yes, please describe this change)

No

No answer

2b. In the past 12 months has your Safe Community Leadership Table recruited new community members/organizations?

Check only one of the following

Yes

No

No answer

2c. *Does your Safe Community Leadership Table have Formal Terms of Reference?

Check only one of the following

Yes

No

Other

2d. *Does your Safe Community Leadership Table have a succession plan?

Check only one of the following

Yes

No

Other

3. Please indicate which of the following is part of your Safe Community Leadership Table structure.

Check any that apply

Board of Directors?

Collective with sub-committees?

Executive?

Co-leadership structure?

Other:

4. *In the past 12 months, aside from attending meetings, did any member of your Safe Community Leadership Table do any of the following to promote safety and or raise the profile of the Leadership Table in the community?

Check any that apply

Made a keynote speech at community conferences.

Attended or facilitated workshops.

Made presentation(s) to local government, a business association, a trade union, or any other influential organization in your community.

Represented the Safe Community Leadership Table at a community function.

Promoted a safety/Safe Community initiative on local radio/television/newspaper.

Wrote an article or letter to a local paper on behalf of a safety or a Safe Community initiative.

Actively recruited new organizations/community members to join your leadership table.

No activities undertaken.

Other:

5. Of the initiatives listed above, which would you say was the most effective? And why?

If not applicable please type N/A.

6. *Of these agenda items discussed at your Leadership Table meetings during the past year, please rank the following from least priority to most priority.

With 1 indicating the least and 5 indicating the most priority, use each number once only.

Governance and Administration

Budget

Priority setting

Public relations and Community Engagement

Programming/Evaluation

7. *Has your Safe Community Leadership Table evaluated its own effectiveness as a champion of safety in its community? If yes, what survey tool or mechanism did you use?

Check only one of the following

Please enter your comment here:

Yes (If yes, what survey tool or mechanism did you use?)

No

? Effectiveness: The ability to achieve stated goals or objectives, judged in terms of both output and impact.

? HelpAn evaluation is the systematic gathering, analysis and reporting of data to assist in decision making. An evaluation can help measure effectiveness, measure accountability and identify successes and gaps.

8. Can your Safe Community Leadership Table demonstrate its role as a champion in the community by having:

Check any that apply

Increased awareness of its safety priorities?

Introduced a new programme activity or initiative to address its safety priorities?

Influenced public policy to address its safety priorities?

Cannot answer at this time.

If checked, please describe your role.

▶ Section 2: The Attribute of Priority Setting for Programmes

9. *When did your Safe Community Leadership Table last conduct a Priority Assessment?

Check only one of the following

Have not conducted one.

1-3 years ago.

Less than a year ago.

4-5 years ago.

We are currently conducting one.

Over 5 years ago.

10. What Priority Setting Process did your Safe Community Leadership Table use to identify your community's top safety priorities?

Check only one of the following

We have not conducted one.

The Safe Communities Canada National Priority Setting Exercise

Other

No answer

11. *Please list the sources of injury data you used during the Priority Assessment.

12. *As a result of the Priority Assessment, please list your top safety priorities and priority populations.

If this is not applicable please type N/A

13. During the past two years, we have recommended that each designated member of Safe Communities Canada develop a comprehensive inventory of Injury Prevention and Safety Promotion programmes running in its community. Please refer to that inventory to answer the following five questions.

How many Injury Prevention and Safety Promotion programmes ran in your community between April 1, 2008 and March 31, 2009.

Only numbers may be entered in this field

13a. Of the programmes which ran in your community, please list those which were championed by your Safe Communities Leadership Table.

If this is not applicable please type N/A

13b. *Of the programmes championed by your Safe Communities Leadership Table (listed above), please indicate which ones match your top safety priorities.

If this is not applicable please type N/A

13c. Of the programmes running in your community, please indicate which age groups they address.

Check any that apply

Children (0–14 years)

Adults (25–64 years)

Youth (15–24 years)

Seniors (Over 65 years)

13d. Of the programmes running in your community please indicate which ones address these common themes:

Check any that apply

Traffic Safety

School Safety

Home Safety

Suicide Prevention

Workplace Safety

Crime and Violence prevention

Recreational Safety

Other:

14. Please select from this list of National Injury Prevention programmes, which ones are currently running in your community:

Check any that apply

Risk Watch Home Safety awareness

Think First Brain Injury Programmes for children and athletes

SafeKids Canada Programmes

Block Parents

P.A.R.T.Y (Prevent Alcohol and Risk Related Trauma for Youth)

MADD (Mothers Against Drunk Driving) awareness programmes

Passport to Safety

MySafeWork.com

SMARTRISK Heroes Programme

SMARTRISK No Regrets Programme

Agricultural Safety Programmes (CASA or Provincial)

Rural Safety Programmes (ATV Safety etc)

Swimming & Lifesaving programmes (Red Cross, Royal Life Saving, or other providers)

CPR & First Aid Training (Red Cross, St John Ambulance, or other providers)

Other:

15. *In recent years, the theory of The Social Determinants of Health has assumed enormous importance in shaping public health and related public policy throughout the world. Health Canada recommends that all public health policies account for the twelve Social Determinants of Health. As you can see, the relationship between this list of Social Determinants and Injury Prevention is compelling.

Please indicate which of these Social Determinants of Health have been included for consideration in either your most recent priority setting exercise or your program plans.

Check any that apply

- income & Social Status
- Social Support Networks
- Employment and Working Conditions
- Social Environments
- Physical Environments
- Personal Health Practices and Coping Skills
- Healthy Child Development
- Biology and Genetic Endowment
- Education & Literacy
- Health Services
- Gender
- Culture
- None have been included in most recent priority setting exercise
- Intend to include in the next or current priority setting exercise
- Not applicable

16. *Based on its Priority Assessment, did your Safe Community Leadership Table promote or launch any of the following initiatives to address its identified safety priorities?

Check any that apply

- Not applicable
- Currently conducting Priority Assessment
- Research
- Programming
- Community Engagement
- Policy Development
- Other:

17. Can your Safe Community Leadership Table demonstrate its role as a champion in the community by having:

Check any that apply

- Increased awareness of its safety priorities?
- Introduced a new programme activity or initiative to address its safety priorities?
- Influenced public policy to address its safety priorities?
- Cannot answer at this time

If checked, please describe your role.

18. *Did the evaluation(s) of the programmes, activities or initiatives you championed in the past 12 months measure the following?

Check any that apply

- | | |
|--------------------------|------------------|
| No evaluation conducted | Programme impact |
| Participation Rates | Neither |
| Participant satisfaction | |

19. *Were the programme evaluation results instrumental for making any of the following changes?

Check any that apply

- | | |
|-------------------------|-----------------------|
| No evaluation conducted | Adjustment of content |
| Programme or Activity | No changes required |
| Method of delivery | |

20. Please provide specific examples of any changes made to a programme as a response to evaluation results.

If this is not applicable please type N/A.

21. *Based on the evaluation conducted, can your Safe Community Leadership Table provide any information demonstrating that its efforts have had an impact on:

Check any that apply

No evaluation conducted

Changes in behaviour?

Community awareness?

No information at this time

Priority population participation?

▶ Section 3: The Attribute of Sustainability

22. *What is the annual operating budget for your Safe Community?

Check only one of the following

Less than \$25,000

Between \$150,000 and \$300,000

Between \$25,000 and \$75,000

Over \$300,000

Between \$75,000 and \$150,000

23. *Your Safe Community Leadership Table's annual operating budget is primarily funded by:

Check any that apply

Grants (Please list the source of your grants)

Sponsorships (Please note the sponsor(s))

Charitable Donations (Please list the donor(s))

Community Fundraising (Please describe the event(s))

Income Generating Programmes (e.g. Passport to Safety, The Safe Communities Campus etc.)
(Please list the programmes)

Other Sources (municipal budget, local business or institutional support, etc.) (Please describe the income sources.)

24. *How is your annual operating budget currently allocated? Please use percentage scale provided. Keep in mind that final total should be 100%. 10% or less 20% 30% 40% 50% 60% 70% 80%90% In-kind

10% or less 20% 30% 40% 50% 60% 70% 80% 90% or more In-kind

Administrative staff

Administrative support

Program support

Media or advertising

Other

 An example of administrative support is photocopying or mail distribution

25. Please indicate how your Safe Community Leadership Table handles its office or space requirement.

Check any that apply

Leases or rents office space

Uses space provided by a Leadership Table partner (in-kind support)

Relies on technology to create a virtual office

Other:

26. *How does your Safe Community Leadership Table handle its administrative requirements?

Check any that apply

Volunteer (how many?)

Employed staff (If checked, how many?)

Other:

27. Is the employed staff provided by a member agency? (In Kind Support)

Check only one of the following

Please enter your comment here:

Yes (Please identify the agency)

No

Not applicable

No answer

28. *Are your employed staff positions:

Check only one of the following

Please enter your comment here:

Full time? (If checked, how many people?)

Part time? (If checked, how many hours per week?)

Not applicable

29. *Volunteers can contribute to your Safe Community Leadership Table in two ways: 1) Contributing time and energy to the decisions and duties of the Safe Community Leadership Table; 2) Contributing time and energy to the delivery of Injury Prevention and Safety Promotion programmes within the community.

Please estimate the total number of volunteers in your community who contributed time and energy in either of these ways in the last year.

Only numbers may be entered in this field

30. *In your community please estimate the total number of hours these volunteers have contributed in the last year.

Only numbers may be entered in this field

31. What volunteer Recognition Programmes have you used in the past year?

Check only one of the following

No programmes used

Other

Ambassador for Safety

No answer

Community Awards

(citizen of the year, special citations etc.)

32. *Which of the following services does your Safe Community Leadership Table offer its volunteers?

Check any that apply

Not applicable

Recognition Programmes

Orientation

Other:

Training (especially Safety Training)

33. *Please indicate how businesses are involved in your Safe Community.

Check any that apply

Member at the Safe Community
Leadership table

Member of an operating committee
of the Leadership Table.

Sponsor of community
safety events

Donation of in-kind supports

Donation of real funds to the Safe
Community Leadership Table

Not applicable

Other:

If checked, please provide the name of the business(s) in the space provided.

34. *Does your Safe Community Leadership Table have an ongoing relationship with any of the following?

Check any that apply

The local Chamber(s) of Commerce
(if checked, please describe this relationship.)

Local Rate Payers association(s)
(if checked, please describe this relationship.)

Other Local Business Associations
(if checked, please describe this relationship.)

Trade Union locals
(if checked, please describe this relationship.)

Service Clubs
(if checked, please describe this relationship.)

Not applicable

Other:

Section 4: The Attribute of Community Engagement

35. *Over the past 12 months, list the activities undertaken by members of your Safe Community Leadership Table or an operating committee of your Safe Community Leadership Table to engage the community in its safety priorities:

Check any that apply

- Made a presentation to community organizations
- Made a presentation to a municipal or band council
- Made a presentation to Rate Payers Association(s)
- Made a presentation to Parent Teachers Association(s)
- Made a presentation to Chamber(s) of Commerce
- Made a presentation to Service Clubs
- Made a presentation to Labour Unions
- Made a presentation to affiliated NPO/NGO's
- Made a presentation to local businesses
- Hosted Town Hall meetings
- Hosted a Community Event
- Distributed materials and information at community safety partner events
- Took part in any events which highlighted Safe Communities Canada
- Conducted a formal priority-setting exercise
- Not applicable
- Other:

36. *Which of the above would you say was the most effective engagement and why?

37. Please describe the most successful initiative you have undertaken during the past year to engage your community in your Injury Prevention or Safety Promotion initiatives, and tell us why it was successful.

38. What is your website address?

Check only one of the following

Please enter your comment here:

Do not have one.

Plan to create one in the next year.

The web address is: (please enter in text box)

No answer

39. *Do you have a process which ensures that your web site is regularly updated?

Check only one of the following

Please enter your comment here:

Do not have a website

Have a website but no process in place

Yes (Please describe)

40. In the past 12 months, please describe how your Safe Community Leadership Table or an operating committee of your Safe Community Leadership Table has profiled itself or its initiatives in the community? (E.g. posters and pamphlets, direct marketing, media campaigns, events etc.)

41. *Over the past 12 months, which of the following media did your Safe Community Leadership Table or an operating committee of your leadership table use to promote participation and awareness in your community?

Check any that apply

Radio

TV

Newspaper

Not applicable

Other:

41a. *Using the circulation (newspaper) or audience (radio, local television) data provided by the media you are using, please estimate the potential total reach of your advertising.

Only numbers may be inserted into these fields
Check any that apply

Purchased: Reach

In-Kind: Reach

Not applicable



Reach: the circulation and/or audience data multiplied by the number of times the notice ran.

41b. *Was the majority (50% or more) of the advertising used in the past 12 months focused on:

Check only one of the following

A single issue?

An ongoing programme?

A single event?

Not applicable

42. *In the past 12 months, has your Safe Community Leadership Table or an operating committee of your Leadership Table engaged in any of the following as a way to profile itself in the community?

Check any that apply

Published news articles/releases
(if so, please indicate how many)

Been featured on radio spots/interviews
(if so, please indicate how many)

Been consulted on safety issues
(if so, by whom?)

Been referred to in local media
(If so, please indicate which media and how often)

Created local media coverage for activities and programmes championed by your Safe Community Leadership Table (If so, please indicate which media and how often)

Cannot answer at this time

43. *Would you deem your Safe Community Leadership Table's profile in your community as

Check only one of the following

- | | |
|---------|----------------|
| High? | Growing? |
| Medium? | Not applicable |
| Low? | No answer |

43a. Does your response this year represent a change in your profile over previous years?

Check only one of the following

Please enter your comment here:

- Yes (If yes, please tell us why)
- No
- No answer

44. *In the past 12 months, please estimate the total number of people in the community who participated in all the safety programmes and activities developed and/or championed by your Safe Community Leadership Table.

Only numbers may be entered in this field

▶ Section 5: Relationship with Safe Communities Canada

45. *In the past 12 months, have members of your Safe Community Leadership Table

Check any that apply

- Participated in national teleconferences?
- Attended the annual Safe Community Conference?
- Shared resources or tools with other members of Safe Community Canada?
- Participated in teleconference workshops?
- Not applicable

46. *In the past 12 months, has the employed administrative staff of your Safe Community Leadership Table

Check any that apply

- Participated in national teleconferences?
- Attended the annual Safe Community Conference?
- Shared resources or tools with other members of Safe Community Canada?
- Participated in teleconference workshops?
- Not applicable

47. In the next 12 months, what areas of training would you find most useful?

Check any that apply

- | | |
|-----------------------------|--|
| Priority Setting | Communications and Media Relations |
| Strategic Planning | Effective Use of Alternate Media |
| Building a Realistic Budget | Effective Governance and Succession Planning |
| Fundraising | Theoretical Issues (e.g. Social Determinants of Health, Brain Injury and Sports, Violence Prevention etc.) |
| | Other: |

46. *In the past 12 months, has the employed administrative staff of your Safe Community Leadership Table

Check any that apply

- Participated in national teleconferences?
- Attended the annual Safe Community Conference?
- Shared resources or tools with other members of Safe Community Canada?
- Participated in teleconference workshops?
- Not applicable

Section 6: General Feedback

48. Please list by title and role (coordinator, executive director, co-chair, treasurer, board member etc) the members of your leadership table who participated in compiling the information needed to complete the survey.

49. Please estimate the total amount of time spent to complete this survey (Please add all participants' times and indicate one time value)

Only numbers may be entered in this field

49. Please estimate the total amount of time spent to complete this survey (Please add all participants' times and indicate one time value)

Only numbers may be entered in this field

50. The National Report Card Survey is in its third year. To assist you in completing the survey accurately, have you made any changes to the way in which you keep track of your data during the year? For example have you developed a more accurate tracking system for recording volunteer numbers and hours, or a more accurate system for counting participants at events championed by your Safe Community Leadership Table?

Check only one of the following

Please enter your comment here:

Yes (Please describe this change)

No

No answer

51. Has your Safe Community Leadership Table shared either of the previous National Report Cards and/or your Community Report Cards with your community partners?

Yes

No

No answer

52. In 2008, did The National Report Card and/or your Community Report Card results generate a story in your local media?

Yes

No

No answer

53. Has your Safe Community Leadership Table used The National Report Card and/or your Community Report Card for any of the following purposes?

Check any that apply

To help support your fundraising efforts

To generate local media coverage

To demonstrate the credibility of both Safe Communities Canada and your Safe Community Leadership Table in your community

Not Applicable

Other:

54. In the space provided please identify any benefits to your Safe Community Leadership Table as a result of undertaking this exercise.

55. Can your Safe Community Leadership Table identify an area or theme which you would like the National Report Card survey to cover next year?

56. In order to assist us in building a human profile of Safe Communities Leadership Tables across the country, a profile which will enhance the generic one you have provided earlier in Question 2, please provide by name, title, and affiliation, the complete list of the membership of your Safe Community Leadership Table as of March 31, 2009 in the space provided. e.g. Jane Smith, Co-Chair, Public Health Agency; John Doe, Treasurer Petro-Canada; Priscilla Smith, member, Seniors' Association.