From: noreply@mail.questionpro.com
To: Suja Shunmugavelu
Subject: QuestionPro - [Safe Communities - Annual Coalition Report] - 28171202
Date: Tuesday, April 14, 2015 12:27:13 PM

Response Details

ID	28171202
Timestamp	04/14/2015 10:14:35
IP Address	216.249.144.10
Time Taken	820 seconds
Survey Language	English
Email Address	dfender@murraystate.edu
Email List	L260315325

Integration/Custom Tags

Custom 1	Murray State
Custom 2	KY

Geo Coding

Country	US
Region	KY
City	Murray
Area Code	270
DMA Code	632

Community Injury Data

What are the leading causes of injury in your community? Please select the top three causes of injury. *

» Injuries in the workplace
» Unintentional drug overdoses
» Other (Please specify): Recreational Injuries

Initiative Name:

Employee Injury Prevention

Injury Issue it addresses. (Select one.) *

» Injuries in the workplace

Does this initiative align with one of the three leading causes of injury in your community you identified at the start of the
survey? *

» Yes

What is the goal of this initiative?
(i.e. Reduce falls in older adults, increase the number of employers in the coalition implementing a no cell phone use while driving policy)

Reduce injuries & magnitude of injuries.

Is this initiative based on promising or evidence based practices? *

» No

Please indicate what this initiative is trying to accomplish? (Select all that apply.)
*

» Enhancing an individual's knowledge and skills to prevent injuries or illness and promote safety and health
» Reaching the community with information and resources to promote safety and health
» Changing organizational practices to improve safety and health

What type of funding do you have (are you seeking) for this initiative? (Select all that apply.)
*

» Other type of funding (Please specify): Internal

How are you measuring progress or impact?
(i.e. Number of people reached, number of med drop units, pounds of medications collected, pre and post surveys, pre and post data analysis, etc.)

Number of injuries, OSHA 300 log information. Medical information.

Initiative Name:

Recreational Injury Prevention

Injury Issue it addresses. (Select one.) *

» Other (Please specify): Recreational Injuries

Does this initiative align with one of the three leading causes of injury in your community you identified at the start of the
survey? *

» Yes

What is the goal of this initiative?
(i.e. reduce falls in older adults, increase the number of employers in the coalition implementing a no cell phone use while driving policy)

Reduce number of recreational injuries.

Is this initiative based on promising or evidence based practices? *

» No

Please indicate what this initiative is trying to accomplish? (Select all that apply.)
*

» Enhancing an individual's knowledge and skills to prevent injuries or illness and promote safety and health
» Reaching the community with information and resources to promote safety and health
» Changing organizational practices to improve safety and health

What type of funding do you have (are you seeking) for this initiative? (Select all that apply.)
*

» Other type of funding (Please specify): Internal

How are you measuring progress or impact?
(i.e. Number of people reached, number of med drop units, pounds of medications collected, pre and post surveys, pre and post data analysis, etc.)

Tracking number and types of injuries.

Initiative Name:

Alcohol Edu

Injury Issue it addresses. (Select one.) *

» Unintentional drug overdoses

Does this initiative align with one of the three leading causes of injury in your community you identified at the start of the
survey? *

» Yes

What is the goal of this initiative?
(i.e. reduce falls in older adults, increase the number of employers in the coalition implementing a no cell phone use while driving policy)

Reduce alcohol abuse.

Is this initiative based on promising or evidence based practices? *

» Yes

If Yes, please provide a link to the evidence in the space below.
(i.e. Link to peer reviewed journal article, CDC compendium on Falls, SAMHSA's National Registry of Evidence-based Programs and Practices, etc.)

http://www.everfi.com/alcoholedu-for-college

Please indicate what this initiative is trying to accomplish? (Select all that apply.)
*

» Enhancing an individual's knowledge and skills to prevent injuries or illness and promote safety and health

» Reaching the community with information and resources to promote safety and health

What type of funding do you have (are you seeking) for this initiative? (Select all that apply.)
*

» Grant (s)

How are you measuring progress or impact?
(i.e. Number of people reached, number of med drop units, pounds of medications collected, pre and post surveys, pre and post data analysis, etc.)

Pre-Post survey

Please indicate the type and frequency of communications you have used in the past year (January – December 2014).

	Did not use in past year	1-3 times/year	4-6 times/year	7-10 times/year	11+ times/year
Emails/electronic-blasts (e-blasts) *		x			
Newsletters sent *	x				
Newspaper articles *		x			
Op-eds *	x				
Word of mouth *				x	
Other (Specify below) *		x			

Please specify the 'other' communication you used in the past year. If other not selected, leave blank.

Campus Newspapr

Contact Information

Please provide the following information below of the person who completed the survey.

Name:

David Fender

Name of Community:

Murray State University

Email Address:

dfender@murraystate.edu