From: noreply@mail.questionpro.com
To: Suja Shunmugavelu
Subject: QuestionPro - [Safe Communities - Annual Coalition Report] - 28217974
Date: Friday, April 17, 2015 3:56:52 PM

Response Details

ID	28217974
Timestamp	04/17/2015 13:21:07
IP Address	204.26.68.3
Time Taken	2346 seconds
Survey Language	English
Email Address	jgrimes@afmidwest.com
Email List	L260315325

Integration/Custom Tags

Custom 1	Norfolk
Custom 2	NE

Geo Coding

Country	US
Region	NE
City	Norfolk
Area Code	402
DMA Code	624

Community Injury Data

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

» Falls
» Motor vehicle crashes
» Other (Please specify): Struck by/against

Initiative Name:

Tai Chi classes

Injury Issue it addresses. (Select one.) *

» Falls

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)

To reduce falls in older adults, by teaching them coordination and stability

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.elvphd.org/GetInvolved/TaiChiInstructor.aspx

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

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.)

State data

Initiative Name:

Teens in the Driver Seat

Injury Issue it addresses. (Select one.) *

» Motor vehicle crashes

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 motor vehicle injuries, by promoting the use of seat belts, and educating teens on the hazards of distracted driving

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.t-driver.com/

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.)
*

» Other type of funding (Please specify): Public school projects

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 and post surveys, and state data

Initiative Name:

Heads Up Concussion Education

Injury Issue it addresses. (Select one.) *

» Other (Please specify): Struck by/against

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)

Educate parents, coaches, etc. of our youth involved in sports activities, on when to suspect a concussion and how to react to it

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.cdc.gov/headsup/

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.)
*

» No funding

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.)

State data

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				

Contact Information

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

Name:

John Grimes

Name of Community:

Norfolk, NE Safe Community

Email Address:

jgrimes@afmidwest.com