



**Safe Communities America Application Package
National Accreditation
2015**

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Communities Seeking National Re-Accreditation

For communities applying for national re-accreditation, your coalition leadership will receive an email from SCA staff six months prior to expiration reminding that you must submit your letter of intent. The completed application should be submitted one month prior to the most recent accreditation date. The Safe Communities accreditation expires five years from the month of the last accreditation. For example, if your community was accredited in January 2011, your accreditation expires January 2016 and you must submit your application by December 2015.

For communities seeking re-accreditation, the application fee is \$1,200. If an application is not submitted one month prior to the expiration of accreditation, the fee to apply for re-accreditation increases to \$1,500.

Please review the *Does My Community Need A Site Visit?* document to determine if a site visit will be required for your community. If you have any questions during this process, please contact scainfo@nsc.org.

SAFE COMMUNITIES ACCREDITATION PROCESS

Letter of Intent

- Submit letter of intent signed by Mayor (or similar official)



Application fee

- An invoice will be generated once the Letter of Intent is received
- Application fee is \$1,500 (Re-accreditation fee is \$1,200)



Application Assistance

- SCA staff will provide ongoing support and assistance to the community



Application Submission

- Submit formal application
- SCA staff will complete cursory review before assigning two official reviewers
- Application should be submitted within 12 months of letter of intent



Application Review

- Required modifications will be sent to coalition leadership
- Review process should take 4-6 weeks from application submission



Site Visit

- Site visit is required for all new communities
- Site visit should include application items highlighted by reviewers
- At the end of the site visit, reviewers will indicate if they recommend the community for accreditation



Community Report

- Reviewers will provide SCA staff and community with final application report



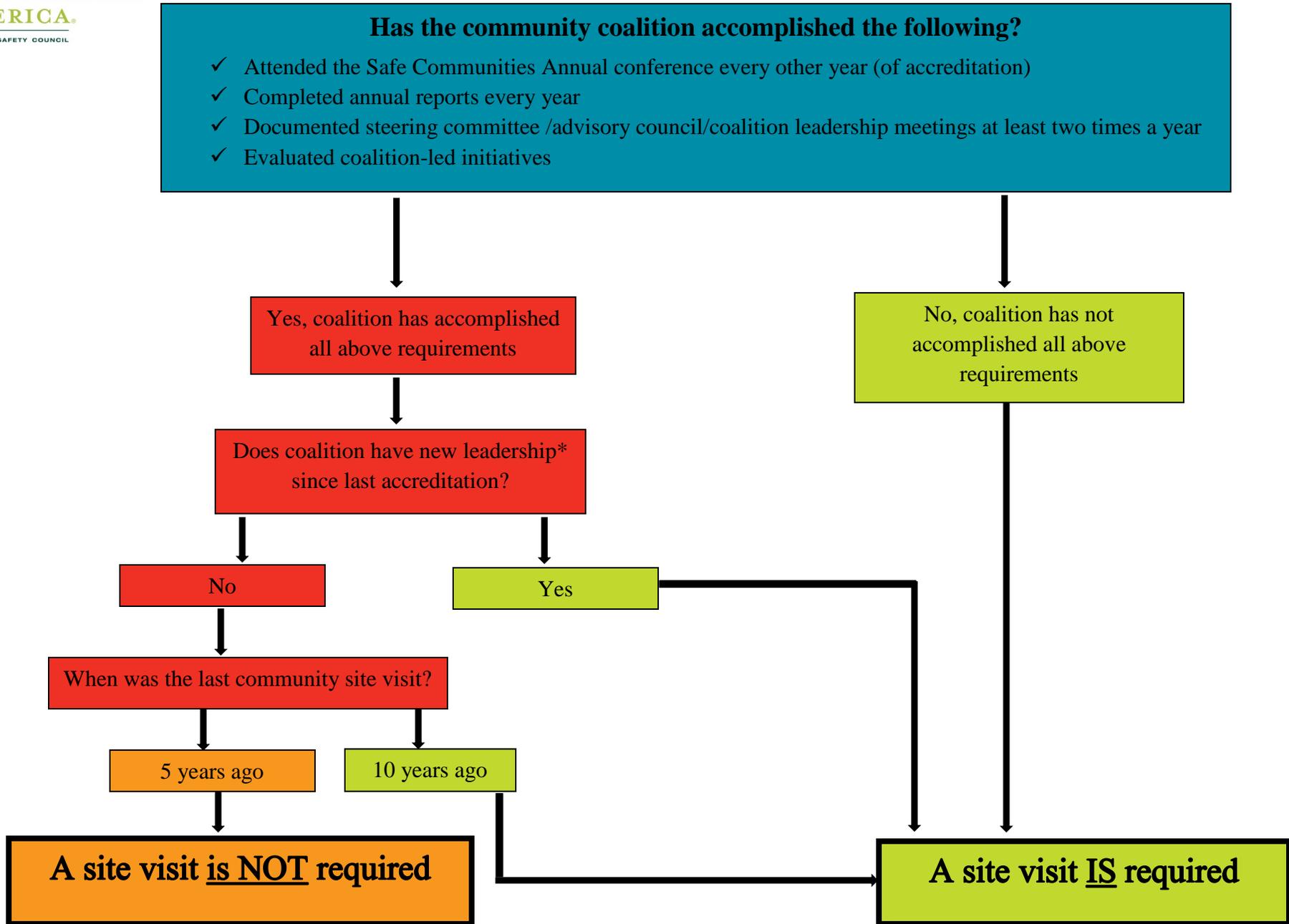
Accreditation Ceremony

- Ceremony to be planned within approximately 12 weeks of accreditation



Ongoing support and networking with SCA and Pan Pacific Safe Communities Network

DOES MY COMMUNITY NEED A SITE VISIT?



* If regular leadership change is planned in your coalition (i.e. coalition chair is appointed every two years) within the five year period, please document in Section 3 of the application.



APPLICATION TO BECOME A US ACCREDITED SAFE COMMUNITY

Applications should be submitted in 12-point font, Arial and single-spaced.

Section 1: Contact information

List two key contacts in your community during the application process.

Name and title:

Name and title:

Organization:

Organization:

Mailing address:

Mailing address:

E-mail:

E-mail:

Phone:

Phone:

Section 2: Community Description

Describe your community: (maximum 2 pages, may include pictures)

- Describe your community's history and what makes your community unique.
- Why is your community seeking a Safe Communities accreditation?
- Who in your community (person/agency) is taking the lead in organizing this effort? Why?

Section 3: Criteria to Be a Safe Community

I. Sustained collaboration

An infrastructure based on partnership and collaboration representing a cross section of community leaders and organizations committed to community safety and well-being.

1. Describe your Safe Communities Coalition (be specific)
 - a. Name of the coalition
 - b. Members, their organizational affiliations and email address
 - c. Organizational support
 - d. Date the group formed
 - e. Meeting notes

2. Mission Statement
3. Communications Strategy

II. Data Collection and Application

What does your local data tell you about injuries and safety and how is the coalition applying the data to set goals? Include the most recent data available.

1. Community demographics
2. Injury data
3. Data summary table
4. Data source
5. Project goals
6. How will the data be used in the development of new strategies?

III. Effective strategies to address unintentional and intentional injuries

Coalition-driven strategies should be promising or evidence based and fall within six key areas: Motor vehicle, including distracted and teen driving and child passenger safety; Older adult falls; Poisoning by prescription drug overdoses; Workplace safety - on and off-the-job; Violence and suicide prevention; Emergency preparedness. Include current activities and plans for the future.

Include at least three coalition-led activities for the application. Use the table below to outline your strategies. Review the Safe Communities Application Guidelines document for an example.

Injury Area:						
Project Name	Project Goal	Project description	Is this promising or evidence based? Include the source.	Target group (age, gender, vulnerable population)	Length of project	Partners

IV. Evaluation methods

Document how the coalition is measuring initiatives in at least three key Safe Communities areas. Review the Safe Communities Application Guidelines document for an example.

Activities	Outcomes	Length	Indicator (s)	Method	Result
What did you (or will you) do?	What does success look like?	Short, intermediate or long term outcomes?	What did you (or will you) measure?	How did you (or will you) measure it?	What did you find? (if applicable)

Section 4: Community Inventory of Safety and Injury Initiatives

This section should be an audit of all the injury-related programs, policies, and practices available in your community. This should provide your community with an broad view of all the activities occurring in the community, identify duplicated efforts, and encourage cross collaboration between agencies in the community. List all initiatives by the **six injury areas** and include the **initiative name** and target **population**. Review the Safe Communities Application Guidelines for a template.

GUIDELINES FOR THE APPLICATION TO BECOME A US ACCREDITED SAFE COMMUNITY

Applicants should review the following guidelines to ensure that you provide the correct information in the requested format. **Applications should be submitted in 12-point font, Arial and single-spaced.** If there are questions at any point during the application process, feel free to contact scaninfo@nsc.org.

Section 1: Contact Information

List the two key contacts Safe Communities America staff and reviewers will work with during the application process. The contacts should be people who have been involved with the coalition development and can include the coalition chair or a representative from the lead agency.

Section 2: Community Description

Describe your community: (maximum 2 pages, may include pictures)

- **Describe your community’s history and what makes your community unique:** This section should include a brief summary describing key features and interesting facts about your community (town, city, village, county, or region).
- **Why is your community seeking a Safe Communities accreditation?**
- **Who in your community (person/agency) is taking the lead in organizing this effort? Why?** Describe the organization and the benefit of this organization taking the lead for the Safe Communities coalition.

Section 3: Criteria to Be a Safe Community

I. Sustained collaboration

An infrastructure based on partnership and collaboration representing a cross section of community leaders and organizations committed to community safety and well-being.

1. **Describe your Safe Communities Coalition (be specific)**
 - a. **Name of the coalition:** Provide the official name of your Safe Community coalition; for example “Itasca Safe Community Coalition”
 - b. **Member names, their organizational affiliations and email address**
 - i. Provide the names, organizational affiliation and email address of all coalition members. Use **Appendix A** as a template. Note: accredited coalitions will provide an updated list of members each year as part of annual reporting. Member names that appear on **Appendix A** agree to the goals of the coalition and play a role in the larger coalition, steering committee or task group.

- ii. Provide an organizational chart of your coalition structure. See **Appendix B** for a sample organizational chart. If your coalition plans to have regular leadership change, please describe the sustainability plans.
 - c. **Organizational support:** Please provide at least two letters of support to document support for the Safe Communities coalition from community agencies and leaders. Letters of support should be from key agencies/individuals, note how being accredited as a Safe Community will further improve partnerships and collaborations within the community and note specific ways that particular agency/individual is supporting the application and accreditation (e.g. financial support, providing meeting space, appointing persons to sit on task force or steering committee, providing in kind support for data analysis or web support).
 - d. **Date the group formed:** The date of the first official meeting, after community decides to seek Safe Communities accreditation, where key stakeholders meet to develop a plan for the coalition and accreditation.
 - e. **Meeting notes:** Submit all meeting notes between letter of intent and application submission. See **Appendix C** for a sample template.
2. **Mission statement:** A mission statement describes what the coalition is going to do.
- An example of a Safe Communities mission statement is: *Through a collaborative process, the New Lenox Safe Communities America Coalition will improve the health, safety and quality of life for residents and visitors through injury analysis and the implementation of programs designed to increase safety and prevent injuries.*
- Visit the [Community Toolbox: Developing Vision and Mission Statements](#) for additional assistance in developing a mission statement.
3. **Communications strategy:** Include a description of how your coalition communicates and shares information within the coalition, with the community, and outside its borders. This can include, but is not limited to, sharing information through conferences, email blasts, social media and/or letters to the editor of local newspapers.

II. Data collection and application

What does your local data tell you about injuries and safety and how is the coalition applying the data to set goals? Include the most recent data available.

1. **Community demographics:** Include gender, age, race, education, economic status/poverty level, educational attainment, employment status for the most recent year available.
2. **Injury data:** Document, when possible, injuries and fatalities based on age, race and gender for the most recent years available.
3. **Data summary table:** Based on the injury data outlined above, provide summary statements of injury trends, over time, in your community. Include summary statements for the six major injury areas, motor vehicle crashes, older adults falls, poisoning by prescription drug overdoses, violence and suicide, workplace injuries and emergency preparedness (if applicable, describe a recent emergency due to a natural or man-made

disaster) and any additional coalition priority areas. The data you provide in this summary should align with your coalition’s goals and initiatives.

Data Summary Table

Type of Injury	Trend
Older adult falls	In 2012, X% of older adults in the community were admitted to the hospital due to a fall. This is an increase of x% since 2010.
Motor vehicle	Increase in alcohol-related crashes between 2003-2013.
Natural disaster	In 2012, a major tornado hit the community, resulting in 100 families losing their homes.

- Data source:** Specifically describe each data source and the year the data was reported. Examples include hospital discharge data, trauma data, medical examiner, [state highway safety](#), state public health department, US Census Bureau ([city and county quick facts](#)), police department crash data, etc.
- Project goals:** The project goals should influence or develop public policy, change behaviors and/or build healthy communities. These goals should align with the data. Please list one goal for each coalition-supported initiative.

Examples include:

Increase child restraint use in the local Independent School District.

Increase the number of coalition employers implementing a no cell phone use while driving policy.

For more assistance in developing goals, visit: [Community Toolbox: Coalition Building](#) and [Building Coalitions: Coalition Goal Setting](#).

- How will the data be used in the development of new strategies?** In this section, outline how you have used or will use the data in developing strategies. Does the coalition plan to use the data to drive its activities or will activities be planned based on other drivers? If the coalition does not use the data to drive activities, tell us why?

III. Effective strategies to address unintentional and intentional injuries

Coalition-supported (initiatives are promoted, supported or led by coalition) initiatives should be promising or evidence based and fall within six key areas: Motor vehicle, including distracted and teen driving and child passenger safety; Older adult falls; Poisoning by prescription drug overdoses; Workplace safety - on and off-the-job; Violence and suicide prevention; Emergency preparedness. Include current activities and plans for the future.

Each strategy outlined in this section should be [promising](#) or [evidence base](#) and should fall within the six key areas, motor vehicle, older adult falls, unintentional drug overdoses, workplace, violence and suicide and emergency preparedness, but may include other local

injury priorities. Include current activities and plans for the future. **Include at least three coalition-supported initiatives for the application.** Use the tables below to outline the required information. If certain information is not available, work with coalition members to create a plan for obtaining the information.

Please refer to the below list of resources, to assist in identifying evidence base initiatives. This is not an exhaustive list and other reputable resources can also be used.

- CDC Compendium of Effective Falls Interventions - <http://www.cdc.gov/homeandrecreationalafety/Falls/compendium.html>
- Center for the Study and Prevention of Violence: Blueprints for Violence Prevention - <http://www.colorado.edu/cspv/blueprints/index.html>
- Community Preventive Services - <http://www.thecommunityguide.org/about/conclusionreport.html>
- County Health Rankings - <http://www.countyhealthrankings.org/policies>
- National Council on Aging - <http://www.ncoa.org/improve-health/center-for-healthy-aging/where-to-find-evidence-based.html>
- NHTSA Countermeasures that Work: A Highway Safety Countermeasure Guide - <http://www.nhtsa.gov/staticfiles/nti/pdf/811736.pdf>
- SAMHSA's National Registry of Evidence-based Practices and Programs- <http://www.nrepp.samhsa.gov/>
- Suicide Prevention Resources Center - <http://www.sprc.org/bpr/section-i-evidence-based-programs>
- Trust for America's Health A Compendium of Proven Community-Based Prevention Programs - <http://healthyamericans.org/report/110/>
- University of Michigan Injury Center - <http://www.injurycenter.umich.edu/programs>

Injury Area: Older adult falls						
Project Name	Project Goal	Project description	Is this promising or evidence based? Include the source.	Target group (age, gender, vulnerable population)	Length of project	Partners
Tai Chi for Better Balance	Reduce falls in older adults	Senior center based program focused on specific tai chi moves to improve balance and delivered by experienced tai chi instructors.	Yes. Found in the CDC Compendium of Effective Falls Interventions	Inactive adults 70 and older	One year	Senior Center, local hospital,

Injury Area: Transportation Safety						
Project Name	Project Goal	Project description	Is this promising or evidence based? Include the source.	Target group (age, gender, vulnerable population)	Length of project	Partners
Employer Cell phone Policy	Increase the number of employers in the coalition implementing a no cell phone use while driving policy.	Work with employers to develop, implement and communicate cell phone policy.	Promising practice - Understanding the distracted brain - http://www.nsc.org/DistractedDriving/Documents/Cognitive-Distraction-White-Paper.pdf	Employers of the coalition	Two years	Employers, National Safety Council

Injury Area: Prescription Drug Abuse						
Project Name	Project Goal	Project description	Is this promising or evidence based? Include the source.	Target group (age, gender, vulnerable population)	Length of project	Partners
Prescriber education	Increase the number of prescribers trained in appropriate prescribing practices	Hold free training sessions for prescribers in the community on safe opioid prescribing. Medical education credits will be offered.	Promising practice encouraged by SAMHSA (Objective 1.4.1): https://store.samhsa.gov/samhsa.gov/content/SAM11-4629/03-Prevention.pdf	Prescribers in the county	1 year	Local hospitals, health care clinics, National Safety Council

IV. Evaluation methods

Document how the coalition is measuring all the coalition-supported initiatives. See examples below. Use the below table format to report all evaluation activities.

Activities	Outcomes	Length	Indicator(s)	Method	Result
What did you (or will you) do?	What does success look like?	Short term, intermediate term or long-term outcomes?	What did you (or will you) measure?	How did you (or will you) measure it?	What did you find? (if applicable)
Examples					
Senior falls program	Reduce, by 15%, the number of adults over the age of 70 going to the emergency room for a falls related injury by December 2015.	Long-term	Emergency room visits of people over 70 years old who had a fall-related injury at local hospitals in December	Obtained counts of ER visits from hospital data	At 2 years, found very little decrease in number of seniors visiting the ER due to falls.
Cell phone policy kit	Increase the number of employers in the coalition who implement a no cell phone use while driving policy by 50%, by 2016.	Intermediate-term	Number of employers who implemented the kit	Pre and post surveys of employers	N/A
Safety City	Recruit 10 elementary schools to have fieldtrips to Safety City in 2013	Short term	Number of schools who held school field trips to Safety City	Count of number of schools	12 elementary schools held field trips to Safety City.

Section 4: Community Inventory of Safety and Injury Initiatives

This section should be an audit of all the injury-related programs, policies, and practices available in your community. This should provide your community with a broad view of all the activities occurring in the community, identify duplicated efforts, and encourage cross collaboration between agencies in the community. List all initiatives by the **six injury areas** and include the **initiative name** and **target population**. See examples below.

Motor Vehicle

Name of initiative	Target group
Teen Safe Driver Week	Teens ages 13-19
Operation Lifesaver	All ages
Click it or ticket	Ages 16+

Older adult falls prevention

Name of initiative	Target group
Tai Chi for better balance	Older adults 65+
Home modification interventions	Older adults 65+

Poisoning prevention

Name of initiative	Target group
Med Drop boxes	All ages
Medical Task Force on Safe Opioid Prescribing	Clinicians

Workplace Safety

Name of initiative	Target group
Total cell phone ban while driving	Employees
Shoes for Crews	Custodians

Violence and Suicide Prevention

Name of initiative	Target group
School bullying prevention	Children 14-18 (in high school)
QPR – Question, Persuade, Refer	Healthcare providers, social workers, law enforcement, first responders, school staff

Emergency Preparedness

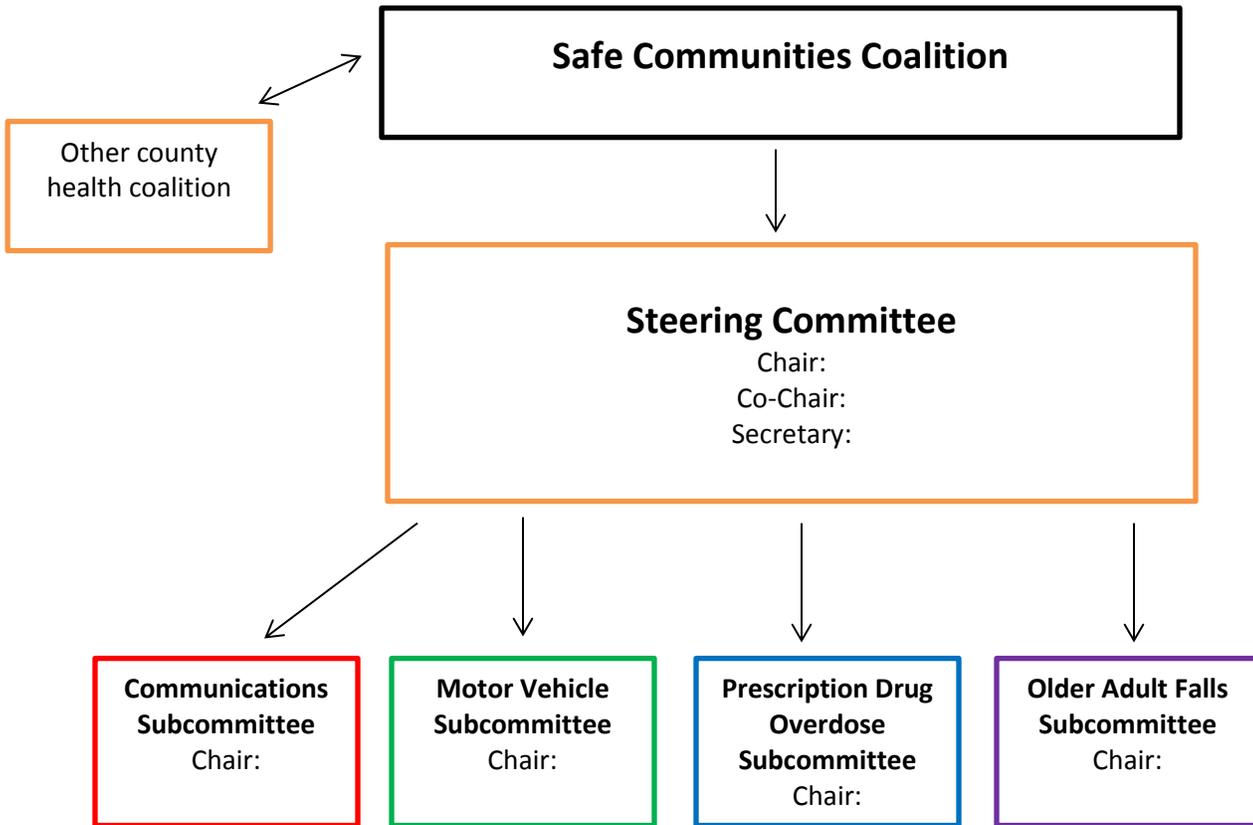
Name of initiative	Target group
Medical Reserve Corps	Entire community
Community Emergency Response Team (CERT)	Entire community

Appendix A: Community Coalition Member List

All listed members agree to the goals of the coalition and to play a role in the coalition, steering committee or task group.

Member Name	Member Organization	Email	Date organization joined coalition	Member role (steering committee, task group, other)

Appendix B: Safe Communities Coalition Organizational Chart



Appendix C: Meeting Minutes Template

Name of Group			
Date			
Type of Meeting	<input type="checkbox"/> <input type="checkbox"/> General Meeting	<input type="checkbox"/> Steering Committee	<input type="checkbox"/> <input type="checkbox"/> Work Group Meeting
Attendees	Names and organizations		
Recorder	Name		
TOPIC	DISCUSSION		ACTION or F/U
1.	<ul style="list-style-type: none"> • Key discussion points • Decisions made 		What, by when? Responsible person(s)?
2.	<ul style="list-style-type: none"> • Key discussion points • Decisions made 		
3.	<ul style="list-style-type: none"> • Key discussion points • Decisions made 		
4.	<ul style="list-style-type: none"> • Key discussion points • Decisions made 		
5.	<ul style="list-style-type: none"> • Key discussion points • Decisions made 		
Announcements			
Adjourn	Next meeting time, date, location.		

This template is available at Coalitions Work website: <http://coalitionswork.com/wp-content/uploads/Meeting-Minutes-Template.pdf>