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HEALTHY COMMUNITY DESIGN: POLICY STATEMENTS FOR OFFICIAL PLANS RESOURCE EVALUATION

JULY 20, 2012

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EXECUTIVE SUMMARY

In 2010, the Simcoe Muskoka District Health Unit (SMDHU) created *Healthy Community Design: Policy Statements for Official Plans*, a policy resource for municipalities in Simcoe Muskoka to support them in their work to incorporate healthy community design policies into official plans and other planning documents. In 2011, local municipal planners, municipal elected officials, selected key partners, selected health unit staff and Board of Health members were asked to participate in an on-line survey to find out if the resource was useful, how it was being used, had it resulted in the incorporation of healthy community design policy statements into municipal official plans and/or other strategic documents, and if and how the resource could be improved.

The response rate was mixed: 22% for municipal elected officials; 33% for municipal planners; 58% for selected SMDHU staff; 46% for Board of Health; and 0% for selected key partners. Highlights of the results are as follows:

Municipal elected officials & municipal planners

- 45% of municipal elected officials and 96% of municipal planners who responded to the survey indicated that they were familiar with the resource.
- Almost half of elected officials (46%) and planners (48%) said they had used the resource.
- Elected officials reported they used the resource for decision making (100%), to educate themselves about healthy community design (80%) and in their discussions with planners (60%).
- Planners used the resource mostly as a general reference (92%), had used some of the policies in their Official Plan or other municipal documents (58%), and in discussions with Council or staff (42%)
- The overall average rating of the policy resource's usefulness, relevance, readability and educational value given by both elected officials and planners was 4.2 out of 5 (where 5 is excellent).
- 55% of elected officials and 73% of planners indicated that planning policies from the resource had been incorporated into municipal planning decisions or documents. The highest number of those policies was related to the environment.
- For implementation activities, 45% of elected officials and 27% of planners stated that to their knowledge some of these had been used to implement the Official Plan or other plans.

- Overall, 55% of elected officials and 85% of planners were either satisfied or very satisfied with the resource.

SMDHU Staff and Board of Health

- 96% of staff and 83% of Board who responded to the survey indicated they were familiar with the resource.
- The majority of staff (71%) responded that the resource had introduced new concepts to them, while less than half (40%) of Board stated the same.
- Similarly, 81% of staff and 40% of Board stated they had used the resource as part of their work.
- Among staff and Board combined, the main way the resource had been used was as a general reference for themselves (95%), followed by in discussions/dealings with colleagues and peers (79%).
- In ranking the resource on its usefulness, relevance, readability and educational value among staff and Board combined, the average score ranged from 4.3 to 4.6, with a score of 5 being excellent.
- On its helpfulness in championing healthy community design, staff and Board combined ranked the resource as an average 4.5 out of 5 (where 5 is very helpful).
- Among staff and BOH combined, when asked whether they knew of planning policies being incorporated into municipal decisions or documents, 46% said 'yes' and 23% said 'no'. Another 31% said 'not sure'.
- When asked whether they knew of implementation activities from the resource being used in the implementation of municipal plans or documents, the majority of staff and BOH combined (58%) said they were not sure.
- The overall average rating of satisfaction with the resource given by both staff and Board combined was 4.3 out of 5 (where 5 is very satisfied).

The results of this evaluation show that the resource was useful and educational to the four key audiences. Overall satisfaction level for the resource was high (average 4.1 out of 5). Survey responses indicate it has helped to advance the implementation of healthy community design concepts into official planning documents, and to some extent implementation activities to support these policies have been enacted. Participants were able to identify some improvements to the resource that if implemented could make the resource more useful to them.

PURPOSE

In 2010, the Simcoe Muskoka District Health Unit (SMDHU) created a policy resource for municipalities in Simcoe Muskoka to support them in their work to incorporate healthy community design policies into official plans and other planning documents. The resource, *Healthy Community Design: Policy Statements for Official Plans* contains sample healthy community design policy statements and implementation activities that can be incorporated into policy documents. The development of this resource was based on the results of a municipal planners' needs assessment conducted by the health unit in 2009.

Evaluation of this resource was done in order to determine how useful it has been for municipal planners and other key groups, and whether or not healthy community design policy has been incorporated into municipal official plans as a result of this resource. Specific research questions are:

1. Is the policy resource useful to municipal planners, municipal elected officials, key partners, health unit staff and Board of Health members?
2. How is the policy resource being used by municipal planners, municipal elected officials, key partners, health unit staff and Board of Health members?
3. Has the policy resource resulted in the incorporation of healthy community design policy statements into municipal official plans and/or other strategic documents?
4. What can be done to improve the resource?
5. What other support and/or resources do municipal planners, municipal elected officials, key partners, health unit staff and Board of Health members need to support them in creating healthy communities in their municipality?

It is anticipated that data collected for this evaluation will help to determine future revisions to its content, design and dissemination. Results may also influence program activities related to the health unit's Building Healthy Communities initiative and the future operational plans of some program teams.

BACKGROUND

One of the key deliverables of the health unit's Building Healthy Communities (BHC) initiative was the development of a resource that would assist municipal planners in Simcoe and Muskoka to include healthy community design principles and concepts into their official plans and other strategic planning documents. In 2009, the health unit conducted a needs assessment of municipal planners in Simcoe Muskoka to determine what kind of resources would support them in developing healthy policy for official plans. Their responses included the desire to have draft policy statements and implementation suggestions that included the words and concepts needed to reflect healthy community design policy. As a result, the health unit worked with partners and planners to develop a document that contained this information. In March 2010, the health unit released the resource *Healthy Community Design: Policy Statements for Official Plans*. This document was developed to assist municipal planners, municipal elected officials and other stakeholders and partners in Simcoe Muskoka to create healthy and complete communities while also meeting the provincial planning policies.

The resource includes suggestions for official plan policies that are based on five key health issues impacted by the built environment: environment; injury and safety; physical activity and sun safety; food access; and social cohesion and well-being. Each section contains an overall health-related goal and rationale, a number of related objectives, suggested planning policies to help achieve the objectives and suggested strategies for implementation of the policies.

The resource is a guide only and it is up to each individual municipality to consider these policy and implementation suggestions and to determine the feasibility of including them in its official plan and other municipal strategies. Municipalities are encouraged to use the concepts within this document and to freely adapt, amend or revise the wording to suit their particular needs and circumstances.

We know that official plans set the context and framework by which a community grows and develops. From official plans, secondary plans, by-laws and regulations are created to guide and help implement the policies within the plan. Therefore, it is anticipated that the existence of health-supportive policies within an official plan will lead to communities being designed in the most health promoting way possible. Before this resource was developed there was very little in the literature or other resources that provided this type of policy guidance for municipalities.

Under the Building Healthy Communities initiative, an evaluation plan was created that included an internal and external component. Under the external component, it was determined that gauging the use and effectiveness of this resource would be one way to evaluate the initiative's progress. It was also determined that the results of this evaluation would build upon what we already knew from the data collected for the 2009 municipal planners' needs assessment, and would also help to provide us direction for future activities related to health design policy work with municipalities.

The execution of this evaluation occurred over the following timeline:

- August 2011 - Data collection plan completed
- October 2011 – Implementation of evaluation
- December 2011-March 2012 - Data analysis
- April-June 2012 – Report writing

METHODS

Five online surveys were developed for each of the following target groups in Simcoe Muskoka: [municipal elected officials](#), [municipal planners](#), [key partners](#), the [Board of Health](#) and [SMDHU staff](#) involved in BHC-related activities. The Health Promotion Specialist (Corporate Service) and the Research Analyst (Corporate) worked together to develop and implement the survey tool and collect/record the data.

Municipal planners – All municipal planners in Simcoe Muskoka were eligible to participate in the survey.

SMDHU Staff– A list of eligible SMDHU staff members who were involved in BHC-related activities was developed with management input. These staff members were then eligible to participate in the survey.

SMDHU Board of Health – All SMDHU Board of Health members were eligible to participate in the survey.

Key partners – A list of key partners who use or might use this resource was developed with input from SMDHU staff and managers working on built environment activities. These key partners were then eligible to participate in the survey.

Municipal elected officials – All municipal elected officials in Simcoe Muskoka were eligible to participate in the survey.

All participants were recruited through an [email letter of introduction](#) tailored to each target group and sent one week before the survey went live. This email included details such as: survey objectives, timelines, confidentiality and anonymity issues, and the voluntary nature of the survey.

Sections A and B of the questionnaires asked questions related to the participant's familiarity with the resource, how they had accessed it, how they had used it in their work and what the results of using the resource were. These questions were designed to answer the first three research questions (listed above). Section C of the questionnaire included questions about their satisfaction with the resource and if/how it could be changed to be more useful. It also asked for

what other types of resources they need to help them create healthier communities. These questions related directly to the fourth and fifth research questions (listed above).

RESULTS

This report has been organized with municipal elected officials and municipal planners surveys reported together, followed by SMDHU staff and Board of Health surveys reported together. The reason for this is that the questions asked on the surveys being grouped together were almost identical, and it was felt the analysis would flow more smoothly and be more readable with the report structured this way. The elected officials and municipal planners survey results are not meant to be compared against each other, neither are staff and Board of Health survey results meant to be compared this way. Analysis of each of the different groups surveyed was conducted separately. Although key partners were a fifth target group to receive the survey, no responses were received from the six partners who received the invitation to participate in the survey. Therefore, no results are available for key partners.

In the figures used, the percentage is often displayed on the axis with the actual counts included inside the graph above the corresponding bar.

ELECTED OFFICIALS & MUNICIPAL PLANNERS

SIMCOE MUSKOKA MUNICIPAL ELECTED OFFICIALS SURVEY

Of the 138 surveys sent to this group, 31 elected officials responded, resulting in a 22% response rate. Of those 31, 27 completed the question asking about the municipality they represent: 16 (59%) represented a lower-tier municipality in the County of Simcoe; six (22%) represented an upper-tier municipality in the County of Simcoe or District of Muskoka; five (19%) represented a lower-tier municipality located in the District of Muskoka; and three respondents (11%) represented the City of Barrie or the City of Orillia. Respondents were asked to select all that apply so the total count is higher than the number of respondents.

Most of the respondents (11/27 or 41%) indicated that they had served as a municipal elected representative for less than one year, followed by eight (30%) who had served 5-10 years. Seven respondents (26%) indicated they have served as a municipal elected representative for more than 10 years, and only one respondent (4%) had served between 1-4 years.

SIMCOE MUSKOKA MUNICIPAL PLANNERS SURVEY

Seventy-eight surveys were sent to municipal planners in Simcoe Muskoka, and 26 planners responded, resulting in a 33% response rate. One respondent abandoned the survey after

question 5 and two others abandoned the survey after question 8. Only one of the 26 respondents indicated they were 'not sure' they were familiar with the resource and this person was skipped to the end of the survey. Among the responding municipal planners, 17 (74%) worked for a municipality located in the County of Simcoe; three (13%) worked for a municipality located in the District of Muskoka; two (9%) worked for the County of Simcoe or the District of Muskoka; and one (4%) worked for the City of Barrie or the City of Orillia.

SECTION A: Familiarity of Resource

Question 1: Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans*?

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, less than half of the respondents, 14 of 31 (45%) said 'yes' they were familiar with the resource. Eleven (36%) indicated they were not aware of the resource and six (19%) were 'not sure' about whether they were aware of the resource.

MUNICIPAL PLANNERS SURVEY

Nearly all of the responding Municipal Planners (25 out of 26, or 96%) were aware of the resource *Healthy Community Design: Policy Statements for Official Plans*. The remaining responding municipal planner was unsure.

Question 2: How did you first become aware of the policy resource?

This question was only asked of those who responded 'yes' to the first question, which asked respondents whether they were familiar with the resource.

MUNICIPAL ELECTED OFFICIALS SURVEY

The main way respondents to the elected officials survey said they became aware of the policy resource was via an email or letter sent from the SMDHU Medical Officer of Health (MOH), or through an SMDHU staff member, with four of 13 respondents selecting each category (31% each). Two (15%) became aware through a newsletter or bulletin and two (15%) through a conference or workshop. One elected official selected the 'other' category and said they first became aware of the resource through a presentation to council. One other elected official who was familiar with the resource skipped this question.

MUNICIPAL PLANNERS SURVEY

The main way respondents to the municipal planners survey said they became aware of the resource was similarly through an email or letter sent from the SMDHU MOH (11 of 25 respondents or 44%), followed by a SMDHU staff member (9 of 25 respondents or 36%). Three (12%) became aware of the resource through a conference or workshop, one planner through the OPPI newsletter and one through a colleague.

Question 3: In what format did you receive and/or access the policy resource?

MUNICIPAL ELECTED OFFICIALS SURVEY

Electronic versions or links emailed to them was the predominant format in which elected officials accessed and/or received the policy resource (10 counts or 77%). One elected official (8%) received a hardcopy. Two elected officials selected 'other'; one indicated they accessed the resource through a PowerPoint discussion and one said they accessed it through ongoing discussions with planning staff and updates to municipal council. No elected official indicated they received/accessed the resource via SMDHU's website or through a hardcopy version mailed to them from SMDHU.

MUNICIPAL PLANNERS SURVEY

Municipal planners primarily indicated that they received a hardcopy of the policy resource which was mailed to them by SMDHU (12 counts or 48%) or accessed a hardcopy elsewhere (3 counts or 12%). Eight (32%) received/accessed the policy resource through an electronic version or link emailed to them and two planners (8%) accessed the resource from the SMDHU website.

SECTION B: Use of Resource

This section was only applicable for those who answered 'yes', they were familiar with the resource, asked in question 1.

Question 4: Have you used the resource as part of your work?

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, six of 13 respondents or 46% said 'yes' they had used the resource, five (39%) said 'no', and two (15%) were 'not sure'.

MUNICIPAL PLANNERS SURVEY

In the municipal planners survey, 12 of 25 respondents (48%) said 'yes' they had used the resource, and the same number of respondents said 'no', while one person (4%) was 'not sure'.

When looking at the survey data from the elected officials and municipal planners combined, nearly half of all respondents (18 of 38 or 47%) had used the resource as part of their work, while 45% (17 of 38) had not and a few (3 of 38 or 8%) were not sure whether or not they had used the resource as part of their work.

Question 5: In which of the following ways have you used the resource for your work? (Check all that apply)

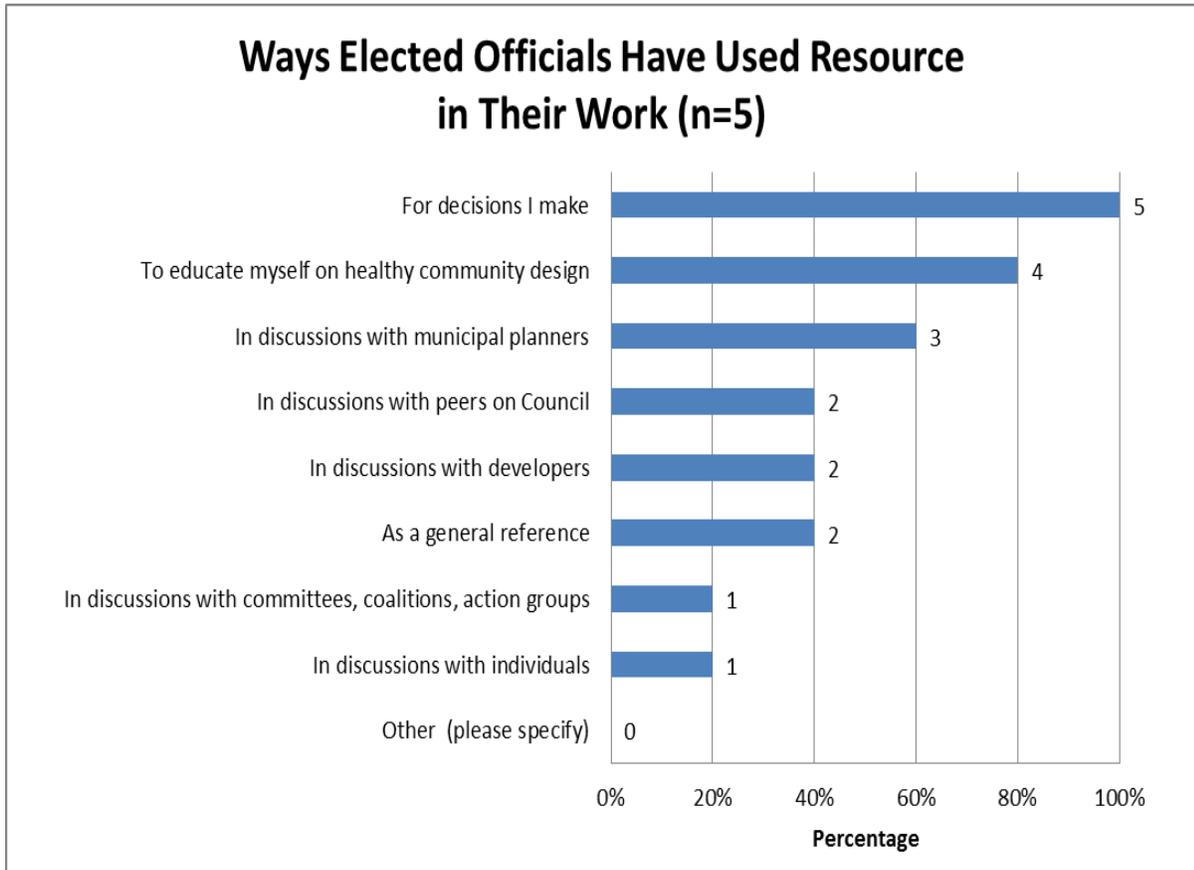
Only those respondents that answered 'yes' to question 4 (that they had used the resource as part of their work) were asked this question. Respondents were asked to select all that apply.

MUNICIPAL ELECTED OFFICIALS SURVEY

The top ways responding elected officials (n=5) used the resource for their work were as follows (Figure 1):

- 1) As a resource for decisions I make (5 counts, 100%);
- 2) To educate myself about healthy community design concepts (4 counts, 80%);
- 3) In discussions/dealings with municipal planners (3 counts, 60%).

Figure 1: Ways Elected Officials Have Used Resource in Their Work



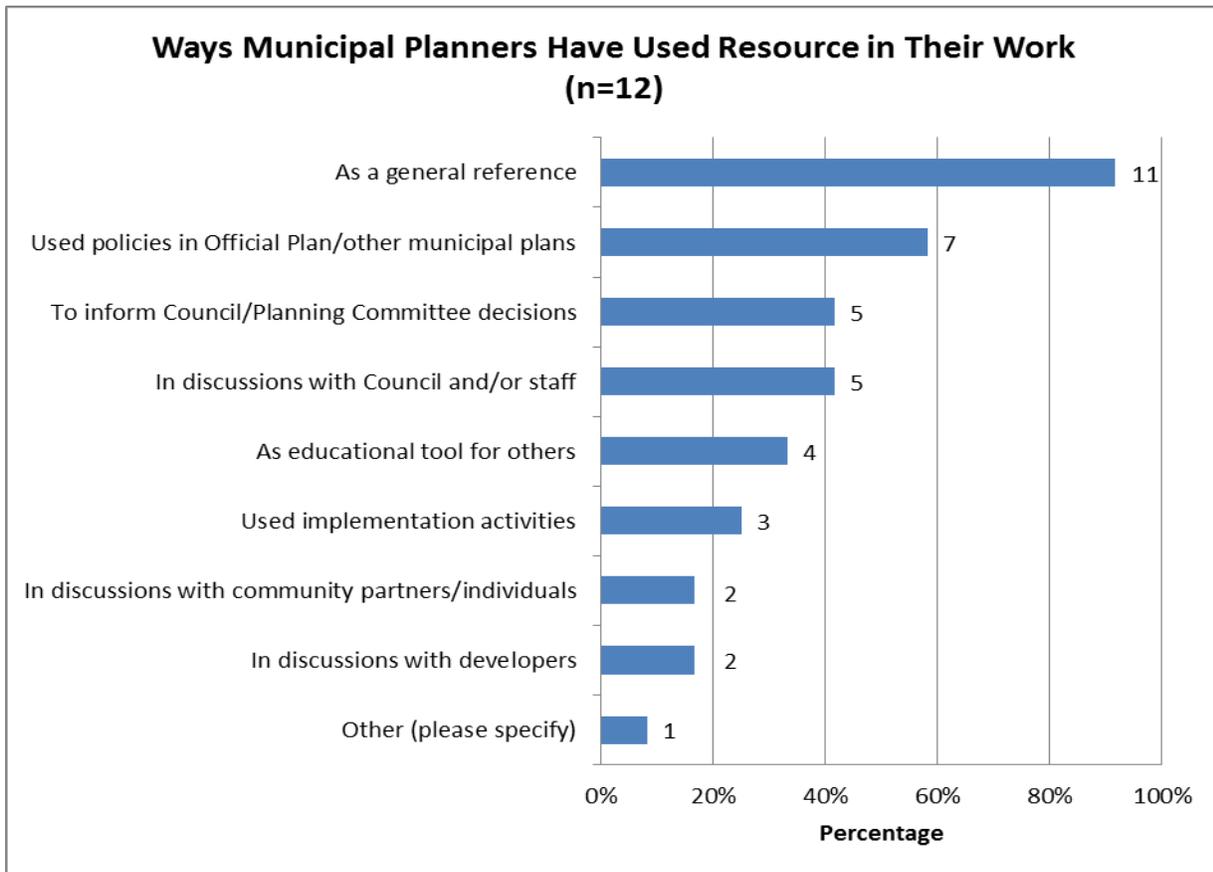
MUNICIPAL PLANNERS SURVEY

The top ways responding municipal planners (n=12) used the resource for their work were as follows:

- 1) As a general reference (11 counts, 92%);
- 2) Used some of the suggested policies in our Official Plan or other municipal plans/documents (7 counts, 58%);
- 3) In discussions/dealings with Council and/or staff (5 counts, 42%);
- 4) To help guide or inform Council and/or Planning Committee decisions (5 counts, 42%).

One municipal planner selected 'other' with the comment that they had used it in discussions with their Environmental Committee. Respondents were asked to select all that apply. See Figure 2.

Figure 2: Ways Municipal Planners Have Used Resource in Their Work



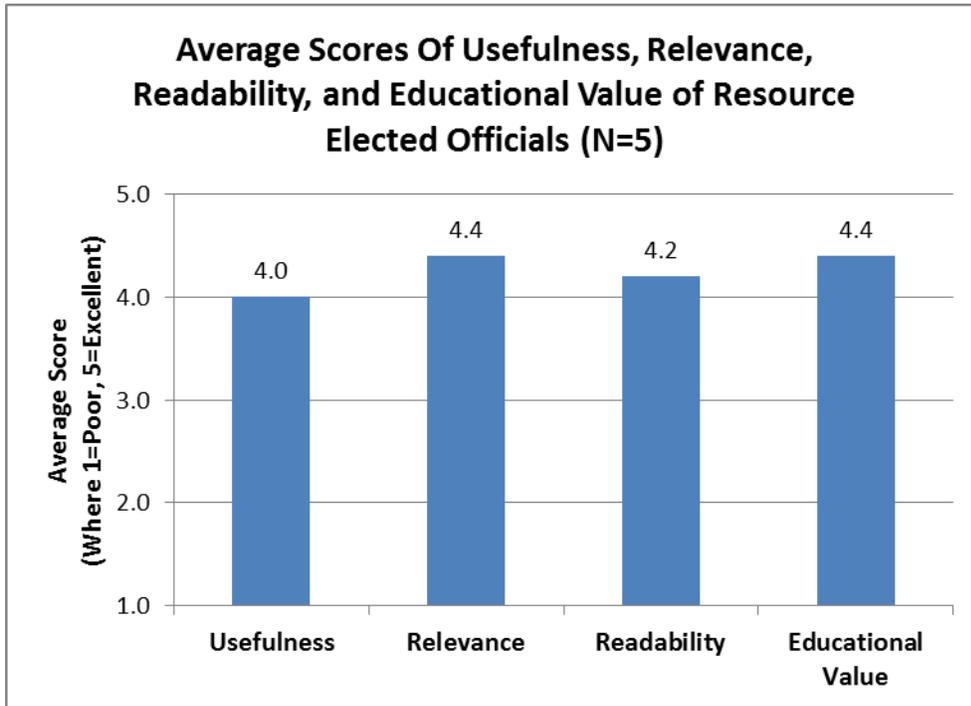
Question 6: On a scale of 1-5 (with 1 being poor and 5 being excellent), please rank the resource on its usefulness, relevance, readability and educational value as it pertains to your work:

Question 6 was asked only of those people who responded 'yes' to question 4, "Have you used the resource as part of your work?"

MUNICIPAL ELECTED OFFICIALS SURVEY

The average ranking among elected officials was on the high end of the scale. Educational value had the highest overall average response (4.4 out of a possible 5.0), tied with relevance. This was followed by readability (4.2) then usefulness (4.0). See Figure 3.

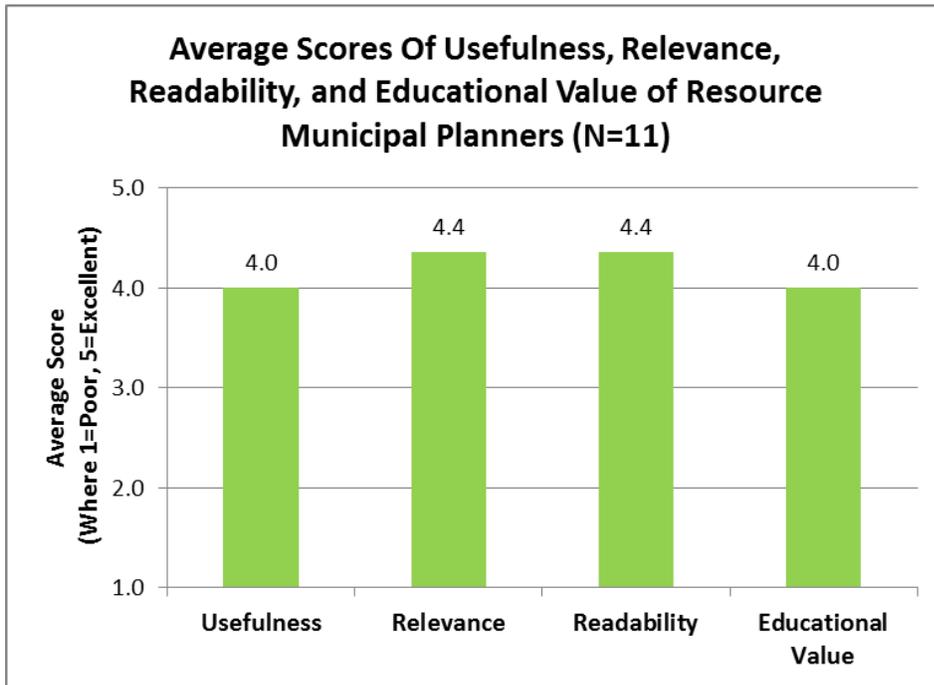
Figure 3: Elected Officials Average Scores Of Usefulness, Relevance, Readability, and Educational Value of Resource



MUNICIPAL PLANNERS SURVEY

The average score from the 11 planners was also high, with the highest average score of 4.4 for both relevance and readability, followed by an average score of 4.0 for both usefulness and educational value. See Figure 4.

Figure 4: Municipal Planners Average Scores Of Usefulness, Relevance, Readability, and Educational Value of Resource



The overall average rating of the policy resource’s usefulness, relevance, readability, and educational value given by municipal elected officials and municipal planners combined (N=16) was 4.2 out of 5 (where 5 is excellent).

Question 7: Why have you not used the resource?

Only those respondents that answered 'no' or 'not sure' to question 4 (Have you used the resource as part of your work?) were asked this question. Respondents were asked to select all responses that applied to them.

MUNICIPAL ELECTED OFFICIALS SURVEY

When asked why they haven't used the resource, elected officials (n=6) said the main reason was that they haven't had an opportunity to use it (4 counts or 67%).

Two elected officials listed reasons why they had not used the resource as 'other'; one reason listed was that they were waiting to do their official plan review, another reason given was that they haven't been able to use it due to the Simcoe County Growth Plan being frozen.

MUNICIPAL PLANNERS SURVEY

The main reason municipal planners gave for why they had not used the resource was that they had not had the opportunity to use it (10 counts or 77%), two respondents noted that their Official Plan was not currently under review and one said the content was not useful for their work. The reason listed under 'other' in the municipal planner survey was that a consultant was working on the Official Plan.

Question 8: Have you shared and/or discussed this resource with others?

MUNICIPAL ELECTED OFFICIALS SURVEY

In the elected officials survey, 9 of 11 (82%) said 'yes' they had shared/discussed the resource with others, and two (18%) said they had not.

MUNICIPAL PLANNERS SURVEY

The same percentages were seen in the municipal planners survey, where 18 of 22 respondents (82%) said they had shared/discussed the resource with others and four (18%) said 'no' they had not.

Eighty-two per cent of responding elected officials and municipal planners combined (27/33) selected 'yes' when asked whether they have shared and/or discussed the resource with others. The remaining 18% of respondents (6/33) indicated they had not shared and/or discussed the resource with others.

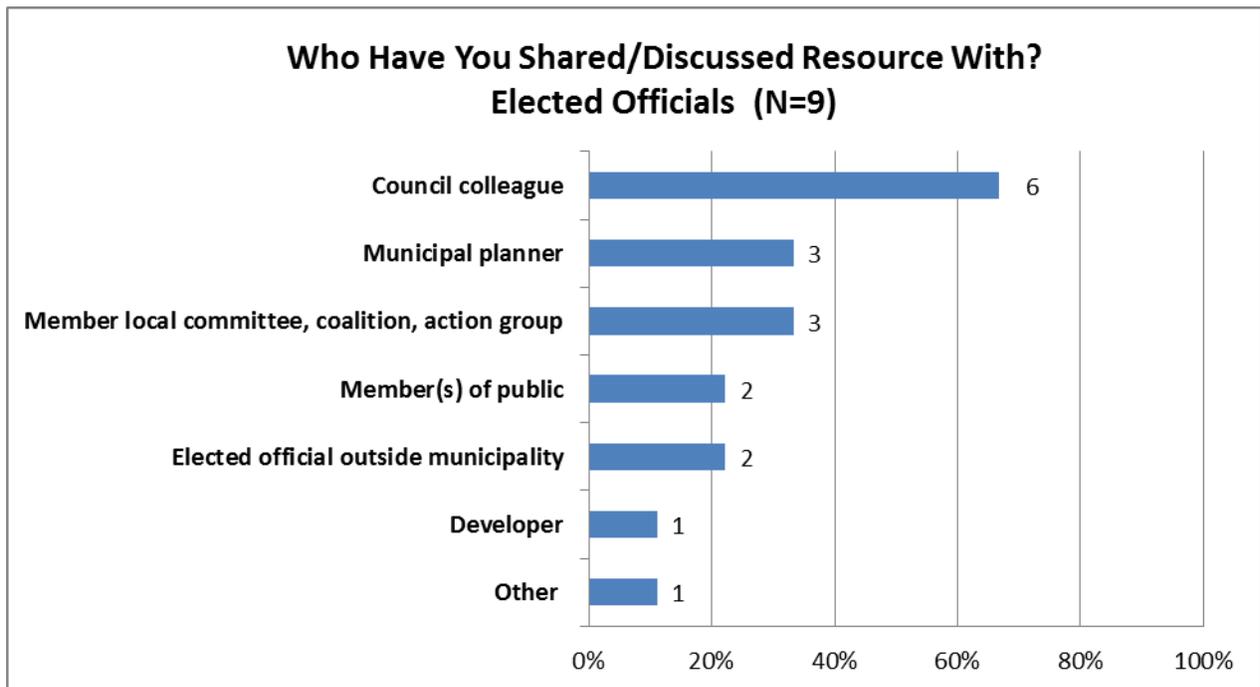
Question 9: Who have you shared or discussed the resource with? (Check all that apply)

This question was only asked of those who said 'yes' to question 8 ("Have you shared/discussed the resource with others?").

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, six of the nine respondents (67%) indicated they had shared or discussed the resource with council colleagues. Three had shared the resource with a planner and three with a local committee, coalition or action group. The respondent who chose 'other' explained they have referred to it in Planning Committee. Respondents were asked to select all that apply. For full results, see Figure 5.

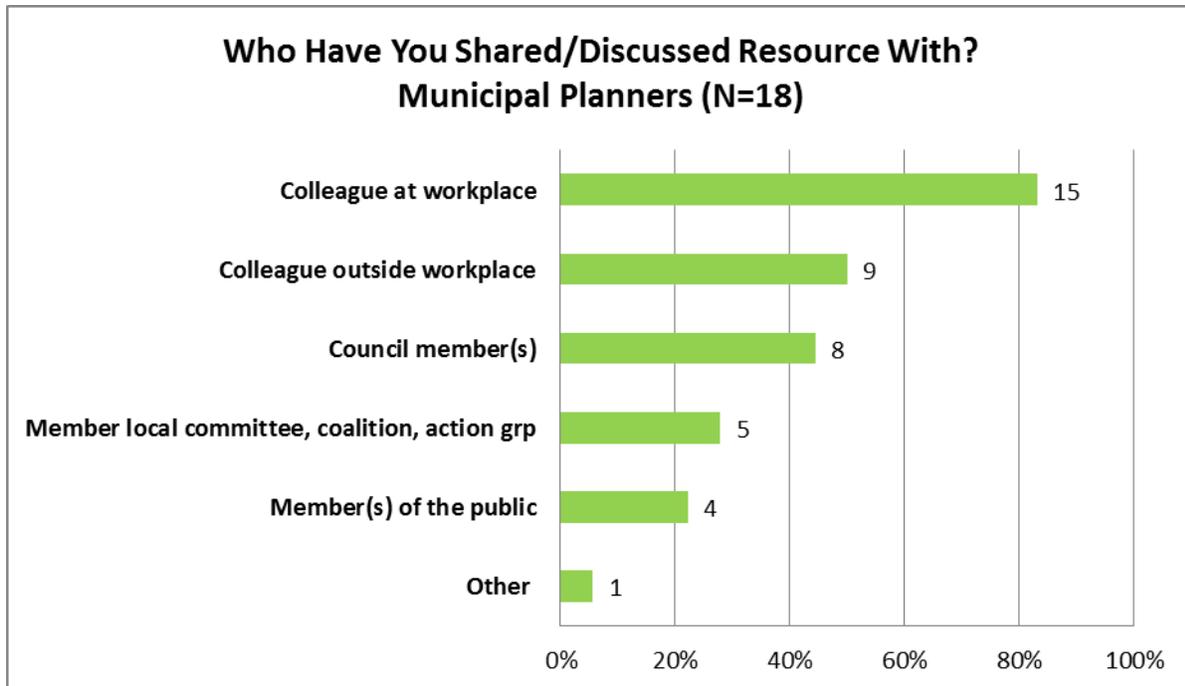
Figure 5: Who Elected Officials Have Shared/Discussed Resource With



MUNICIPAL PLANNERS SURVEY

In the survey of municipal planners, 15 of 18 respondents (83%) indicated they had shared or discussed the resource with a colleague at their workplace. Nine (50%) shared it with a colleague outside the workplace. The respondent who chose 'other' said they had discussed it with students. Respondents were asked to select all that apply. See Figure 6 for full results.

Figure 6: Who Municipal Planners Have Shared/Discussed Resource With



Question 10: Has this resource introduced you to any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, 11 responded to this question, five of whom (46%) said 'yes' they were introduced to new concepts through the resource, and another five (46%) who said 'no'; one person was not sure.

MUNICIPAL PLANNERS SURVEY

In the survey of municipal planners, nine of 22 respondents (41%) said 'no' they hadn't been introduced to any new concepts through the resource; eight (36%) said 'yes' they had and another five (23%) were 'not sure'.

When looking at the survey data from elected officials and municipal planners combined, 39% (13/33) of respondents said they had been introduced to new concepts or elements through this resource.

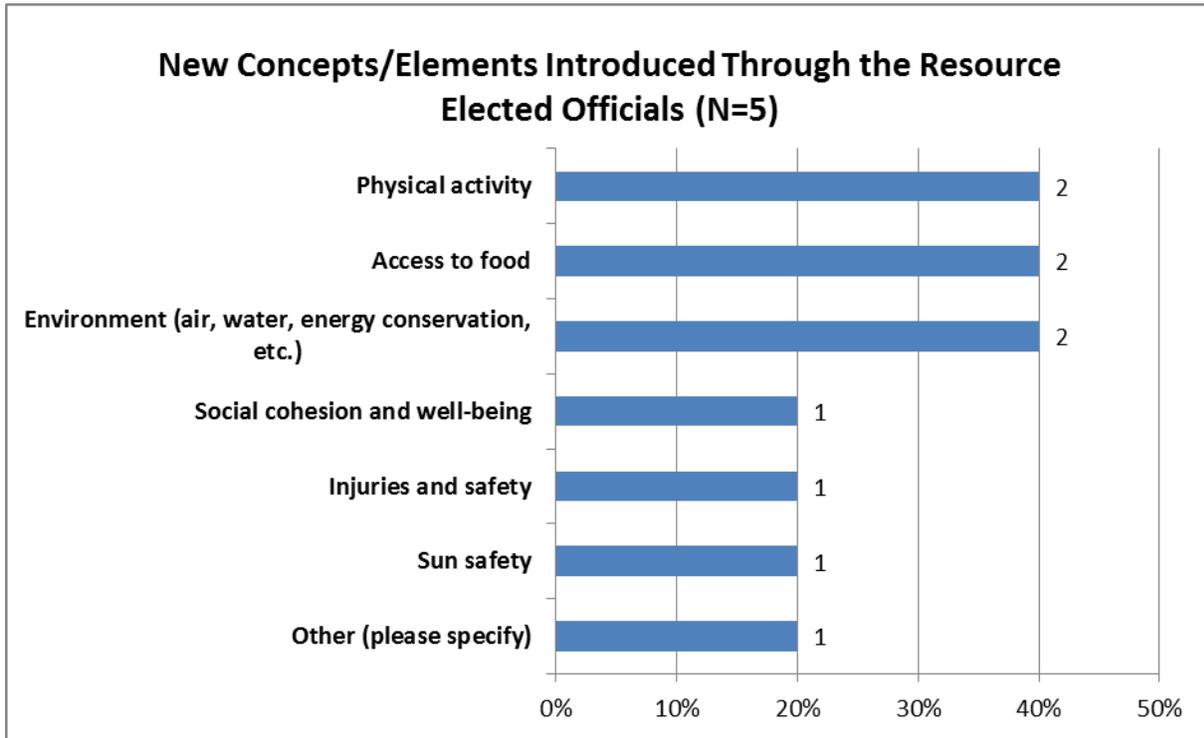
Question 11: What were those new concepts or elements? (Check all that apply)

This question was only asked of those who said 'yes' to question 10, "Has this resource introduced you to any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?"

MUNICIPAL ELECTED OFFICIALS SURVEY

The top three concepts or elements newly introduced to responding elected officials by the resource were physical activity (2 of 5 or 40%), access to food (2 of 5 or 40%), and environment (2 of 5 or 40%). The remaining concepts were selected by one respondent each. The elected official who chose 'other' responded that no single concept was introduced however it brought many concepts or elements together for them. See Figure 7.

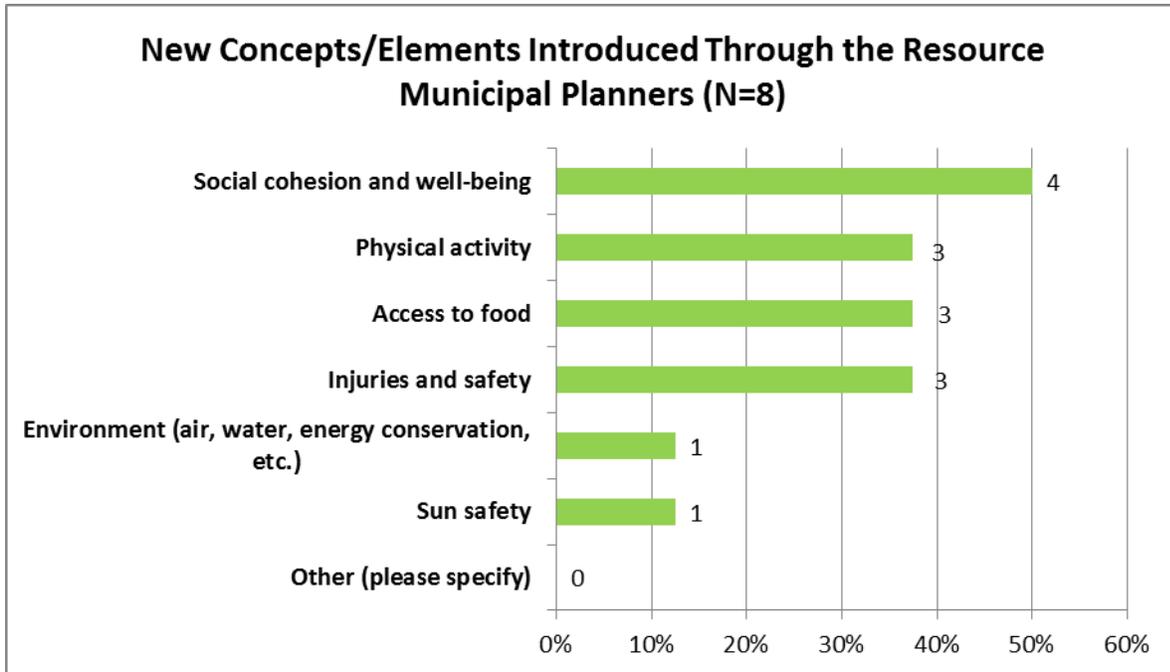
Figure 7: New Concepts/Elements Introduced Through the Resource- Elected Officials



MUNICIPAL PLANNERS SURVEY

Social cohesion and well-being ranked highest among the topics newly introduced to municipal planners by the resource (4 of 8 or 50%). This was followed by physical activity, access to food, and injuries and safety at 38% each (3 of 8). Environment and sun safety were selected by one respondent each. See Figure 8.

Figure 8: New Concepts/Elements Introduced Through the Resource – Municipal Planners



Question 12: The resource, Healthy Community Design: Policy Statements for Official Plans includes many planning policies that address the following health topics: environment, injury and safety, physical activity and sun safety, food access, and social cohesion and well-being. To your knowledge, have any of the planning policies (or concepts contained in the planning policies) from the resource been incorporated into municipal planning decisions or documents in your municipality?

MUNICIPAL ELECTED OFFICIALS SURVEY

The majority of elected officials who responded (6 of 11 or 55%) indicated that 'yes', planning policies from the resource had been incorporated into municipal planning decisions or documents in their municipality.

MUNICIPAL PLANNERS SURVEY

The majority of municipal planners who responded (8 of 11 or 73%) indicated that 'yes', planning policies from the resource had been incorporated into municipal planning decisions or documents in their municipality.

When elected official and municipal planner surveys were combined, 14 of 22 (64%) respondents said 'yes', planning policies from the resource had been incorporated into municipal planning decisions or documents in their municipality.

Question 13: Please indicate which municipal plans/documents these planning policies have been included in and what health topic they address. (Check all that apply)

Only those who answered 'yes' to the previous question (Question 12) were asked this question. This included six elected officials and six municipal planners.

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, the Strategic Plan was listed as the main document where planning policies from the resource were included, closely followed by the Official Plan, Transportation Master Plan and Environmental/Sustainability Plans.

Overall, the health topic most identified as included within these documents was the Environment (23 counts overall across all document types). This was followed by the topics of Physical Activity and Sun Safety, and Social Cohesion and Well-being (18 counts each) and Injury and Safety (17 counts). The health topic identified the least often, although still identified within each type of document, was Food Access (nine counts across all document types). See Table 1.

Table 1: Municipal Plans/Documents that Include Planning Policies and Health Topics they Address – Elected Officials (n=6)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	4	2	3	1	4	14
Secondary Plans	2	1	1	2	1	7
Strategic Plan	4	2	5	1	4	16
Transportation Master Plan	4	3	3	1	3	14
Recreation and/or Heritage Master Plan	2	3	3	1	2	11
Environmental and/or Sustainability Plan	4	3	2	2	3	14
Zoning By-law	3	3	1	1	1	9
TOTAL	23	17	18	9	18	85

MUNICIPAL PLANNERS SURVEY

In the survey of municipal planners, the Official Plan was listed as the main document where planning policies from the resource were included. Overall in the municipal planner survey, the health topic most identified as included within these documents was the Environment, tied with Social Cohesion and Well-being (15 counts each across document types). This was followed by Physical Activity and Sun Safety (13 counts) and Injury and Safety (12 counts). The health topic identified the least often was Food Access (four counts in total). Two respondents chose the 'other' category. Other plans/documents where planning policies from the resource were also identified include the following: specific park and site plan designs; an urban design manual; a 2008 Active Transportation Plan; and an Advisory Committee to Council that has included access to healthy food as a main objective. See Table 2.

Table 2: Municipal Plans/Documents that Include Planning Policies and Health Topics they Address – Municipal Planners (n=6)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	5	3	5	1	4	18
Secondary Plans	1	1	0	0	2	4
Strategic Plan	2	1	1	1	2	7
Transportation Master Plan	3	4	4	0	1	12
Recreation and/or Heritage Master Plan	0	1	2	0	2	5
Environmental and/or Sustainability Plan	1	0	0	2	1	4
Zoning By-law	3	2	1	0	3	9
TOTAL	15	12	13	4	15	59

An additional follow-up question asked only in the municipal planner survey was the following:

Question 13 b: If you haven't done so already, do you intend to include any of the planning policies in the resource in your Official Plan and/or other municipal plans/documents?

Eleven of 16 municipal planners (69%) said 'yes' and five said 'not sure' (31%). No respondents said 'no'.

Question 14: To your knowledge, have any of the implementation activities in the resource been used in the implementation of your municipality's Official Plan and/or other plans or documents?

MUNICIPAL ELECTED OFFICIALS SURVEY

In the elected official survey, five of 11 (45%) of respondents said 'yes' some of the implementation activities in the resource had been used in the implementation of their municipality's Official Plan and/or other plans or documents. Only one respondent (9%) said 'no' and another five (45%) were not sure.

MUNICIPAL PLANNERS SURVEY

In the municipal planner survey, six of 22 (27%) of respondents said 'yes' some of the implementation activities in the resource had been used in the implementation of their municipality's Official Plan and/or other plans or documents. Seven respondents (32%) said 'no' and another nine (41%) were not sure.

Question 15: Please indicate which municipal plans/documents these implementation activities support and what health topic they address. (Check all that apply).

Only those who answered ‘yes’ to the previous question (Question 14: “To your knowledge, have the implementation activities been used?”) were asked this question. Five elected officials and six municipal planners were therefore asked this question.

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, the type of document identified as containing the most implementation activities from the resource were Environmental and/or Sustainability Plans, followed closely by Official Plans. Physical Activity and Sun Safety was the health topic identified most frequently (16 counts overall). Secondary Plans were only identified as containing implementation activities by one person. See Table 3.

Table 3: Documents Supported by Implementation Activities & Health Topics Addressed – Elected Officials (n=5)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	3	2	4	1	3	13
Secondary Plans	0	0	1	0	0	1
Strategic Plan	2	0	1	0	3	6
Transportation Master Plan	2	1	2	0	1	6
Recreation and/or Heritage Master Plan	2	2	4	0	3	11
Environmental and/or Sustainability Plan	3	2	3	3	3	14
Zoning By-law	1	1	1	1	0	4
TOTAL	13	8	16	5	13	55

MUNICIPAL PLANNERS SURVEY

In the survey of municipal planners, the type of document identified as containing the most implementation activities from the resource were Official Plans, followed by Transportation Master Plans. Social Cohesion and Well-being was the health topic identified most frequently (10 counts overall). Food Access was only identified once by one person and this was within Official Plan. Three respondents also selected the 'other' category: site plans for parks was identified as well as Active Transportation Plan, Wayfinding Plan, and Committees (Environmental, Advisory) where implementation activities are acted on. See Table 4.

Table 4: Documents Supported by Implementation Activities & Health Topics Addressed – Municipal Planners (n=6)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	2	1	1	1	3	8
Secondary Plans	1	1	1	0	2	5
Strategic Plan	1	1	1	0	1	4
Transportation Master Plan	0	1	3	0	1	5
Recreation and/or Heritage Master Plan	0	0	1	0	1	2
Environmental and/or Sustainability Plan	1	0	1	0	1	3
Zoning By-law	1	1	1	0	1	4
TOTAL	6	5	9	1	10	31

An additional follow-up question asked only in the municipal planner survey was the following:

Question 15b: If you haven't done so already, do you intend to include any of the implementation activities included in the resource as you implement your Official Plan and/or other municipal plans/documents?

The response to this was evenly split, with eight (50%) responding 'yes' and another eight (50%) responding 'not sure'. No one responded 'no'.

A final question was asked in this section, again only in the municipal planner survey:

Question 15c: Has this resource helped (or will help) you to meet the requirements of the provincial planning policies (e.g. Places to Grow, Provincial Policy Statement, etc.?)

Twenty of 22 or 91% said 'yes' this resource had or will help them meet the requirements of provincial planning policies. Two people (9%) were 'not sure' and no one (0%) responded 'no'.

SECTION C: Satisfaction of Resource

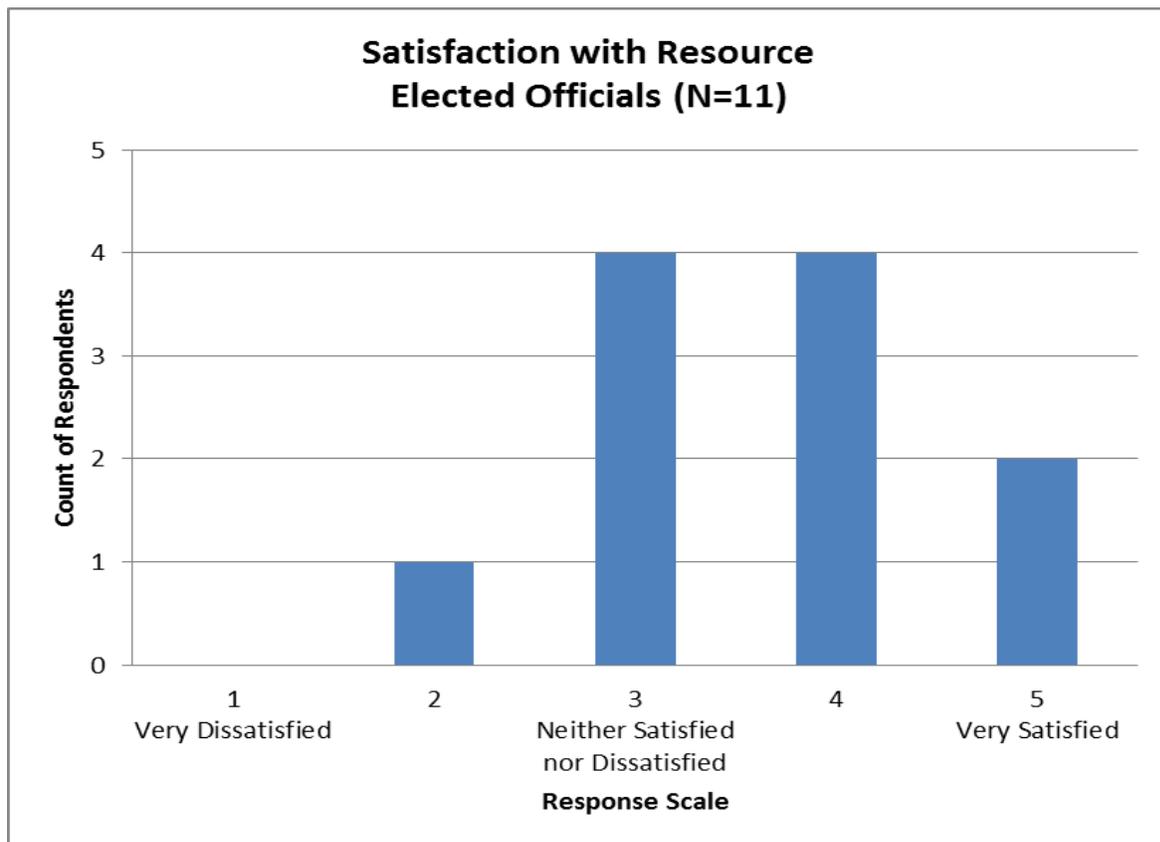
Question16. Overall, on a scale of 1 to 5 (with 1 being very dissatisfied and 5 being very satisfied), how satisfied are you with this resource?

Respondents were asked to rate on a scale from 1 to 5 how satisfied they were with the resource, with 1 being 'very dissatisfied' and 5 being 'very satisfied'.

MUNICIPAL ELECTED OFFICIALS SURVEY

In the survey of elected officials, the average rating was 3.6 out of 5. Six of 11 elected officials (55%) were satisfied or very satisfied with the resource (i.e. they gave a score of four or five), four were neither satisfied nor dissatisfied. Only one respondent gave a score of two indicating they were dissatisfied and no elected official reported being very dissatisfied. See Figure 9.

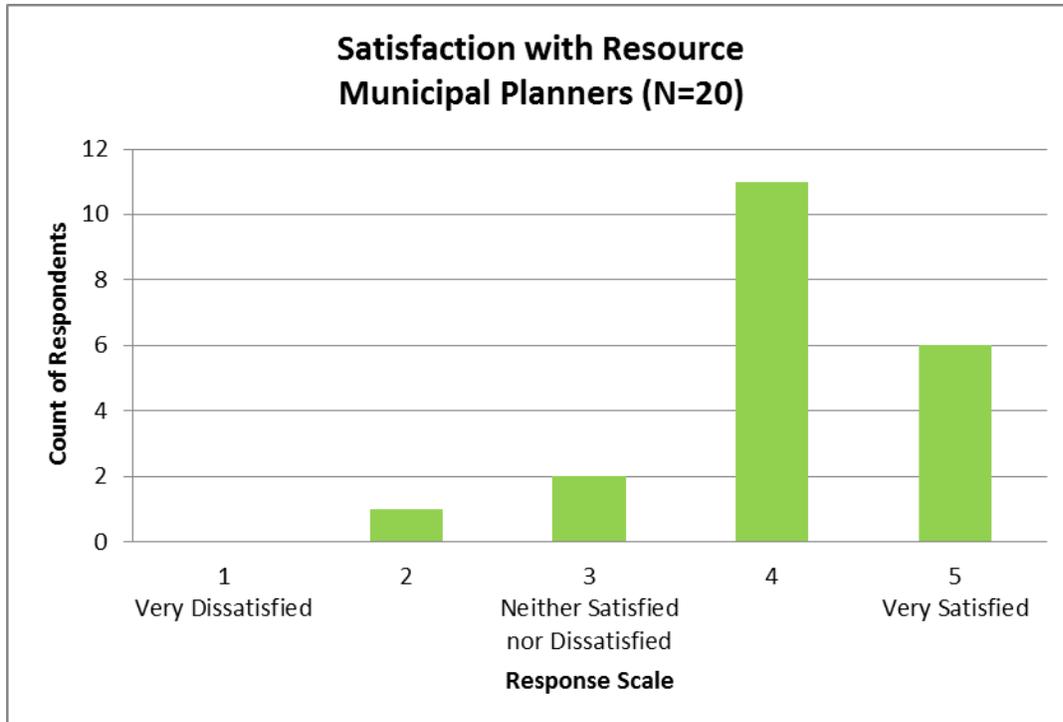
Figure 9: Elected Officials Satisfaction with Resource



MUNICIPAL PLANNERS SURVEY

There was an average rating of 4.1 out of 5 in the municipal planner survey. Seventeen out of 20 (85%) municipal planners were either satisfied or very satisfied with the resource, two (10%) were neither satisfied nor dissatisfied and one (5%) was dissatisfied. No municipal planners reported being very dissatisfied. Two 'not applicable' responses were removed prior to calculating the average. See Figure 10.

Figure 10: Municipal Planners Satisfaction with Resource



Question 17: Do you have any suggestions for how to improve this resource so that it is more useful for you?

MUNICIPAL ELECTED OFFICIAL SURVEY

Five people from the elected official survey completed this section.

Comments from the elected official survey for how to improve this resource so that it is more useful for them included the following suggestions (in no particular order):

- Keep promoting it
- Health unit should come and advocate for the ideas on an ongoing basis to council and to planning committee, speaking to specific ideas rather than a general presentation

- Advise of communities that are using it
- Use more direct communication
- State the facts and work more directly with these facts
- Keep goals realistic for most communities
- Need better understanding of the process first
- Bureaucracy makes implementation difficult

See [Appendix 7](#) for full comments.

MUNICIPAL PLANNER SURVEY

Seven people from the municipal planner survey responded to this section.

Comments from the municipal planner survey for how to improve this resource included the following suggestions (in no particular order):

- Keep updating and revising it
- Have health unit staff present it to all Councils
- Include actual examples from Official Plans
- Recognition of potential partnerships, especially on implementation
- More of connection with how the resource melds with Planning Documents to place emphasis on the importance of Planning and the effect it has on health
- Use as an educational piece for residents/staff/politicians who are not aware of some of the policy matters
- The value is in the implementation of a lot of these recommendations - in many cases Official Plan policy is not required to effect action on matters such as establishing community gardens, creating public transit opportunities, rain barrel workshops, active and safe transportation to schools for children, etc.

See [Appendix 8](#) for full comments.

Question 18: What other resources/tools/information would be helpful to you in your work as an elected official to create healthy communities?

MUNICIPAL ELECTED OFFICIAL SURVEY

Four people in the elected official survey completed this section.

Comments from the elected officials' survey about what other health-related resources/tools/information would be helpful to them in their work included the following suggestions (in no particular order):

- Residents input
- Resource for community gardens
- Easier access to zoning rules, and environmental rules such as MNR
- Back-up statistics concerning implementation
- Link between resources spent and benefits to be realized
- Provide links to funding or partnerships to aid implementation

See [Appendix 9](#) for full comments.

MUNICIPAL PLANNERS SURVEY

Six people in the municipal planner survey completed this section.

Comments from the municipal planner survey about what other health-related resources/tools/information would be helpful to them in their work included the following suggestions (in no particular order):

- Design manuals
- Planning documents such as MOE guidelines, source water protection, healthy communities studies from across the continent
- Additional educational opportunities for Councils, where policy directions begin
- On-going support for initiatives such as community gardens, local food research, etc.
- Stronger legislation to support initiatives
- Presentations to municipal committees/council

See [Appendix 10](#) for full comments.

Question 19: Please provide any final comments below.

MUNICIPAL ELECTED OFFICIALS SURVEY

Two people provided final comments in the elected official survey. One comment noted that good ideas have been included in the resource and perhaps it could be summarized into a shorter version with less repetition. The other comment suggested that a task force or similar structure needs to be formed with a visionary leader who can engage and motivate people in

order to implement new ideas. Further it needs to be shown how these new ideas can be implemented and still be within a viable budget or else how money can be saved in future through implementation of these initiatives. See [Appendix 11](#) for full comments.

MUNICIPAL PLANNERS SURVEY

Six people provided final comments in the municipal planner survey. Five of the six comments noted that this is a good resource. There was one suggestion that the resource might be better used as an implementation document, rather than one to create policy. See [Appendix 12](#) for full comments.

Question 20: Now that you are aware of this resource, is it likely you will look into it further?

Only respondents that answered 'no' or 'not sure' to question 1, indicating that they were not aware (or were unsure if they were aware) of the resource, were asked this question due to skip-logic within the survey.

Of the respondents to this question (17 elected officials and one municipal planner) most answered 'yes' they will likely look into the resource further (13 of 17 or 77% of elected officials, 1 of 1 or 100% of municipal planners). One elected official selected 'no' they will not likely look into the resource further, and the remaining three elected officials weren't sure.

Questions 21 & 22: (Demographic questions addressed at top of results section).

Questions 23-24: Review of current Official Plan

MUNICIPAL ELECTED OFFICIALS SURVEY

When asked when their municipality's existing Official Plan is scheduled to be reviewed, 16 of 27 (59%) of elected officials indicated that it was currently under review and/or being updated and 11 (41%) said it was due to be reviewed in the next five years.

MUNICIPAL PLANNERS SURVEY

When asked when their municipality's existing Official Plan is scheduled to be reviewed, 17 of 23 (74%) of municipal planners indicated that it is currently under review and/or being updated and six (26%) said it was due to be reviewed in the next five years.

MUNICIPAL ELECTED OFFICIALS SURVEY

Sixteen of 27 elected officials (59%) said their municipality's existing Official Plan was currently under review and/or being updated. Eleven (41%) said it was due to be reviewed in the next five years.

Of the 11 elected official respondents whose existing Official Plan was due to be reviewed in the next five years, four indicated their municipality's Official Plan is due to be reviewed in the next year or two; three respondents indicated three years, three respondents indicated their municipality's Official Plan is due to be reviewed in the next four or five years (and one respondent skipped the question).

MUNICIPAL PLANNERS SURVEY

Seventeen of 23 municipal planners (74%) said their municipality's existing Official Plan was currently under review and/or being updated. Six (26%) said it was due to be reviewed in the next five years.

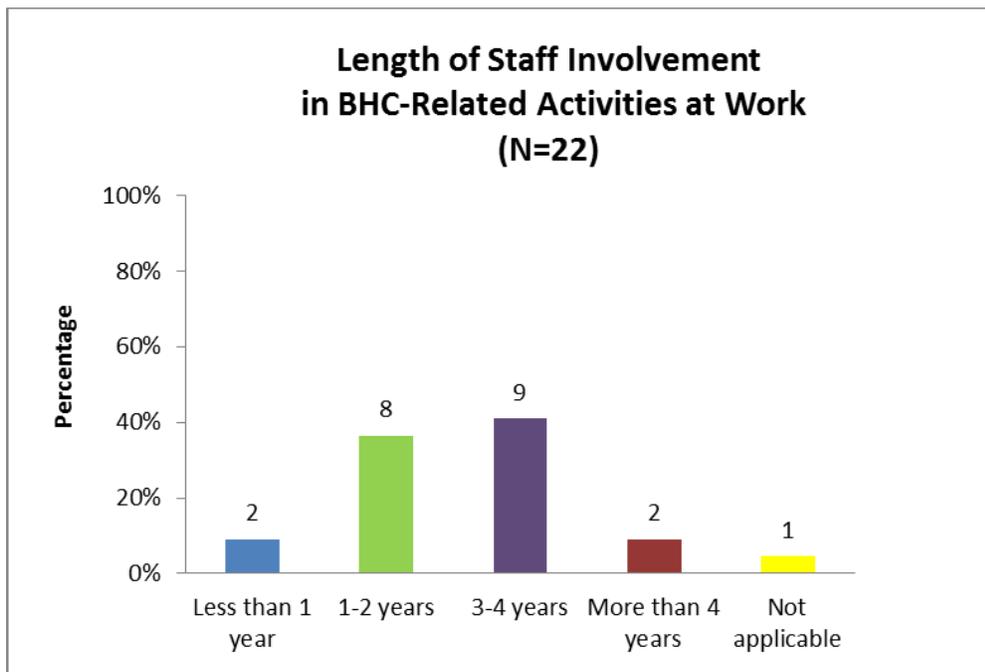
Of those six, four indicated it is due to be reviewed in the next year or two, and two respondents indicated their municipality's Official Plan is due to be reviewed in the next four or five years.

SMDHU STAFF & BOARD OF HEALTH

SMDHU STAFF SURVEY

A total of 22 individuals out of a possible 38 responded to the questionnaire, which is a 58% response rate. Among these 22, 16 (73%) were from Healthy Living Service area, five (23%) were from Health Protection Service area and one person (4%) was from Family Health Service area. No other service areas were represented. When asked how long they had been involved in Building Healthy Communities (BHC) related activities as part of their work, most respondents (nine or 41%) said between three to four years, followed by 36% who said from one to two years. See Figure 11.

Figure 11: Length of Staff Involvement in BHC-Related Activities at Work



BOARD OF HEALTH SURVEY

A total of six individuals out of a possible 13 responded to the Board of Health (BOH) questionnaire, a 46% response rate. Among the six, half (50%) had been a member of the BOH for less than one year, followed by two people (33%) who had been members between three to four years. One person had been a member of the BOH for more than four years.

SECTION A: Familiarity of Resource

Question 1: Are you familiar with the resource, Healthy Community Design: Policy Statements for Official Plans?

SMDHU STAFF SURVEY

In the staff survey, 21 of 22 respondents (96%) said 'Yes' they were familiar with the resource. Nobody said 'No'; one person responded 'Not sure' and so was skipped to the end to provide their demographic information.

BOARD OF HEALTH SURVEY

In the BOH survey all but one respondent were familiar with the resource with five of the six (83%) responding 'Yes'. The one who said 'No' was then skipped to the end of the survey to provide some demographic information but otherwise was not part of the survey results.

Question 2: On a scale of 1 to 5 (with 1 being not at all familiar and 5 being very familiar), how familiar are you with the resource?

Respondents were asked to rate on a scale from 1 to 5 how familiar they were with the resource, with 1 being 'not at all familiar' and 5 being 'very familiar'.

SMDHU STAFF SURVEY

In the staff survey, the average rating was 4.4 out of 5. Nineteen out of 21 respondents (90%) gave a rating of either four or five, where five was 'very familiar'. Broken down, 13 of 21 (62%) gave a rating of five or 'very familiar' and six (29%) gave a rating of four or 'familiar'; two respondents (10%) gave a rating of two (between 'not at all familiar' and 'neither familiar nor unfamiliar').

BOARD OF HEALTH SURVEY

In the BOH survey, the average rating was 4.0 out of 5. All five BOH respondents (100%) selected a rating of four or 'familiar'.

The overall average rating of familiarity with the resource given by both staff and BOH combined (N=26) was 4.2 out of 5 (where 5 = very familiar).

Question 3: Since you were first introduced to this resource, have you received any extra information or training about this resource?

SMDHU STAFF SURVEY

Eleven (52%) staff responded they had received extra information or training about the resource, nine (43%) said they had not; one person was not sure.

BOARD OF HEALTH SURVEY

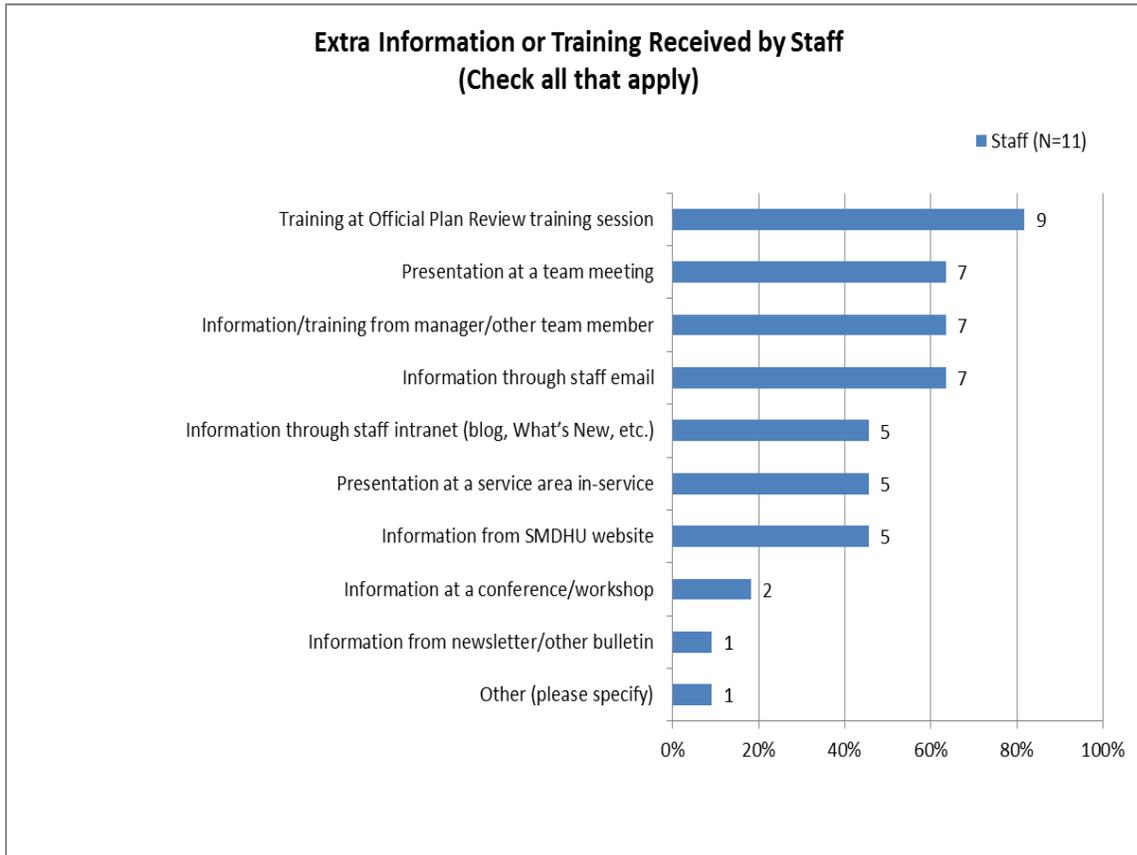
All five (100%) BOH respondents indicated they did not receive any extra information or training about the resource.

Question 4: What was the extra information or training you received? (Check all that apply)

SMDHU STAFF SURVEY

Among those in the staff survey who answered they had received extra information or training in the previous question (n=11), nine (82%) said they received extra training at the Official Plan Review training session offered. Seven respondents (64%) each said they had received extra information or training through a presentation at a team meeting, from their manager or another team member and through staff email. The respondent who selected the 'Other' response said they were involved in its development. Totals are greater than 100% as respondents were asked to select all that apply. Full responses are shown in Figure 12.

Figure 12: Extra Information or Training Received by Staff



BOARD OF HEALTH SURVEY

All five BOH respondents indicated they had not received any extra information or training since first being introduced to the resource, so this question was not applicable.

Question 5: Has this resource introduced any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?

SMDHU STAFF SURVEY

In the staff survey, 71% (15 people) said 'yes' this resource had introduced new concepts or elements of the built environment/land use planning that impact on health that they weren't familiar with before, 19% (4 people) said 'no' and 10% (2 people) were 'not sure'.

BOARD OF HEALTH SURVEY

In the BOH survey, 40% (2 people) said 'yes' this resource had introduced new concepts to them and 60% (3 people) said 'no' it had not.

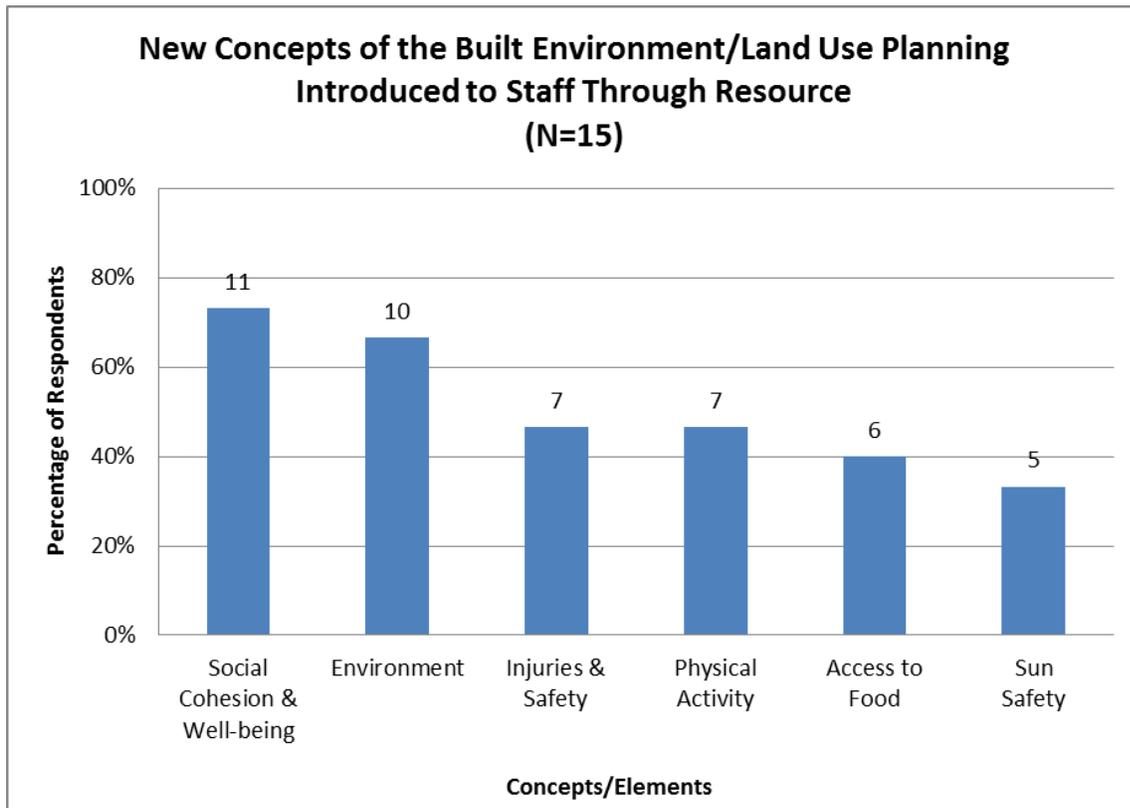
Question 6: What were these concepts or elements? (Check all that apply)

The respondents who answered yes to Question 5 were asked this question, including 15 staff and two BOH respondents; however, as they could check all that apply, the number of responses given was higher.

SMDHU STAFF SURVEY

The main response given by staff for what new concepts or elements had been introduced to them through the resource was Social Cohesion and Well-Being (11 out of 15 respondents or 73%) followed by Environment (10 out of 15 or 67%). The concept selected the least often (by 5 out of 15 staff or 33%) was Sun Safety. Respondents were asked to select all that apply. For full results see Figure 13.

Figure 13: New Concepts of the Built Environment/Land Use Planning Introduced to Staff Through Resource



BOARD OF HEALTH SURVEY

Two Board of Health members responded to this question. Both selected Access to Food as a new concept introduced to them through the resource. Social Cohesion and Well-Being and Injuries and Safety were selected by one respondent each.

Overall, Social Cohesion & Well-being was identified as the main new concept that was introduced by the resource, selected by 12 of 17 (71%) respondents when staff and BOH results were combined.

SECTION B: Use of Resource

Question 7: Have you used the resource as part of your work?

SMDHU STAFF SURVEY

In the staff survey, 17 (81%) said 'yes', they had used the resource as part of their work and four (19%) said 'no' they had not.

BOARD OF HEALTH SURVEY

Two (40%) said 'yes', and three (60%) said 'no' in the BOH survey.

Among staff and BOH combined, 19 out of 26 (73%) of the respondents had used the resource as part of their work as opposed to 7 of 26 (27%) who had not.

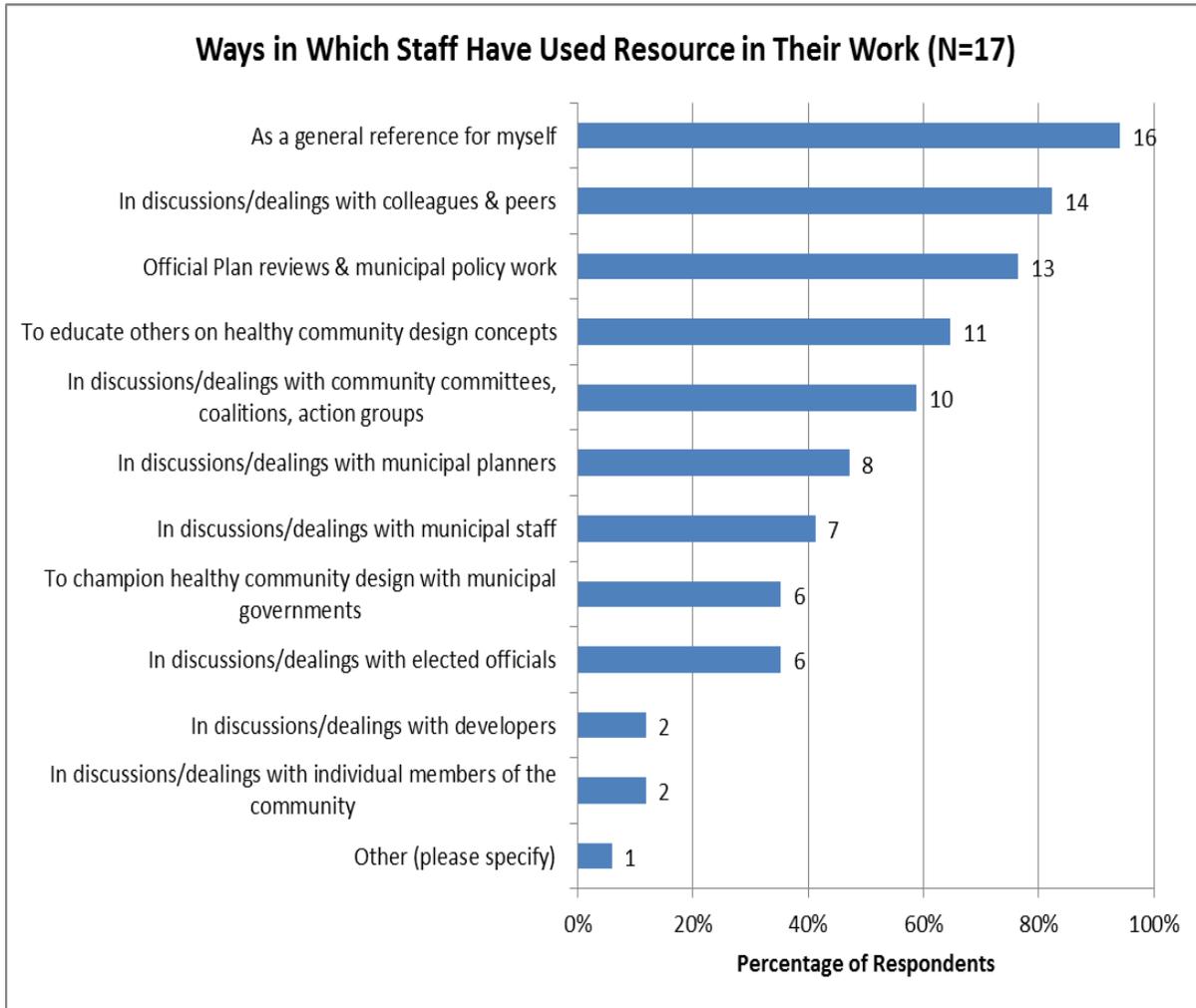
Question 8: In which of the following ways have you used the resource for your work? (Check all that apply)

Question 8 was asked only of those people who responded 'yes' to the previous question, "Have you used the resource as part of your work?"

SMDHU STAFF SURVEY

Staff responded that they have used the resource as part of their work mainly as a general reference for themselves (16 out of 17 or 94%), followed by discussions/dealings with colleagues and peers (14 out of 17 or 82%). Thirteen (77%) indicated they had used it for Official Plan reviews and municipal policy work. Six (35%) had used it to champion healthy community design with municipal governments. The total is greater than 100% as respondents were asked to select all that apply. Full results are shown in Figure 14.

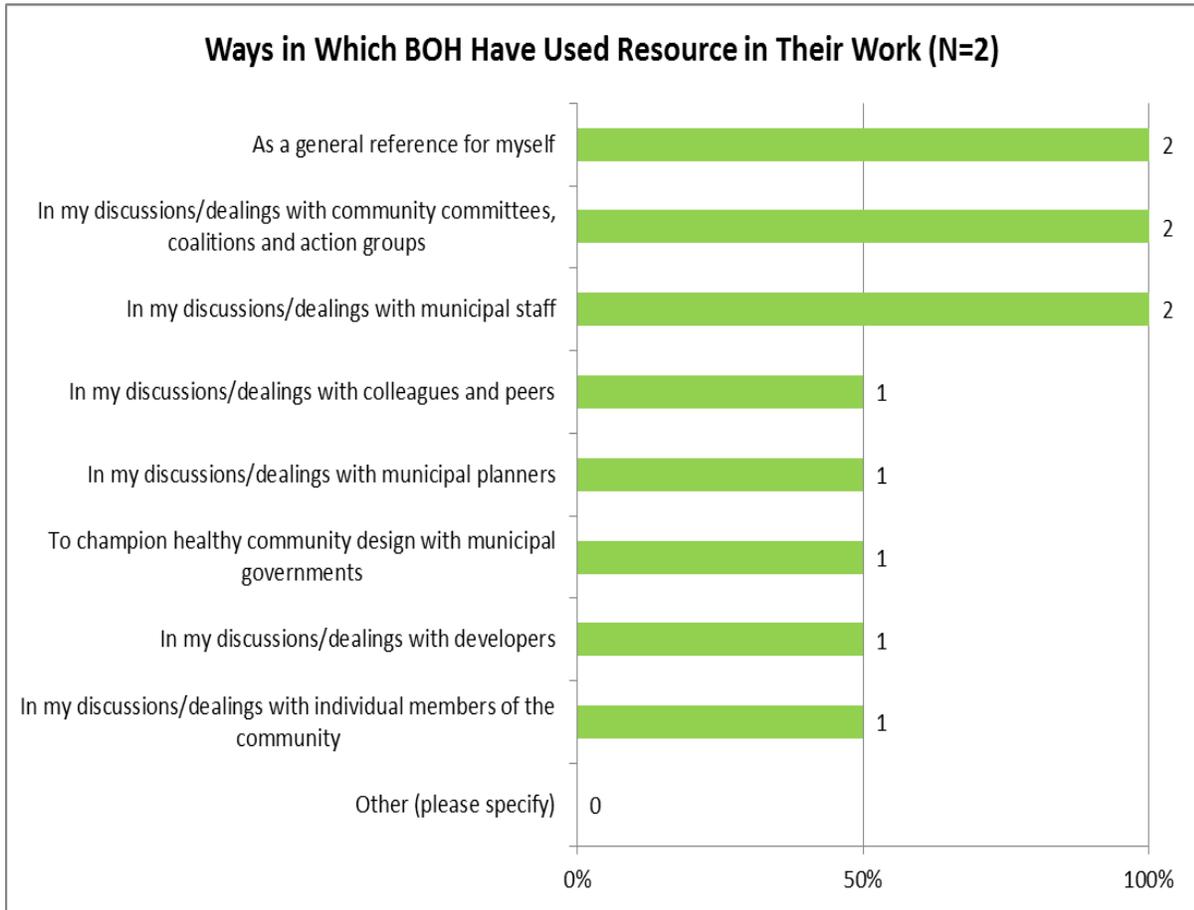
Figure 14: Ways in Which Staff Have Used Resource in Their Work



BOARD OF HEALTH SURVEY

There were two respondents for this question. Each option listed was selected by at least one respondent. Both said that they had used the resource as a general reference for themselves, in discussions with community committees and action groups as well as in discussions with municipal staff. See Figure 15.

Figure 15: Ways in Which BOH Have Used Resource in Their Work



Among staff and BOH combined, the main way the resource had been used was as a general reference for themselves (18 out of 19 respondents or 95%), followed by in discussions/dealings with colleagues and peers (15 out of 19 or 79%). The one staff person who said 'Other' specified that they had used the resource in discussions with provincial agricultural groups.

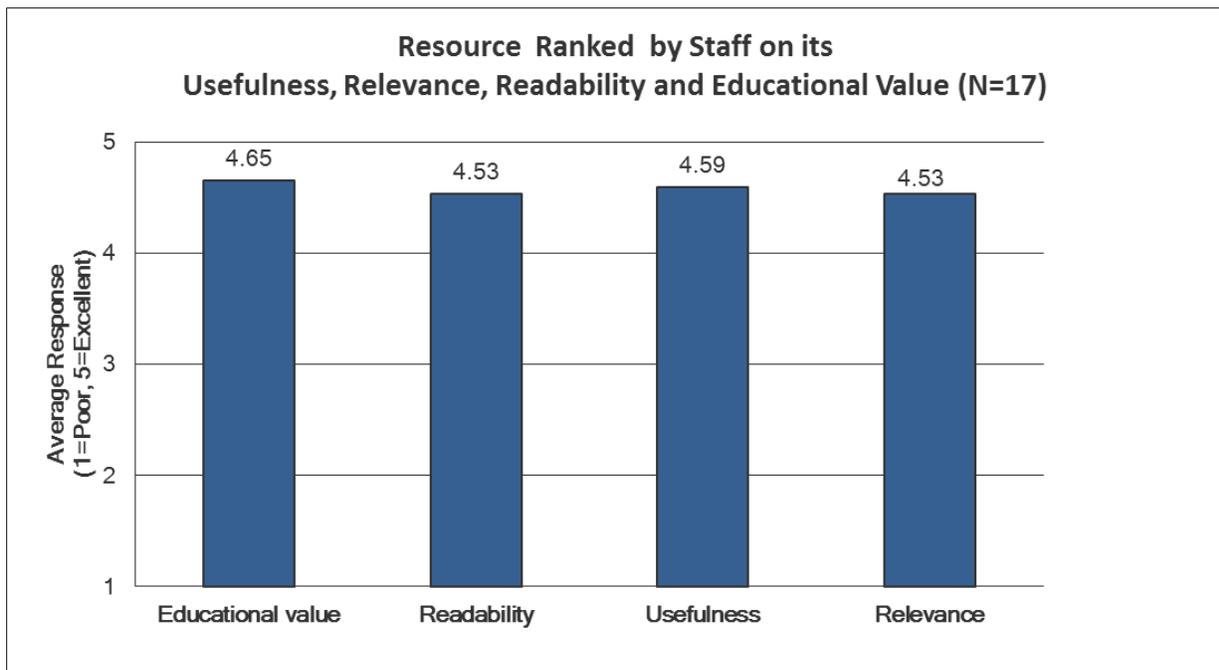
Question 9: On a scale of 1-5 (with 1 being poor and 5 being excellent), please rank the resource on its usefulness, relevance, readability and educational value as it pertains to your work:

Question 9 was asked only of those people who responded 'yes' to question 7, "Have you used the resource as part of your work?"

SMDHU STAFF SURVEY

The average ranking among staff was high. Educational value had the highest overall average response (4.65 out of a possible 5.0), followed by usefulness (4.59), and with readability and relevance with an average score of 4.53. See Figure 16.

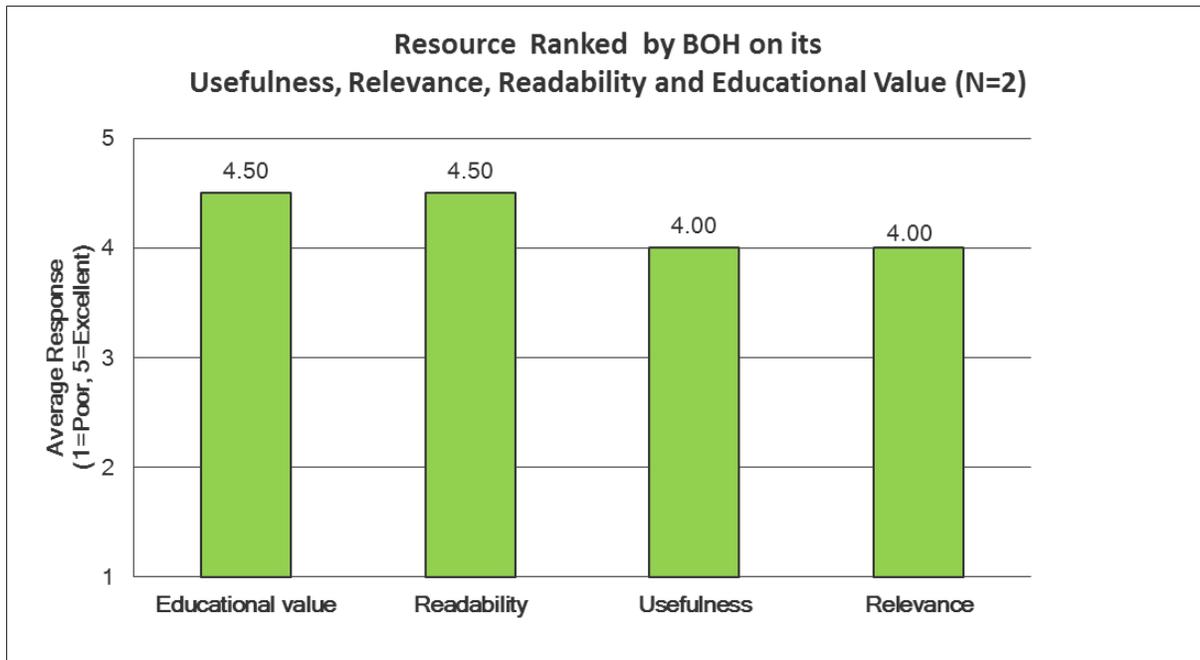
Figure 16: Resource Ranked by Staff on its Usefulness, Relevance, Readability and Educational Value



BOARD OF HEALTH SURVEY

The average score from the two BOH respondents who used the resource was 4.5 for educational value and readability, and 4.0 for usefulness and relevance. See Figure 17.

Figure 17: Resource Ranked by BOH on its Usefulness, Relevance, Readability and Educational Value



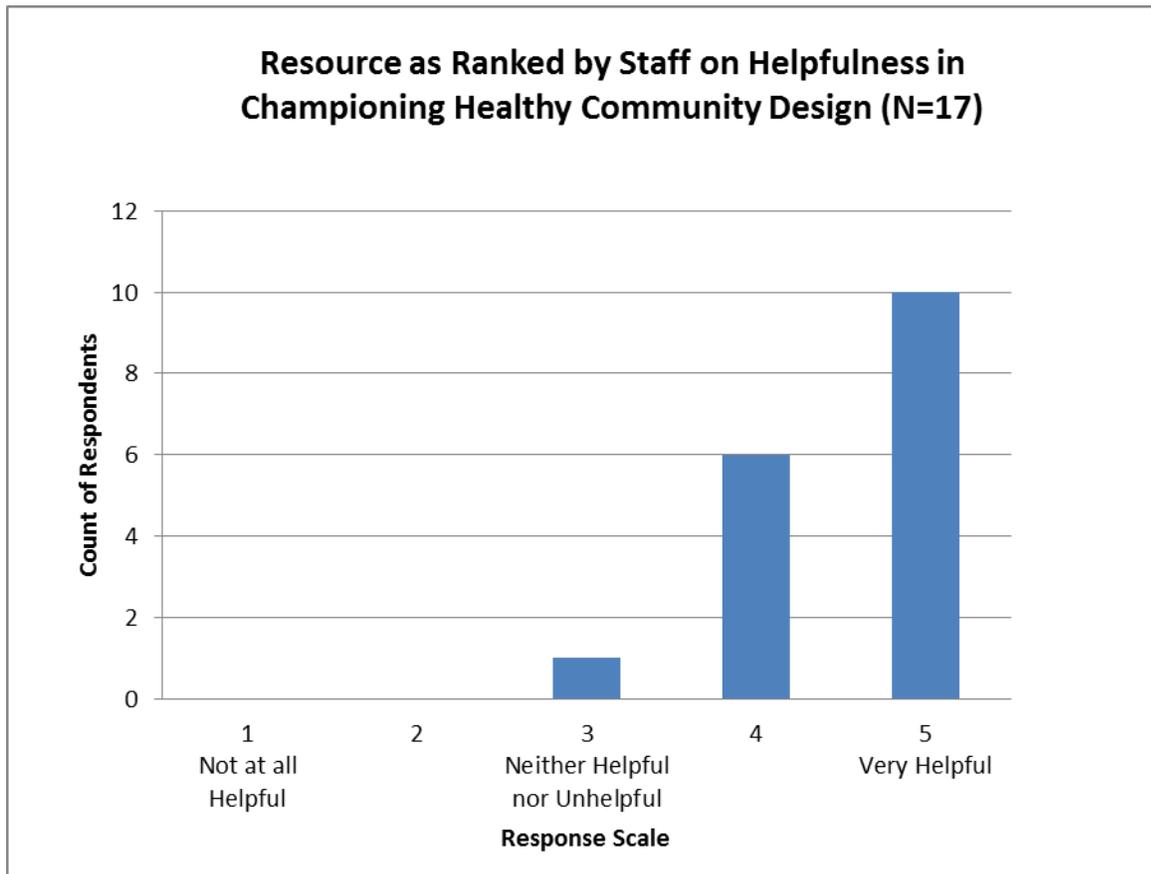
Among staff and BOH combined (N=19), the average score ranged from 4.3 to 4.6, with a score of 5 being excellent.

Question 10: On a scale of 1-5 (with 1 being not at all helpful and 5 being very helpful), please rank how well this resource has helped you in your SMDHU work to champion healthy community design in Simcoe Muskoka.

SMDHU STAFF SURVEY

In the staff survey, the average of all responses was 4.5 out of 5, falling between being helpful and being very helpful. In terms of its helpfulness in championing healthy community design, 16 staff (94%) ranked the resource as either four or five, where a score of five was 'very helpful'. Broken down, 10 staff ranked the resource as five or 'very helpful', six chose a score of four or 'helpful' and one ranked it as three or 'neither helpful nor unhelpful'. See Figure 18.

Figure 18: Resource as Ranked by Staff on Helpfulness in Championing Healthy Community Design



BOARD OF HEALTH SURVEY

In the BOH survey, the average of all responses was 3.8 out of 5. However, an error in skip logic occurred in this survey where all five respondents were asked this question rather than just those who had answered in question 7 that they had used the resource. If we look at only those who had used the resource (n=2) then the average was higher (4 out of 5), indicating that the resource had been helpful.

Among staff and BOH combined (N=19), the average was 4.5 out of 5, where 5 was 'Very Helpful'.

Question 11: To your knowledge, have any of the planning policies (or concepts contained in the planning polices) from the resource been incorporated into municipal planning decisions or documents in a municipality that you have worked with as part of your job?

SMDHU STAFF SURVEY

In the staff survey, nine respondents (43%) said that 'yes', they knew of planning policies from the resource that had been incorporated into municipal planning decisions or documents in a municipality they had worked with as part of their job. Five respondents (24%) said 'no' and seven (33%) said they were 'not sure'.

BOARD OF HEALTH SURVEY

In the BOH survey, three respondents (60%) said that 'yes', they knew of planning policies from the resource that had been incorporated into municipal planning decisions or documents in their municipality. One respondent said 'no and one other said they were 'not sure'.

Among staff and BOH combined, when asked whether they knew of planning policies being incorporated into municipal decisions or documents, 12 out of 26 (46%) said 'yes' and 6 out of 26 (23%) said 'no'. Another 8 (31%) said 'not sure', which was more than those who said 'no'.

Question 12: Please indicate which municipal plans/documents these planning policies have been included in and what health topic they address. (Check all that apply).

Only those who answered 'yes' to the previous question (Question 11) were asked this question. This included nine staff and three BOH respondents.

SMDHU STAFF SURVEY

In the staff survey, the Official Plan was listed as the main document where planning policies from the resource were included, particularly policies that addressed the topic of physical activity and sun safety (6 counts) followed by injury and safety (4 counts), food access (4 counts), social cohesion and well-being (3 counts), and environment (2 counts). Secondary plans was the next document identified as including planning policies from the resource, with the topics of physical activity and sun safety, injury and safety, social cohesion and well-being and environment all being equally identified as included (3 counts each). Overall, in the staff survey, the main health topic identified was physical activity and sun safety followed by injury

and safety. Interestingly, none of the topics were identified as being included in either a Strategic Plan or in an Environmental or Sustainability Plan. See Table 5.

Table 5: Municipal Plans/Documents that Include Planning Policies and Health Topic they Address – Staff (n=9)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	2	4	6	4	3	19
Secondary Plans	3	3	3	1	3	13
Strategic Plan	0	0	0	0	0	0
Transportation Master Plan	0	2	1	0	0	3
Recreation and/or Heritage Master Plan	0	1	1	0	1	3
Environmental and/or Sustainability Plan	0	0	0	0	0	0
Zoning By-law	1	1	1	1	1	5
TOTAL	6	11	12	6	8	43

In the staff survey, there were four comments listed under the ‘other’ category. These included the comment that some municipalities were in the process of revising their plans and including some of these policies. One mentioned that these policies were included in a Unity Plan. One respondent was not sure as they don’t work directly with a municipality.

BOARD OF HEALTH SURVEY

In the BOH survey, the Recreational and/or Heritage Master Plan and the Official Plan were both listed by all three respondents as the main document where planning policies from the resource were included. Recreational/Heritage Master Plans addressed the health topics of the environment, physical activity and sun safety and social cohesion and well-being (3 counts each), followed by injury and safety (2 counts). Official Plans addressed the health topics of the environment and social cohesion and well-being (3 counts each), physical activity and sun safety (2 counts) and injury and safety (1 count). Zoning By-laws, Transportation Master Plans, and Strategic Plans were identified next, all with similar results. Food Access was only identified as included in a Zoning By-law and an Environmental/Sustainability Plan (1 count each). None of the topics were identified as being included in a Secondary Plan. See Table 6.

Table 6: Municipal Plans/Documents that Include Planning Policies and Health Topic they Address – BOH (n=3)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	3	1	2	0	3	9
Secondary Plans	0	0	0	0	0	0
Strategic Plan	2	1	1	0	1	5
Transportation Master Plan	2	1	2	0	1	6
Recreation and/or Heritage Master Plan	3	2	3	0	3	11
Environmental and/or Sustainability Plan	1	1	1	1	1	5
Zoning By-law	2	1	1	1	2	7
TOTAL	13	7	10	2	11	43

In the BOH survey, there were no comments listed under the ‘other’ category. In both staff and BOH surveys combined, the main document identified as including planning policies from the resource was Official Plans. The main health topic addressed in all documents combined was identified as Physical Activity and Sun Safety.

Question 13: To your knowledge, have any of the implementation activities in the resource been used in the implementation of an Official Plan and/or other plans or documents in a municipality that you have worked with?

SMDHU STAFF SURVEY

In the staff survey, four of 21 respondents (19%) said ‘yes’, five said ‘no’ (24%) and 12 were ‘not sure’ (57%).

BOARD OF HEALTH SURVEY

In the BOH survey, zero respondents said ‘yes’ (0%), two of five said ‘no’ (40%) and three were ‘not sure’ (60%).

Among staff and BOH combined, when asked whether they knew of implementation activities from the resource being used in the implementation of municipal plans or documents, 4 out of 26 (15%) said ‘yes’ and 7 out of 26 (27%) said ‘no’. The majority of respondents, 15 out of 26 (58%) said ‘not sure’, indicating that this may be an area where additional information could be provided.

Question 14: Please indicate which municipal plans/documents these implementation activities support and what health topic they address. (Check all that apply).

Only those who answered ‘yes’ to the previous question (Question 13: To your knowledge, have the implementation activities been used) were asked this question. Four staff were therefore asked this question. No BOH members responded ‘yes’ to the previous question and so all were skipped over this question to Question 15.

SMDHU STAFF SURVEY

In the staff survey, the main document supported by implementation activities was Official Plans (3 of the 4 respondents), followed by the Transportation Master Plans (2 respondents) and then Secondary Plans and Recreation or Heritage Master Plans (1 respondent each). Injury and Safety was identified most among all documents combined (6 counts), followed by Physical Activity and Sun Safety (5 counts). No topics were identified as being addressed in the implementation of either a Strategic Plan, an Environmental or Sustainability Plan, nor in a Zoning By-law. See Table 7.

Table 7: Documents Supported by Implementation Activities & Health Topics Addressed – Staff (n=4)

Answer Options	Environment	Injury & Safety	Physical Activity & Sun Safety	Food Access	Social Cohesion & Well-being	TOTAL
Official Plan	1	2	2	1	2	8
Secondary Plans	1	1	1	1	1	5
Strategic Plan	0	0	0	0	0	0
Transportation Master Plan	0	2	1	0	1	4
Recreation and/or Heritage Master Plan	0	1	1	0	0	2
Environmental and/or Sustainability Plan	0	0	0	0	0	0
Zoning By-law	0	0	0	0	0	0
TOTAL	2	6	5	2	4	19

One respondent selected ‘Other (please specify)’ from the list of documents provided, and explained that a Healthy communities committee had been established to address planning issues.

Question 15: Have you shared and/or discussed this resource with others?

SMDHU STAFF SURVEY

In the staff survey, 18 out of 21 respondents (86%) said they had shared and/or discussed this resource with others, with only three respondents (14%) saying they had not.

BOARD OF HEALTH SURVEY

In the BOH survey, four out of five respondents (80%) said they had shared and/or discussed this resource with others, with only one respondent (20%) saying they had not.

Among staff and BOH combined, 22 out of 26 (85%) respondents said 'yes' they had shared/discussed the resource with others, and 4 out of 26 (15%) said 'no', they had not. No respondents selected 'not sure'.

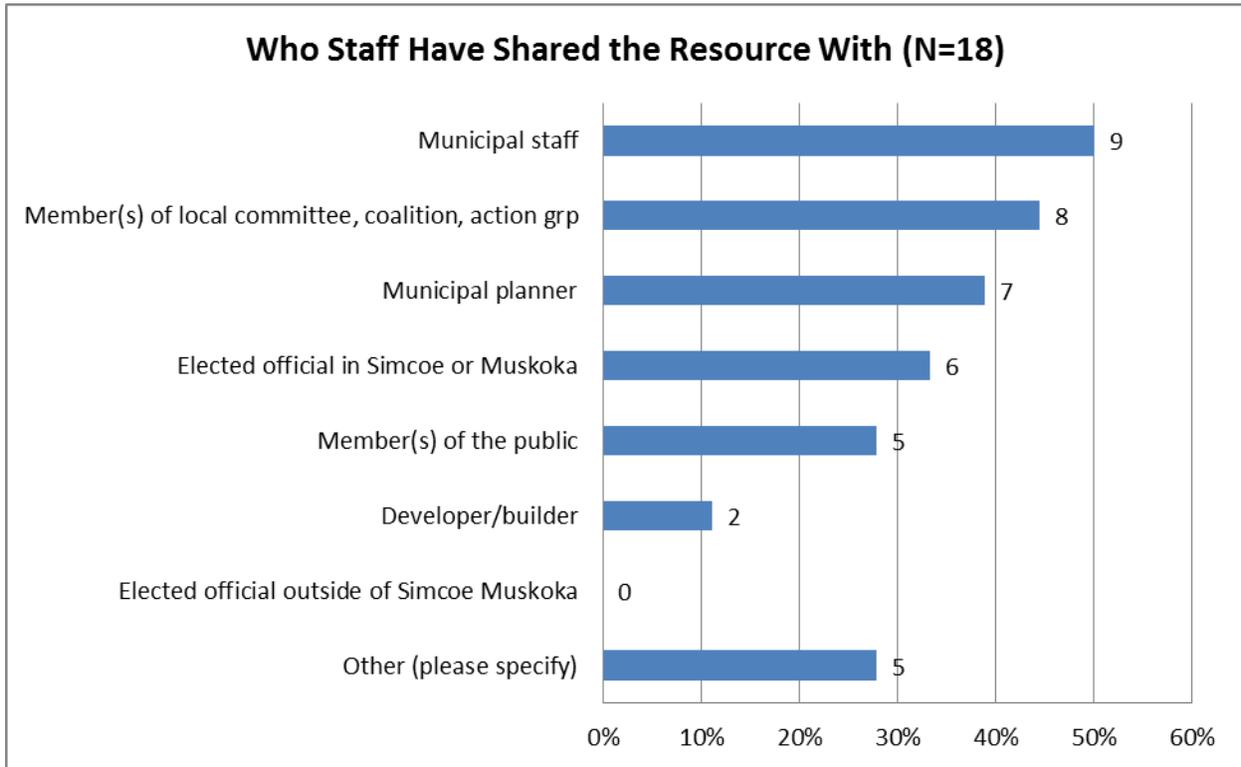
Question 16: Who have you shared this resource with? (Check all that apply)

SMDHU STAFF SURVEY

In the staff survey, this question was answered by the 18 respondents who answered 'yes' to the previous question of whether they had shared the resource with others.

In the staff survey, when respondents were asked with whom they shared the resource, municipal staff had the highest count, followed by members of a local committee, coalition or action group. Five people gave a response under the 'other' category; 'other' responses included sharing the resource with members of a provincial agricultural group, a Director of Planning, a Planning Consulting Firm at an Active Transportation Workshop, and with internal staff members. For full results, see Figure 19.

Figure 19: Who Staff Have Shared the Resource With

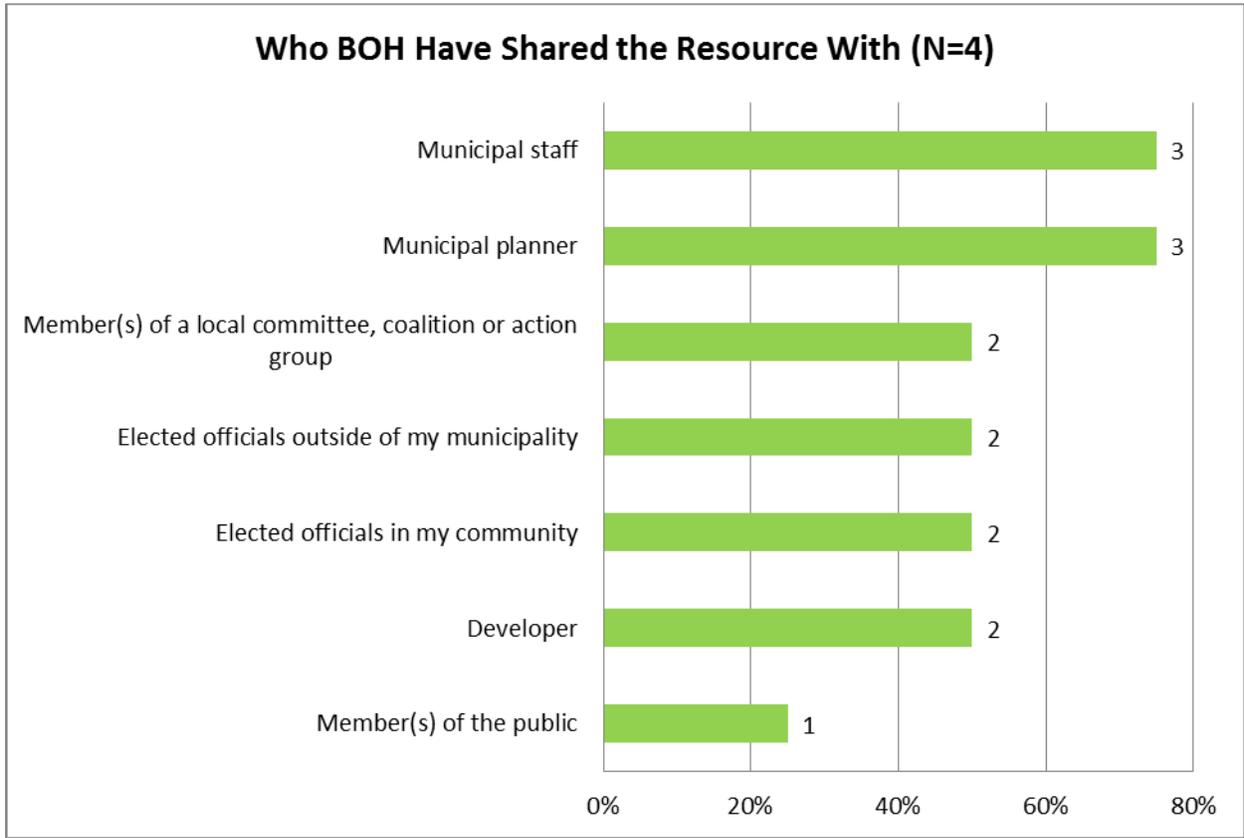


BOARD OF HEALTH SURVEY

In the BOH survey, this question was answered by the four respondents who answered 'yes' to the previous question of whether they had shared the resource with others.

In the BOH survey, when respondents were asked with whom they shared the resource, three of the four said a municipal planner and municipal staff. Two respondents shared the resource with members of a local committee, coalition or action group and two shared it with a developer. The resource was also shared by respondents with elected officials (two within their own community and two shared it outside of their municipality). One respondent shared the resource with the public. No respondents selected the 'other' category. See Figure 20.

Figure 20: Who BOH Have Shared the Resource With



SECTION C: Satisfaction of Resource

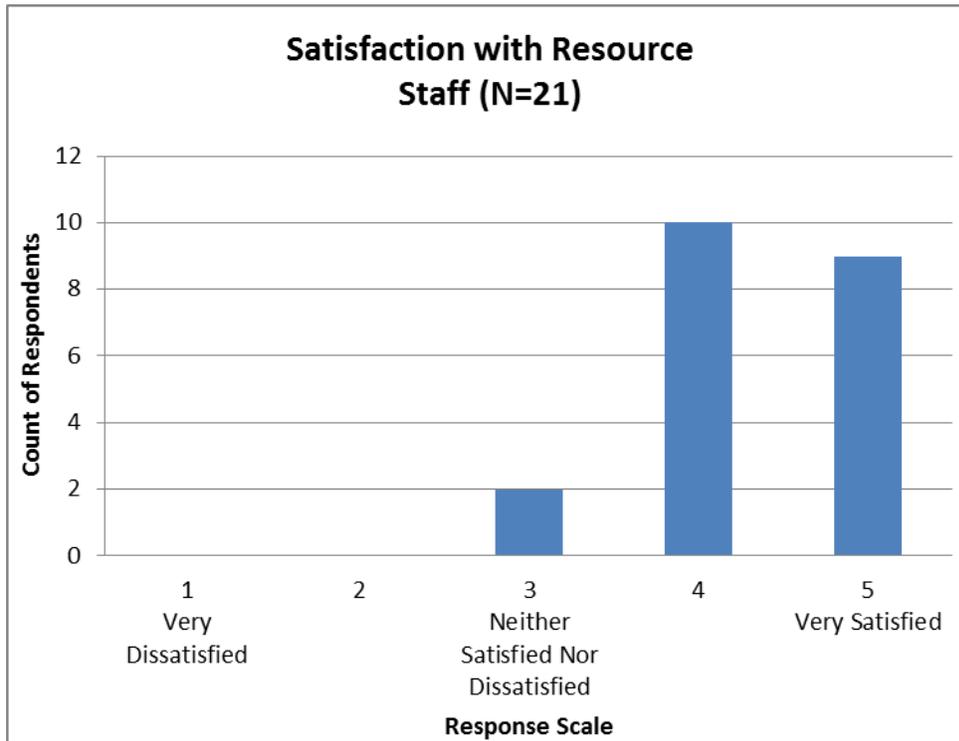
Question 17: Overall, on a scale of 1-5 (with 1 being very dissatisfied and 5 being very satisfied), how satisfied are you with this resource?

Respondents were asked to rate on a scale from 1-5 how satisfied they were with the resource, with 1 being 'very dissatisfied' and 5 being 'very satisfied'.

SMDHU STAFF SURVEY

In the staff survey, the average rating was 4.3 out of 5. Nineteen of 21 staff (90%) were satisfied or very satisfied with the resource (i.e. they gave the resource a score of four or five); two were neither satisfied nor dissatisfied. No (0%) staff reported being dissatisfied or very dissatisfied (score of one or two). See Figure 21.

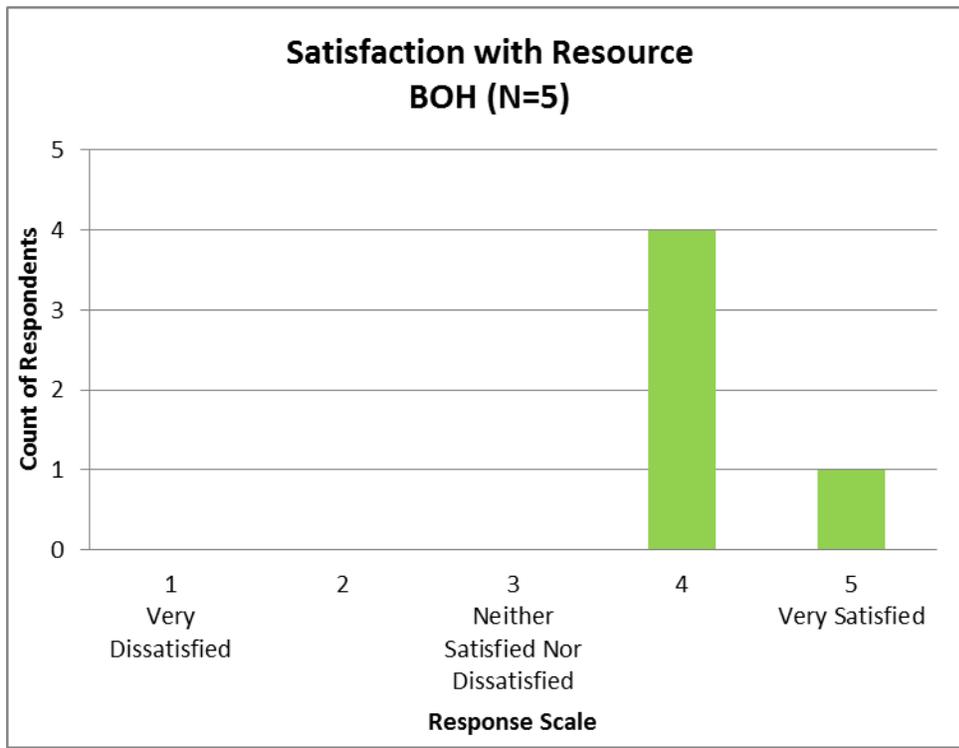
Figure 21: Staff Satisfaction with Resource



BOARD OF HEALTH SURVEY

The resource was given an average rating of 4.2 out of 5 in the BOH survey. All five Board of Health members (100%) were satisfied or very satisfied with the resource (i.e. they gave it a score of four or five). See Figure 22.

Figure 22: BOH Satisfaction with Resource



The overall average rating of satisfaction with the resource given by both staff and BOH combined (N=26) was 4.3 out of 5 (where 5 = very satisfied).

Question 18: Do you have any suggestions of how to improve this resource so that it is more useful for you in your work?

SMDHU STAFF SURVEY

Eight people from the staff survey provided suggestions in this section.

Comments from the staff survey for how to improve this resource included the following suggestions (in no particular order):

- Resource useful as is
- Have more colleagues familiar with resource
- Resource should address the 'how to' use it
- Have more hardcopies available (for interaction with others)
- Too early to tell
- Gap in resources related to rural design (for e.g., see Ontario Farmland Trust's Blueprint for Food Systems document)
- Inclusion of any new policy statements or implementation suggestions (refresh data)
- More consultation with municipalities
- Create resource more applicable to a District/County Level that would also provide Official Plan Policy Recommendations

See [Appendix 13](#) for full comments.

BOARD OF HEALTH SURVEY

Two people from the BOH survey provided suggestions in this section.

Comments from the BOH survey for how to improve this resource included the following suggestions (in no particular order):

- Resource is easy to follow and present
- Include a quick reference sheet that can be handed out

See [Appendix 14](#) for full comments.

Question 19: What other health-related resources/tools/information would be helpful to you in your work to champion healthy communities in Simcoe Muskoka?

SMDHU STAFF SURVEY

Six people in the staff survey provided suggestions in this section.

Comments from the staff survey about what other health-related resources/tools/information would be helpful to them in their work included the following suggestions (in no particular order):

- Similar resources but for different settings
- A clear, concise summary of the literature review
- Municipal business case information pertaining to the healthy community concepts within the policy resource
- Under social cohesion, more discussion about addressing inequities when planning communities; Support access to safe affordable housing, including planning for shelters for those without homes, asking planners to use a healthy equity impact tool
- More training

See [Appendix 15](#) for full comments.

BOARD OF HEALTH SURVEY

Two people from the BOH survey provided suggestions in this section.

Comments from the BOH survey about what other health-related resources/tools/information would be helpful to them in their work included the following suggestions (in no particular order):

- Information on the successes other Boards of Health have accomplished in helping develop healthy communities
- Easy to read pamphlets citing studies/statistics which show the benefits of healthy community design (i.e. health of people in walkable communities vs. those in car-dependent communities)

See [Appendix 16](#) for full comments.

Question 20: Please provide any final comments below.

SMDHU STAFF SURVEY

Three people in the staff survey provided final comments, including that the resource is an excellent tool and a great resource. It was suggested that it could be upgraded and have a section added about addressing social equity planning. It was offered that the municipality one staff is working with plans to use the resource when they begin updating their Official Plan.

See [Appendix 17](#) for full comments.

BOARD OF HEALTH SURVEY

One person in the BOH survey provided a comment that the document has been a great tool in generating awareness in the community and among developers of the long term benefits of Healthy Community Design.

See [Appendix 18](#) for full comments.

LIMITATIONS

- Self-selection bias – people who aren't familiar with the resource may not participate in the survey. This limitation will be addressed in the introduction to the survey that will encourage everyone to participate, regardless of their familiarity with the product.
- Invalid email addresses may limit the number of potential participants who receive the survey. To address this limitation, the email distribution list will be checked for accuracy before the introductory email and survey are sent out.
- Due to the inconsistency of official plan review timeframes, participants may not be able to provide a full picture of their use of the resource or the tangible results of using the resource, as some municipalities may not have yet gone through the process of updating their official plan.
- The long-term nature of policy development and its outcomes may decrease the amount of information available at this point in time.

DISCUSSION

The data collected for this survey can help the health unit draw some conclusions about how useful and effective the health unit's resource: *Healthy Community Design: Policy Statements for Official Plans* has been. These conclusions are detailed below in relation to each of the research questions posed for this evaluation.

Usefulness of the policy resource

The evaluation investigated if the policy resource was useful to five key audiences: municipal planners, municipal elected officials, key partners, SMDHU Board of Health and SMDHU staff. Each target group was asked to rank the usefulness, relevance, readability and educational value of the resource on a scale of 1 to 5, with 1 being poor and 5 being excellent.

Survey results indicated that both municipal planners and elected officials ranked the usefulness of the resource on average as 4.0. Rankings of the other three criteria ranged from 4.0 to 4.4 (refer to Figures 3 and 4). The Board of Health also ranked the resource's usefulness as 4.0, where staff ranked it slightly higher at 4.6. Rankings of the other criteria by Board and staff ranged from 4.0 to 4.7 (refer to Figures 16 and 17). The high rankings of the other criteria provides evidence that the resource was useful as an educational tool to key audiences (educational value – 4.0 to 4.5) as well as a tool that was useful to them in their work (relevance – 4.0 to 4.5). Several staff commented that the resource was an excellent tool. This was also reflected in similar comments from planners. These general comments further support the overall usefulness of the resource.

“The document has been a great tool for me in making my community and developers aware of the long term benefits of embracing the Healthy Community Design policy as we move forward.” (Board of Health member)

“Overall I think the resource is a great idea and will help to build awareness of the relationship between Planning and creating healthy communities.” (Municipal planner)

The resource was also educational in that almost half (46%) of elected officials said the resource had introduced them to new concepts related to health and the built environment, while just over one-third (36%) of municipal planners stated the same. This was similar for the Board of Health, where 40% responded they had been introduced to new concepts. For staff this was much higher; 71% had learned about new concepts from the resource. Social cohesion and well-being was the concept cited the most often as being new to those who responded.

On a satisfaction level, the resource was ranked average to high by all audiences, ranging from an average ranking of 3.6 (out of 5) for elected officials, 4.1 for planners, 4.3 for staff and 4.2 for Board. Further, staff and Board of Health ranked the resource as 4.5 and 3.8 respectively (out of 5) as helpful in championing healthy community design.

These results indicate that overall the resource was useful to the four key audiences.

Use of the policy resource

The next question the survey was designed to answer was how the policy resource was being used by the key audiences. A series of uses was suggested and participants were asked to check all that applied. They were also given the opportunity to provide other ways they had used the resource.

According to the results, usage varied depending on the audience. The top three uses for each group were as follows (Table 8):

Table 8: Top Three Uses of the Resource by Target Group

AUDIENCE	PRIMARY USE	SECONDARY USE	TERTIARY USE
Elected Officials (n=5)	Decision-making (5)	Learning about healthy community design (4)	Discussions with municipal planners (3)
Municipal Planners (n=12)	General reference (11)	Used policies in official documents (7)	Inform decision-makers' decisions (5) Discussions with council or staff (5)
Board of Health (n=2)	General reference (2)	Discussions with community (2)	Discussions with municipal staff (2)
Staff (n=17)	General reference (16)	Discussions with colleagues & peers (14)	Official Plan reviews and policy work (13)

This information is useful to help determine if the resource is being used as it was intended to be when it was created. From the data we can conclude that based on our sample it is achieving its usage objectives. Elected officials are using the document as part of their decision-making process, which is helping to facilitate informed planning discussions with their municipal planners. This is an important finding as it indicates that we could anticipate an increase in healthy design concepts being incorporated into municipal planning documents in Simcoe Muskoka in the future.

For municipal planners, the resource is a valuable reference tool used to inform and influence decision makers. The results indicate that a majority of municipal planner participants have

incorporated policy statements from the resource into official planning documents. As this is the primary objective of the resource, we can see that progress is being made to achieve healthy community design outcomes.

Another indicator of success for the use of this resource was the number of planners who stated it had or will help them meet the requirements of provincial planning policies. Twenty of 22 respondents (91%) agreed it had been helpful in this regard.

Both elected officials and planners have used the resource in discussions with others. Two-thirds (67%) had stated they had shared it with council colleagues, while 83% of planners had shared it with one of their colleagues, amongst others. This indicates that the resource was getting greater exposure than anticipated.

From a staff and Board perspective, the use of the resource as a general reference and a guide to assist them in their work in discussions about healthy community design and in reviewing official documents has been a key objective of its creation. Both Board and staff indicated they had shared the resource with a variety of individuals and groups including municipal staff, members of local coalitions, municipal planners, elected officials and developers (see Figures 19 & 20).

These results show that the resource is being used as intended and further, that it is achieving outcomes of the health unit's Building Healthy Communities initiative.

Incorporation of policy statements into municipal documents

The third objective of the survey was to find out if the use of the policy resource has resulted in the incorporation of healthy community design policy statements into municipal Official Plans and/or other strategic documents. We can see from the responses to two questions in the survey that this has occurred. Based on the results of Question 12, eight of 11 (73%) municipal planners and six of 11 (55%) elected officials indicated that policies from the resource had been incorporated into municipal planning decision or municipal planning documents. These policies varied in the health topics that were addressed, as well as what plans they were incorporated into (refer to Tables 1 & 2), although the Official Plan and Strategic Plan were the ones most often cited. The environment was the health topic most often incorporated into these documents.

Sixty-nine percent of planners who had not yet used any of the policies in the document in their planning documents stated they intended to do so in the future.

From a staff perspective, almost half (43%) responded that to their knowledge some of the planning policies had been incorporated into planning decisions or documents in a municipality they had worked with. The Board response was higher, at 60%. Most staff indicated that these policies were included in the Official Plan, with physical activity cited as the policy incorporated the most often, followed by injury prevention. This is an interesting divergence from the health issue identified as the most used health issue addressed by municipal planners and elected officials as being the environment. This could be explained by the fact that we do not know which municipalities are being referred to by the planners and health unit staff, and may be different.

In the same vein, elected officials and planners were asked if any implementation activities from the resource had been used in the implementation of their municipal Official Plan or other documents. These activities had been implemented at a lower rate than the policy statements had been incorporated into documents. Forty-five percent of elected officials and 27% of planners said they had been used. This number may reflect the lag time between approval of planning documents and the actual implementation of the policies within those documents.

Very few respondents from staff (19%) and Board (0%) reported that to their knowledge implementation activities had been implemented. Like the policy suggestions above, staff reported that the main document supported by implementation activities was the Official Plan, with the most often identified health issue as physical activity and sun safety.

These results indicate that more policies were incorporated into official documents than were implementation activities actually implemented to support these policies.

Improving the resource

The evaluation wanted to know if participants felt the resource could be improved and if so, how. A variety of suggestions came forth from all audiences. These are provided in more detail in the Results section. The main themes that emerged from the elected officials and municipal planners responses were:

- Promotion and communication - use the resource to make presentations to councils, to educate residents and municipal staff, etc.

- Advocacy and advice – use resource as a tool to advocate for the concepts in the resource and provide advice to communities
- Pragmatism – ensure goals and policies in the document are realistic
- Currency - keep the resource updated and revise it as necessary
- Relevance - include examples from official plans, more information about how to connect the resource with other planning documents
- Partnerships - include recognition of partnerships in implementation activities

Suggestions from the staff and Board of Health surveys for how to improve this resource included the following themes:

- Promotion – promote it to staff in health unit, have more hard copies available
- Use – include a ‘how to’ use section, executive summary or quick reference sheet
- Fill in the gaps – include rural design issues
- Currency - update policy statements and implementation suggestions
- Consultation - with municipalities

These suggestions were used in the creation of recommendations for further improvements to this resource. These can be found in the Recommendations section below.

Other resources required to support the creation of healthy communities

The final research objective was to find out what other support/resources key audiences needed to support them in creating healthy communities in their municipality. Similar to the fourth question, there was a variety of suggestions provided. These were very specific and can be read in detail in the Results section. By participant group, these suggestions included:

- Elected officials – input from residents, data, cost/benefit analysis, funding opportunities, more resources
- Municipal planners – documents (i.e. design manuals, guidelines, studies), education for councils, support for implementation activities, stronger legislation

- Staff – training, executive summary of literature review, business cases, addressing health inequities
- Board of Health – successes of other boards of health in this area, simple resources with data

CONCLUSIONS

The results of this evaluation show that the resource was useful and educational to the four key audiences. Overall satisfaction level for the resource was high (average 4.1 out of 5). Survey responses indicate it has helped to advance the implementation of healthy community design concepts into official planning documents, and to some extent implementation activities to support these policies have been enacted. Participants were able to identify some improvements to the resource, that if implemented could make the resource more useful to them.

RECOMMENDATIONS

Based on the results of the evaluation, several recommendations can be made for further action:

1. The BHC policy resource should be updated and revised to reflect current knowledge and best practice related to policies and implementation suggestions. This revision should take place within a year of this report being finalized.
2. The existing resource should be reviewed for gaps in pertinent health and planning issues and those issues should be addressed in the revised version (e.g. rural issues, health equity, etc.).
3. The resource should include greater detail and suggestions about how to use it.
4. The health unit should consider the development of other supportive materials that can be linked from the resource, such as cost/benefit analysis of policy suggestions, examples of healthy community design and policies from other communities.
5. Once revised, the resource should be supported by a communications and dissemination plan to promote its use. Other target audiences should be considered in this plan (i.e. municipal engineers and public works departments, other government ministries and decision makers, etc.).
6. The health unit should reconsider the adoption (or recommendation) of an existing health impact assessment (HIA) or health equity tool to complement this resource. An HIA tool could actually be used by planners to ensure that concepts and suggestions from the policy resource are incorporated into municipal documents. This would also be a complementary cross-over activity with the determinants of health strategic goal under the health unit's 2012-2016 Strategic Plan.

APPENDICES

Appendix 1: Municipal Elected Officials Online Survey

BHC POLICY RESOURCE ON-LINE SURVEY FOR ELECTED OFFICIALS

SURVEY QUESTIONS

SECTION A – FAMILIARITY OF RESOURCE

1. Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans*? (provide link here)
 - a. Yes
 - b. No
 - c. Not sure

2. How did you first become aware of the policy resource?
 - a. E-mail or letter from Simcoe Muskoka District Health Unit (SMDHU) Medical Officer of Health
 - b. SMDHU staff member
 - c. Browsing SMDHU website
 - d. From a colleague
 - e. At a conference/workshop
 - f. Newsletter or other bulletin
 - g. Other (please specify)

3. In what format did you receive and/or access the policy resource?
 - a. Hardcopy - mailed to me by SMDHU
 - b. Hardcopy - accessed elsewhere (e.g. at a conference, workshop or meeting)
 - c. On the SMDHU website
 - d. Electronic version or link emailed to me
 - e. Other (please specify)

SECTION B – USE OF RESOURCE

4. Have you used the resource as part of your work as an elected official?
 - a. Yes
 - b. No
 - c. Not sure

5. In which of the following ways have you used it for your work as an elected official? (Check all that apply)
 - a. As a general reference
 - b. As a resource for decisions I make
 - c. In discussions/dealings with municipal planners
 - d. In discussions/dealings with my peers on Council
 - e. In discussions/dealings with community committees, coalitions and action groups
 - f. In discussions/dealings with developers
 - g. In discussions/dealings with individuals
 - h. To educate myself about healthy community design concepts
 - i. Other (please specify)

6. On a scale of 1-5 (with 1 being not at all and 5 being very), please rank the resource on the following elements as it pertains to your work as an elected official:
 - a. Usefulness of resource
 - b. Relevance of resource
 - c. Readability of resource
 - d. Educational value of resource

7. Why have you not used the resource? (Check all that apply)
 - a. The content wasn't useful for my work
 - b. The content wasn't relevant for my work
 - c. The content wasn't readable

- d. The content was too technical for my use
 - e. I haven't had the opportunity to use it
 - f. Other (please specify)
8. Have you shared and/or discussed this resource with others?
- a. Yes
 - b. No
 - c. Not sure
9. Who have you shared or discussed the resource with? (Check all that apply)
- a. Council colleague
 - b. Elected official outside of my municipality
 - c. Municipal planner
 - d. Developer
 - e. Member(s) of the public
 - f. Member(s) of a local committee, coalition or action group
 - g. Other (please specify)
10. Has this resource introduced you to any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?
- a. Yes
 - b. No
 - c. Not sure
11. What concepts or elements are they? (Check all that apply)
- a. Environment (air, water, energy conservation, etc.)
 - b. Injuries and safety
 - c. Physical activity
 - d. Sun safety
 - e. Access to food
 - f. Social cohesion and well-being
 - g. Other (please specify)
12. To your knowledge, have any of the **policy suggestions** in the resource been reflected and/or implemented in municipal planning decisions or documents in your municipality?
- a. Yes
 - b. No
 - c. Unsure
13. Please indicate which municipal plans/documents these **policy suggestions** have been included in. (Check all that apply)
- a. Official Plan
 - b. Secondary Plans
 - c. Strategic Plan
 - d. Transportation Master Plan
 - e. Recreation and/or Heritage Master Plan
 - f. Environmental and/or Sustainability Plan
 - g. Zoning By-law
 - h. Other (please specify)
14. To your knowledge, have any of the **implementation activities** in the resource been used in the realization of your municipality's Official Plan or other plans/documents?
- a. Yes
 - b. No
 - c. Not sure
15. Please provide a brief list of those implementation activities, indicating what plan or document they are supporting. (open-ended)

SECTION C – SATISFACTION WITH RESOURCE

16. Overall, on a scale of 1-5 (with 1 being very dissatisfied and 5 being very satisfied, include N/A), how satisfied are you with this resource?
17. Do you have any suggestions for how to improve this resource so that it is more useful for you? (open-ended)

18. What other resources/tools/information would be helpful to you in your work as an elected official to create healthy communities? (open-ended)

19. Please provide any further comments below. (open-ended)

SECTION D - DEMOGRAPHICS

20. Now that you are aware of this resource, is it likely you will look into it further?

- a. Yes
- b. No
- c. Not sure

21. The municipality I represent is: (Check all that apply)

- a. Located in the County of Simcoe
- b. Located in the District of Muskoka
- c. County of Simcoe or District of Muskoka
- d. City of Barrie or City of Orillia

22. I have served as a municipal elected representative for:

- a. Less than one year
- b. 1-4 years
- c. 5-10 years
- d. More than 10 years

23. My municipality's existing Official Plan is:

- a. Currently under review and/or being updated
- b. Due to be reviewed in the next 1-5 years (use drop down for years)

Thank you for participating in this survey.

Appendix 2: Municipal Planner Online Survey

BHC POLICY RESOURCE ON-LINE SURVEY FOR **PLANNERS**

SURVEY QUESTIONS

SECTION A – FAMILIARITY OF RESOURCE

1. Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans*? (provide link here)
 - a. Yes
 - b. No
 - c. Not sure
2. How did you first become aware of the policy resource?
 - a. E-mail or letter from Simcoe Muskoka District Health Unit (SMDHU) Medical Officer of Health
 - b. SMDHU staff member
 - c. Browsing SMDHU website
 - d. From a colleague
 - e. At a conference/workshop
 - f. OPPI Newsletter
 - g. Other (please specify)
3. In what format did you receive and/or access the policy resource?
 - a. Hardcopy - mailed to me by SMDHU
 - b. Hardcopy - accessed elsewhere (e.g. at a conference/workshop)
 - c. On the SMDHU website
 - d. Electronic version or link emailed to me
 - e. Other (please specify)

SECTION B – USE OF RESOURCE

4. Have you used the resource as part of your work?
 - a. Yes
 - b. No
 - c. Not sure
5. In which of the following ways have you used the resource for your work? (Check all that apply)
 - a. As a general reference
 - b. In discussions/dealings with developers
 - c. In discussions/dealings with Council and/or staff
 - d. In discussions/dealings with community partners or individuals
 - e. To help guide or inform Council and/or Planning Committee decisions
 - f. As an educational tool for others
 - g. Used some of the suggested policies in our Official Plan or other municipal plans/documents
 - h. Used some of the suggested implementation activities
 - i. Other (please specify)
6. (Matrix) On a scale of 1-5 (with 1 being not at all and 5 being very), please rank the resource on the following elements as it pertains to your work:
 - a. Usefulness of resource
 - b. Relevance of resource
 - c. Readability of resource
 - d. Educational value of resource
7. Why have you not used the resource? (Check all that apply)
 - a. The content is not useful for my work
 - b. The content is not practical for my work
 - c. Our Official Plan is not currently under review
 - d. I haven't had the opportunity to use it
 - e. Other (please specify)
8. Have you included any of the **policy suggestions** from the resource in your municipality's Official Plan or other municipal plans/documents?

- a. Yes
 - b. No
 - c. Not sure
9. Please indicate which municipal plans/documents these **policy suggestions** have been included in. (Check all that apply)
- a. Official Plan
 - b. Secondary Plans
 - c. Strategic Plan
 - d. Transportation Master Plan
 - e. Recreation and/or Heritage Master Plan
 - f. Environmental and/or Sustainability Plan
 - g. Zoning By-law
 - h. Other (please specify)
10. If you haven't done so already, do you intend to include any of the **policy suggestions** in the resource in your Official Plan and/or other municipal plans/documents?
- a. Yes
 - b. No
 - c. Not sure
11. Have you used any of the **implementation activities** from the resource in the realization of your municipality's Official Plan or other municipal documents?
- a. Yes
 - b. No
 - c. Not sure
12. Please provide a brief list of those **implementation activities**, indicating what municipal plans/documents they are supporting.
13. If you haven't done so already, do you intend to use any of the **implementation activities** included in the resource as you implement your Official Plan and/or other municipal plans/documents?
- a. Yes
 - b. No
 - c. Not sure
14. Has this resource helped (or will help) you to meet the requirements of the provincial planning policies?
- a. Yes
 - b. No
 - c. Not sure
15. Has this resource introduced any new concepts or elements of the built environment or land use planning that impact on health that you weren't already familiar with?
- a. Yes
 - b. No
 - c. Not sure
16. What were those new concepts or elements?
- a. Environment (air, water, energy conservation, etc.)
 - b. Injuries and safety
 - c. Physical activity
 - d. Sun safety
 - e. Access to food
 - f. Social cohesion and well-being
 - g. Other (please specify)
17. Have you shared and/or discussed this resource with others?
- a. Yes
 - b. No
 - c. Not sure
18. Who have you shared/discussed this resource with? (Check all that apply)
- a. Colleague at my workplace
 - b. Colleague outside of my workplace

- c. Council member(s)
- d. Member(s) of the public
- e. Member(s) of a local committee, coalition or action group
- f. Other (please specify)

SECTION C – SATISFACTION OF RESOURCE

- 19. Overall, on a scale of 1-5 (with 1 being very dissatisfied and 5 being very satisfied, include N/A) how satisfied are you with this resource?
- 20. Do you have any suggestions for how to improve this resource so that it is more useful for you? (essay/comment box open-ended)
- 21. What other resources/tools/information would be helpful to you in your work to create healthy communities? (essay/comment box open-ended)
- 22. Please provide any further comments below. (essay/comment box open-ended)

SECTION D - DEMOGRAPHICS

- 23. Now that you are aware of this resource, is it likely you will look into it further?
 - a. Yes
 - b. No
 - c. Not sure
- 24. I work for:
 - a. A municipality located in the County of Simcoe
 - b. A municipality located in the District of Muskoka
 - c. The County of Simcoe or the District of Muskoka
 - d. The City of Barrie or the City of Orillia
- 25. My municipality's existing Official Plan is:
 - a. Currently under review and/or being updated
 - b. Due to be reviewed in the next ___ years (use drop down for years: 1, 2, 3, 4, 5)

Thank you for participating in this survey.

Appendix 3: SMDHU Staff Online Survey

BHC POLICY RESOURCE ON-LINE SURVEY FOR STAFF

SURVEY QUESTIONS

SECTION A – FAMILIARITY OF RESOURCE

1. Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans*? (provide link here)
 - a. Yes
 - b. No
 - c. Not sure
2. On a scale of 1-5 (with 1 being not at all and 5 being very, include N/A), how familiar are you with the resource?
3. Since you were first introduced to this resource, have you received any extra information or training about this resource?
 - a. Yes
 - b. No
 - c. Not sure
4. What was the extra information or training you received? (Check all that apply)
 - a. Information through staff email
 - b. Information through staff intranet (blog, What's New, etc.)
 - c. Information and/or training from manager or other team member
 - d. Presentation at a team meeting
 - e. Presentation at a service area in-service
 - f. Information from SMDHU website
 - g. Training at Official Plan Review training session
 - h. Information at a conference/workshop
 - i. Information from a newsletter or other bulletin
 - j. Other (please specify)
5. Has this resource introduced any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?
 - a. Yes
 - b. No
 - c. Not sure
6. What were these concepts or elements?
 - a. Environment (air, water, energy conservation, etc.)
 - b. Injuries & safety
 - c. Physical activity
 - d. Sun safety
 - e. Access to food
 - f. Social cohesion and well-being
 - g. Other (please specify)

SECTION B – USE OF RESOURCE

7. Have you used the resource as part of your work?
 - a. Yes
 - b. No
 - c. Not sure
8. In which of the following ways have you used the resource for your work? (Check all that apply)
 - a. As a general reference for myself
 - b. As a resource for Official Plan reviews and other municipal policy work
 - c. In my discussions/dealings with municipal planners
 - d. In my discussions/dealings with municipal staff
 - e. In my discussions/dealings with elected officials

- f. In my discussions/dealings with developers
 - g. In my discussions/dealings with community committees, coalitions and action groups
 - h. In my discussions/dealings with individual members of the community
 - i. In my discussions/dealings with colleagues and peers
 - j. Used to educate others about healthy community design concepts
 - k. To champion healthy community design with municipal governments
 - l. Other (please specify)
9. On a scale of 1-5 (with 1 being not at all and 5 being very), please rank the resource on the following elements as it pertains to your work:
- a. Usefulness of resource
 - b. Relevance of resource
 - c. Readability of resource
 - d. Educational value of resource
10. On a scale of 1-5 (with 1 being not at all and 5 being very), please rank how well this resource has helped you in your SMDHU work to champion healthy community design in Simcoe and Muskoka.
11. Are you aware of a municipality in Simcoe or Muskoka that has used any of the **policy suggestions** from the resource in their Official Plan or other municipal plans/documents?
- a. Yes
 - b. No
 - c. Not sure
12. Please list the types of **policies** you are aware of that have been used, indicating which plan/document they have been used in.
13. Are you aware of a municipality in Simcoe or Muskoka that has used any of the **implementation activities** from the resource to implement their Official Plan or other municipal plans/documents?
- a. Yes
 - b. No
 - c. Not sure
14. Please list the **implementation activities** you are aware of that have been used, indicating which plan/document they have supported.
15. Have you shared and/or discussed this resource with others?
- a. Yes
 - b. No
 - c. Not sure
16. Who have you shared this resource with? (check all that apply)
- a. Elected official in Simcoe or Muskoka
 - b. Elected official outside of Simcoe Muskoka
 - c. Municipal planner
 - d. Municipal staff
 - e. Developer/builder
 - f. Member(s) of the public
 - g. Member(s) of a local committee, coalition or action group
 - h. Other (please specify)

SECTION C – SATISFACTION OF RESOURCE

17. Overall, on a scale of 1-5 (with 1 being not at all and 5 being very), how satisfied are you with this resource?
18. Do you have any suggestions of how to improve this resource so that it is more useful for you in your work? (open-ended)
19. What other health-related resources/tools/information would be helpful to you in your work to champion healthy communities in Simcoe Muskoka?
20. Please provide any further comments below. (open-ended)

SECTION D - DEMOGRAPHICS

21. My service area is:
- a. Clinical Service
 - b. Corporate Service
 - c. Family Health Service
 - d. Healthy Living Service
 - e. Health Protection Service
22. I've been involved in BHC-related activities as part of my work for:
- a. Less than 1 year
 - b. 1-2 years
 - c. 3-4 years
 - d. More than 4 years

Thank you for participating in this survey.

Appendix 4: Board of Health Online Survey

BHC POLICY RESOURCE ON-LINE SURVEY FOR BOARD OF HEALTH

SURVEY QUESTIONS

SECTION A – FAMILIARITY OF RESOURCE

23. Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans?* (provide link here)
 - a. Yes
 - b. No
 - c. Not sure

24. On a scale of 1-5 (with 1 being not at all and 5 being very, include N/A), how familiar are you with the resource?

25. Since you were first introduced to this resource, have you received any extra information or training about this resource?
 - a. Yes
 - b. No
 - c. Not sure

26. What was the extra information or training you received? (Check all that apply)
 - a. Information from MOH through email or other correspondence
 - b. Presentation at a Board of Health meeting
 - c. Information from a colleague
 - d. Information from SMDHU website
 - e. Information at a conference/workshop
 - f. Information from a newsletter or other bulletin
 - g. Other (please specify)

27. Has this resource introduced any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?
 - a. Yes
 - b. No
 - c. Not sure

28. What were these concepts or elements?
 - a. Environment (air, water, energy conservation, etc.)
 - b. Injuries & safety
 - c. Physical activity
 - d. Sun safety
 - e. Access to food
 - f. Social cohesion and well-being
 - g. Other (please specify)

SECTION B – USE OF RESOURCE

29. Have you used the resource as part of your work as a Board of Health member?
 - a. Yes
 - b. No
 - c. Not sure

30. In which of the following ways have you used the resource as a Board of Health member? (Check all that apply)
 - a. As a general reference for myself
 - b. In my discussions/dealings with municipal planners
 - c. In my discussions/dealings with municipal staff
 - d. In my discussions/dealings with municipal elected officials
 - e. In my discussions/dealings with developers
 - f. In my discussions/dealings with community committees, coalitions and action groups
 - g. In my discussions/dealings with individual members of the community
 - h. In my discussions/dealings with colleagues and peers
 - i. Used to educate others about healthy community design concepts
 - j. To champion healthy community design with municipal governments
 - k. Other (please specify)

31. On a scale of 1-5 (with 1 being not at all and 5 being very), please rank the resource on the following elements as it pertains to your work on the Board of Health:
 - a. Usefulness of resource
 - b. Relevance of resource
 - c. Readability of resource
 - d. Educational value of resource

32. On a scale of 1-5 (with 1 being not at all and 5 being very), please rank how well this resource has helped you as a Board of Health member to champion healthy community design in your community.

33. Are you aware of a municipality in Simcoe or Muskoka that has used any of the **policy suggestions** from the resource in their Official Plan or other municipal plans/documents?
 - a. Yes
 - b. No
 - c. Not sure

34. Please list the types of **policies** you are aware of that have been used, indicating which plan/document they have been used in.

35. Are you aware of a municipality in Simcoe or Muskoka that has used any of the **implementation activities** from the resource to implement their Official Plan or other municipal plans/documents?
 - a. Yes
 - b. No
 - c. Not sure

36. Please list the **implementation activities** you are aware of that have been used, indicating which plan/document they have supported.

37. Have you shared and/or discussed this resource with others?
 - a. Yes
 - b. No
 - c. Not sure

38. Who have you shared or discussed the resource with? (Check all that apply)
 - a. Elected officials in my community
 - b. Elected officials outside of my municipality
 - c. Municipal planner
 - d. Municipal staff
 - e. Developer
 - f. Member(s) of the public
 - g. Member(s) of a local committee, coalition or action group
 - h. Other (please specify)

SECTION C – SATISFACTION OF RESOURCE

39. Overall, on a scale of 1-5 (with 1 being not at all and 5 being very), how satisfied are you with this resource?

40. Do you have any suggestions of how to improve this resource so that it is more useful for you as a Board of Health member? (open-ended)

41. What other health-related resources/tools/information would be helpful to you in your work as a Board of Health member to champion healthy communities?

42. Please provide any further comments below. (open-ended)

SECTION D - DEMOGRAPHICS

43. I have been a member of the Board of Health for:
 - a. Less than 1 year
 - b. 1-2 years
 - c. 3-4 years
 - d. More than 4 years

Appendix 5: Key Partners Online Survey

BHC POLICY RESOURCE ON-LINE SURVEY FOR KEY PARTNERS

SURVEY QUESTIONS

SECTION A – FAMILIARITY OF RESOURCE

1. Are you familiar with the resource, *Healthy Community Design: Policy Statements for Official Plans?* (provide link to resource here)
 - a. Yes
 - b. No
 - c. Not sure

2. How did you first become aware of the resource?
 - a. E-mail or letter from Simcoe Muskoka District Health Unit (SMDHU) Medical Officer of Health
 - b. SMDHU staff member
 - c. Browsing SMDHU website
 - d. From a colleague
 - e. At a conference/workshop
 - f. Newsletter or other bulletin
 - g. Other (please specify)

3. In what format did you receive and/or access the resource?
 - a. Hardcopy - mailed to me by SMDHU
 - b. Hardcopy - accessed elsewhere (e.g. at a conference, meeting, workshop, etc.)
 - c. On the SMDHU website
 - d. Electronic version or link emailed to me
 - e. Other (please specify)

SECTION B – USE OF RESOURCE

4. Have you used the resource as part of your work?
 - a. Yes
 - b. No
 - c. Not sure

5. In which of the following ways have you used the resource for your work? (Check all that apply)
 - a. As a general reference
 - b. As a resource for my specific work
 - c. In my discussions/dealings with municipal planners
 - d. In my discussions/dealings with municipal elected officials
 - e. In my discussions/dealings with community partners
 - f. In my discussions/dealings with individuals
 - g. As an educational tool for others
 - h. Other (please specify)

6. On a scale of 1-5 (with 1 being not at all and 5 being very, include N/A), please rank the resource on the following elements as it pertains to your work:
 - a. Usefulness of resource
 - b. Relevance of resource
 - c. Readability of resource
 - d. Educational value of resource

7. Why have you not used the resource? (Check all that apply)
 - a. The content wasn't useful for my work
 - b. The content wasn't relevant to my work
 - c. The content was too technical for my use
 - d. I haven't had the opportunity to use it
 - e. Other (please specify)

8. On a scale of 1-5 (with 1 being not at all and 5 being very, include N/A) how useful has this resource been to your organization in helping it achieve its goals?

9. Has this resource introduced you to any new concepts or elements of the built environment or land use planning that impact on health that you weren't familiar with before?
 - a. Yes
 - b. No
 - c. Not sure

10. What are those concepts/elements?
 - a. Environment (air, water, energy conservation, etc.)
 - b. Injuries and safety
 - c. Physical activity
 - d. Sun safety
 - e. Access to food
 - f. Social cohesion and well-being
 - g. Other (please specify)

11. Have you shared and/or discussed this resource with others?
 - a. Yes
 - b. No
 - c. Not sure

12. Who have you shared or discussed the resource with? (Check all that apply)
 - a. Colleague at my organization
 - b. Colleague outside my organization
 - c. Municipal planner
 - d. Council member
 - e. Developer
 - f. Member(s) of the public
 - g. Member(s) of a local committee, coalition or action group
 - h. Other (please specify)

SECTION C – SATISFACTION WITH RESOURCE

13. Overall, on a scale of 1-5 (with 1 being very dissatisfied and 5 being very satisfied, include N/A), how satisfied are you with this resource?

14. Do you have any suggestions for how to improve or change this resource so that it is more useful for you? (open-ended)

15. What other resources/tools/information would be helpful to you in your work to create healthy communities?(open-ended)

16. Please provide any further comments below. (open-ended)

SECTION D - DEMOGRAPHICS

17. Now that you are aware of this resource, is it likely you will look into it further?
 - a. Yes
 - b. No
 - c. Not sure

18. My work is located in:
 - a. County of Simcoe (excluding Barrie or Orillia)
 - b. District of Muskoka
 - c. City of Barrie
 - d. City of Orillia

19. I am answering this survey:
 - a. As a volunteer with a local committee, coalition or action group
 - b. As a community member
 - c. As a professional related to my employment
 - d. Other (please specify)

20. My employment or volunteering is primarily in the area of (drop down in alpha order):
 - a. Health
 - b. Social Services
 - c. Environment

- d. Municipal Planning
- e. Land Development
- f. Recreation
- g. Housing
- h. Community Services
- i. Public Works (including engineering)
- j. Municipal staff
- k. Education
- l. Law Enforcement
- m. Economic Development
- n. Other (please specify)

Thank you for participating in this survey.

Appendix 6: Email Letter of Introduction

The Simcoe Muskoka District Health Unit is conducting an evaluation of its policy resource: *Healthy Community Design: Policy Statements for Official Plans* ([provide link to resource here](#)). This resource was created with the input of key stakeholders to provide municipal planners, municipal elected officials and other stakeholders in Simcoe Muskoka with suggestions for Official Plan policies that will assist municipalities in creating healthy and complete communities while also meeting the Provincial policies.

This survey will take about 15 minutes to complete. All responses are anonymous and all data collected are confidential. Your participation in this survey is entirely voluntary and you are free to withdraw your participation at any time. There is no risk to you or your organization by taking part in this survey. By participating in this short survey you will help the health unit to evaluate the usefulness and effectiveness of this resource. It will also help us to understand what other types of resources would assist you in your efforts to plan and build healthier communities.

The results of this survey will be used by the Simcoe Muskoka District Health Unit for planning purposes. Results may be shared with partners and others through a report or published article. No personal or identifying information will be included in the report.

For more information about this survey contact Megan Williams at megan.williams@smdhu.org or 1-877-721-7520 ext. 7328.

To voluntarily participate in this survey, please click START. Thank you.

Appendix 7: Open-Ended Responses for Q17 Suggestions for Document- Elected Officials

- Use more direct communication. Avoid repetition. State the facts and work more directly with these facts. Keep goals realistic so that most communities can have a chance to use these goals.
- Yes - the health unit needs to come and advocate for the ideas on an ongoing basis to our council and to our planning committee. Right now it is just a document on a website. It is not alive and it is not on the minds of the Council as a touchstone for decisions. Make a delegation and actually speak to the specific ideas and suggestions - don't just make a general presentation. Perhaps let us know which communities are taking any steps using it.
- No not until I have a better understanding of the process.
- As stated previously, it is impossible to implement these resources as bureaucracy is so over imposed that it is virtually impossible to go ahead with anything!!!
- keep promoting it

Appendix 8: Open-Ended Responses for Q17 Suggestions for Document- Municipal Planners

- Keep updating and revising it.
- I would suggest that the importance of this document is as an educational piece for residents/staff/politicians who are not aware of some of the policy matters. We found that there were not many opportunities for additions to existing Official Plan or other policy, as many of these topics are difficult to translate into policy. The value is in the implementation of a lot of these recommendations - in many cases Official Plan policy is not required to effect action on matters such as establishing community gardens, creating public transit opportunities, rain barrel workshops, active and safe transportation to schools for children, etc.
- HU staff need to take it on the road and do presentations to all Councils' in the County!
- Not at this time, I have not had an opportunity to review it very thoroughly, but see it as a useful resource for future OP project.
- Not until we actually draft our policies will I have comment.
- Actual examples from official plans would be helpful Also, recognition of potential partnerships - especially on implementation that can't really be addressed through an OP
- There is a lot of information and I feel there needs to be more of connection with how the resource melds with Planning Documents to place emphasis on the importance of Planning and the effect it has on health.

Appendix 9: Open-Ended Responses for Q.18- Elected Officials

- Easier access to zoning rules. Easier access to environmental rules such as MNR.
- More back up statistics on moving from general statements to actual implementation. More link between the resources spent and benefits to be realized. Precedents. Links to funding or partnerships to implement. Better links for info and follow up to the typical infrastructure in a municipality and the staff therein.
- Residents input
- Resource for community gardens
- Not sure

Appendix 10: Open-Ended Responses for Q.18- Municipal Planners

- Design Manuals
- There is vast range of planning documents available including MOE guidelines, source water protection, healthy communities studies from across the continent.
- Not sure
- Additional educational opportunities for Councils, where policy directions begin.
- On-going support for initiatives such as community gardens, local food research, etc..
- Stronger legislation to support initiatives as approval requirements.
- Presentations to municipal committees/council

Appendix 11: Additional Comments (Open-Ended) Q.19- Elected Officials

- There are some good ideas in here. All could be stated in a shorter version of this report. Again the problem of repetition comes to mind. All in all, I would say this report could stick to a more direct explanation of the "meat" of the subject.
- We are so strapped for funds at the local level and the depts. and budgets so entrenched in the past ways of doing things - that it is going to take more visionary and transformative thinking to justify/inspire/motivate these changes except for token, say the words, small gestures. There probably needs to be a task force or some structure that actually engages people in the community and partners and champions to take steps and implement ideas herein. Some of these ideas are on the radar of other initiatives - so some change is happening - but in times of economic retrenchment - the ideas need to be reinvented to show how efficiencies or innovative ways of doing things can save money now or in the future - in order to move forward - or get another level of government to help pay for them and create a health community infrastructure fund that can only be used to advance these types of projects.

Appendix 12: Additional Comments (Open-Ended) Q.19- Municipal Planners

- Good resource overall.
- The document is useful, but may be more aptly used as an implementation document, rather than one to create policy.
- Good resource....
- Overall I think the resource is a great idea and will help to build awareness of the relationship between Planning, and creating healthy communities.
- It's a good document to adjust your thinking.

- This is repeated information, many practitioners are well aware of these concepts therefore the tool is of little interest as these are already known.

Appendix 13: Open-Ended Responses for Q.18- Staff

- Wish my colleagues in other programs were familiar with this document
- I think it is still early to see some of the results you have asked about. Municipalities are still working on their official plans but I think the resource is very useful. It seemed helpful to go over how to use the resource at the 2 council meetings I attended
- The resource as it stands is fine. What I find is that planners are seeking resources that address the "how to". There is a particular gap in resources related to rural design. Therefore my connection with a Provincial organization that developed a visual document related to how to plan for protection of farmland and food systems through land use and design. You may want to look up Ontario Farmland Trust's Blueprint for Food Systems doc. as an example.
- I would like to see how useful it has been to municipal decision makers. There may also be value in each team looking at their section of the resource and consider refreshing it with any new relevant policy statements or implementation suggestions.
- More clarity on where/when/how to use it. More consultation with the municipalities on whether they even want our input.
- As a frontline staff, it would be helpful to have a printed hard copy to keep with me as I interact with partners.
- I have been assigned two official plans- Bracebridge and Springwater, neither are ready for our input. So the last few questions are more of a not applicable than a "no".
- Resource geared at municipal level and this can sometimes be a barrier. Can a resource be developed that would be more applicable to a District/County Level that would also provide Official Plan Policy Recommendations. Thank you.

Appendix 14: Open-Ended Responses for Q.18- BOH

- Not at this time. I found the resource easy to follow and present to other community partners.
- Perhaps a quick reference sheet for my use but also to be included in info package given out to applicants during pre-consultation process.

Appendix 15: Open-Ended Responses for Q.19- Staff

- Municipal business case information pertaining to the healthy community concepts within the policy resource.
- More discussion about addressing inequities when planning communities especially under social cohesion, when discussing mixed land use including supporting planning into community safe affordable accessible and comfortable homes for, we discuss planning for shelters for food and protection from sun...what about planning for shelters for those without homes, asking planners to use a healthy equity impact tool,
- see previous comments
- A summary version which is clear and concise of the Literature Review which was authored by Myrna Wright and Megan Williams.
- More training if it is something that we are to be involved in.
- Similar resources but created for different settings (i.e. Guide to a Healthy School)

Appendix 16: Open-Ended Responses for Q.19- BOH

- Perhaps some information on the successes that other Boards of Health have accomplished in helping develop healthy communities.
- Easy to read pamphlets citing studies/statistics which show the benefits of healthy community design(i.e., health of people in walkable communities vs. those in car-dependent communities)

Appendix 17: Additional Comments (Open-Ended) - Staff

- Excellent tool - upgrade and add a section about addressing social equity planning.
- The municipality I am working with has not started the Official Plan process yet so they have not used it but are familiar with it and have shared with me that they plan to refer to it when they begin updating their plan.
- Great resource that I refer to frequently.

Appendix 18: Additional Comments (Open-Ended) - BOH

- The document has been a great tool for me in making my community and developers aware of the long term benefits of embracing the Healthy Community Design policy as we move forward.