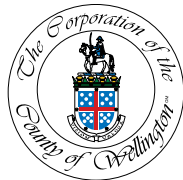


WELLINGTON COUNTY

COMMUNITY
Safety

AND
Well-Being
PLAN





Chris White | Wellington County Warden

The County's Community Safety and Well-Being Plan (CSWP) prioritizes proactive measures. We aim to prevent injuries and reduce the reliance on emergency responses. This approach not only promotes individual well-being but also fosters a safer and more resilient community.

A cornerstone of the CSWP is the emphasis on collaboration. By bringing together various sectors—including municipalities, police, paramedics, education, public health, healthcare, social services, and community-based human services agencies—we move beyond working in isolation. This unified effort allows us to effectively address the unique needs of Wellington County and implement strategies that benefit all residents.

Through collaboration, we have identified and focused on priority risks within our communities. This joint effort has led to the development of targeted initiatives aimed at mitigating these risks and enhancing the overall safety and well-being of our County.



Andy Lennox | Wellington County Ontario Provincial Police Detachment Board Chair

The Wellington County Ontario Provincial Police Detachment Board (WCOPPDB) is a five-member civilian body that oversees the County of Wellington OPP. The WCOPPDB annually reviews and approves the operating budget for policing in the County for a population base of over 107,000 residents.

The CSWP is a collaborative effort that addresses local risks to the safety and well-being of our residents. This plan outlines our priorities and action items to mitigate these risks.

As WCOPPDB Chair, I would like to thank Safe Communities Wellington County, Wellington County OPP, and all our local partners for their work on the CSWP.

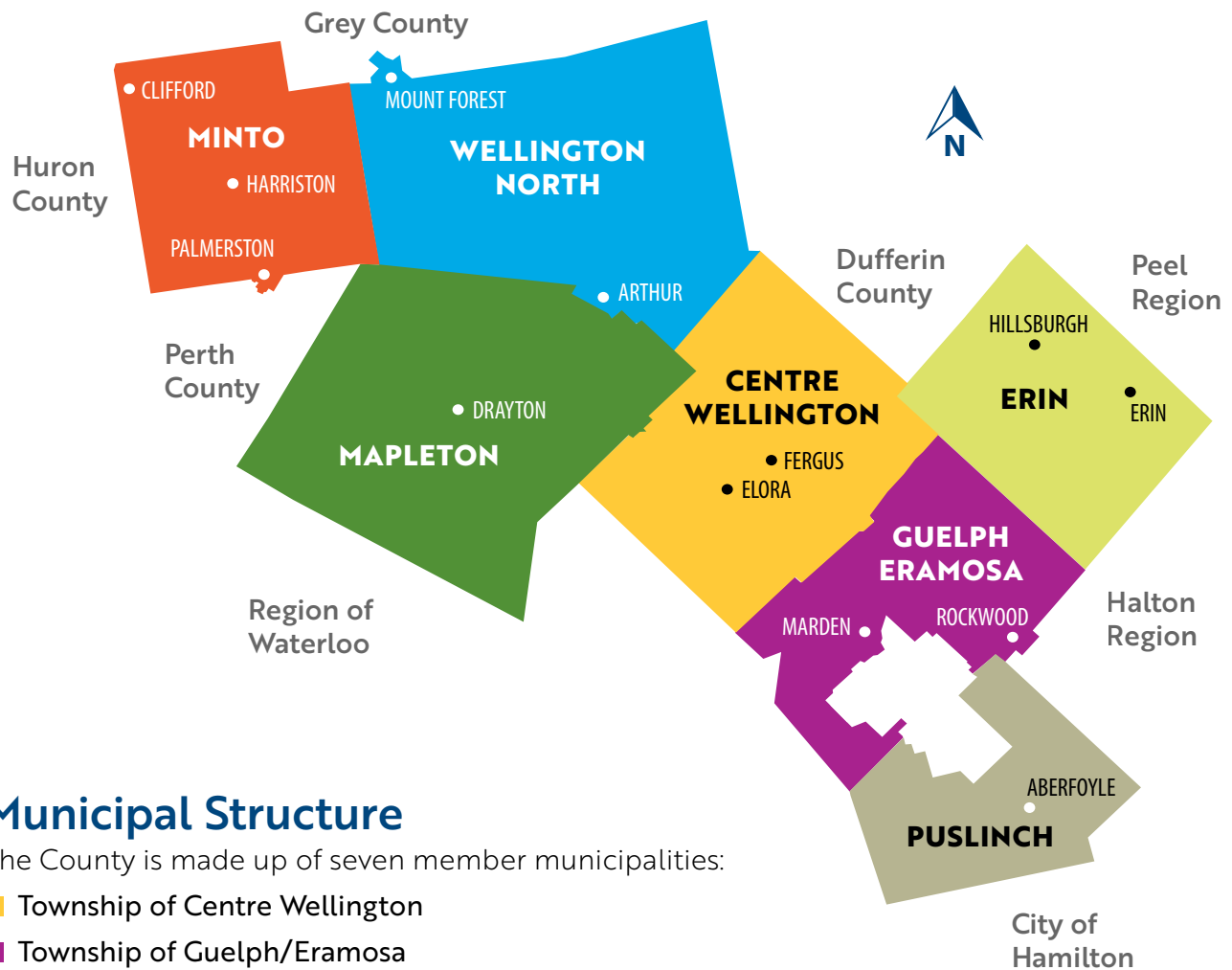
Leadership Table (Advisory Committee Members)

Gianni Accettola	Wellington Healthcare Alliance Manager, Quality and Patient Safety
Luisa Artuso	Wellington County Social Services Administrator
Sara Bailey	Township of Puslinch Councillor
Wendy Bieman	Guelph Wellington Paramedic Service Commander
Brittany Boomer	Wellington County Infrastructure Technical Analyst
Sarah Bowers-Peter	Crime Stoppers Guelph-Wellington Programme Coordinator
Stephanie Chidlow	Wellington North, Mapleton and Minto Fire Services Administrative Coordinator
Pasquale Costanzo	Wellington County Technical Services Supervisor
Michael Dehn	Town of Erin Mayor
Helen Edwards	Township of Mapleton Programme Coordinator
Mary Lloyd	Wellington County Councillor
Barbara Lustgarten Evoy	Fergus Educational Services Owner
Angelle Eybel	Safe Communities Wellington County Co-Chair
Alexandra Fournier	Wellington Dufferin Guelph Public Health Health Promotion Specialist
Tasha Grafos	Township of Wellington North Executive Assistant to the CAO
Darren Hale	Upper Grand District School Board Principal
Jean Hopkins	Guelph Wellington Drug Strategy Manager
Sooriya Jayandan	Guelph Eramosa Township Deputy Clerk
Kimber Jolley	Wellington County Caseworker
Allysandra Kent	Community Resource Centre of North and Centre Wellington Executive Director
Callise Loos	Wellington North, Mapleton and Minto Fire Services Deputy Fire Chief
Lisa MacDonald	Township of Centre Wellington Councillor
Kayla Martin	Wellington County Engineering Technologist
Ariel Oleynikov	Guelph Wellington Women in Crisis Public Educator
Marlene Ottens	Township of Mapleton Councillor
Christopher Paluch	Centre Wellington Fire Services Fire Prevention Officer
Stephen Thomas	Former Wellington County OPP Detachment Commander
Dave Turton	Town of Minto Mayor
Amber Van De Peer	Wellington County Emergency Management Assistant
Will Wycherley	Compass Community Services Director Support Services

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Wellington County, located in southwestern Ontario approximately 100 kilometers west of Toronto, is a region characterized by its blend of urban and rural landscapes, including rolling farmlands, small towns, and natural reserves. Bordered by Waterloo Region, Halton Region, Perth County, and Grey Bruce, the County is traversed by the Grand River, enhancing its agricultural and natural appeal.



Municipal Structure

The County is made up of seven member municipalities:

- Township of Centre Wellington
- Township of Guelph/Eramosa
- Town of Minto
- Township of Mapleton
- Township of Puslinch
- Township of Wellington North
- Town of Erin

Population and Growth

Currently, Wellington County has a population of 107,610. Projections indicate that by 2051, the population is expected to reach 160,000, reflecting significant growth and development in the region.

Wellington County's location, diverse communities, and commitment to sustainable development make it a vibrant and evolving region within Ontario.

Community Engagement

Safe Communities Wellington County (SCWC) conducted a Priority Setting Exercise at the Wellington County Museum and Archives, inviting over 150 interest groups from across Wellington County on June 21, 2023. The event featured statistical presentations by Wellington-Dufferin-Guelph Public Health (WDGPH), Wellington County Ontario Provincial Police (OPP), Guelph Wellington Paramedic Service, and local municipal fire services. Attendees reviewed data on emergency department visits, hospitalizations, and deaths to identify key injury categories.



Following the exercise, SCWC engaged in community consultations with each member municipality and action groups to develop a five-year action plan addressing the identified priorities. Additional stakeholders, including WDGPH, Upper Grand District School Board (UGDSB), Wellington Catholic District School Board (WCDSB), and the County of Wellington Roads Department, conducted community engagement activities to further develop the plan.

The collaborative efforts of SCWC and its partners aim to enhance community safety and well-being throughout Wellington County.

Priority Risks and Wellington County's Accomplishments

Enhancing Mental Health Supports

Intentional self-harm has remained a significant public health concern in Wellington County. The Canadian Mental Health Association Waterloo Wellington (CMHA WW), Compass Community Services, Wellington County OPP and the Suicide Awareness Council of Wellington Dufferin (SACWD) (until 2022) have collaborated to improve access to mental health supports throughout Wellington County.

Coordinated strategies include:

- Innovative outreach.
- Enhanced crisis intervention.
- Public education.
- Community-based programming.

These strategies have contributed to more accessible care and a reduction in self-harm behaviours.

Intentional self-harm and suicidal behaviours pose serious health risks. By recognizing these challenges, local stakeholders have implemented a range of programmes and services aimed at:

- Increasing public awareness about mental health.
- Providing easier and more equitable access to support services.
- Reducing the occurrence of intentional self-harm through proactive, community-based interventions.



Canadian Mental
Health Association
Waterloo Wellington

Association Canadienne
pour la sante-mentale
Waterloo Wellington

Improving Access to Mental Health Supports



Integrated Crisis Response – CMHA WW supports accessible crisis intervention through 24/7 helplines (e.g., Here 24/7 and the national 9-8-8 Suicide Crisis Helpline). These services provide immediate support to individuals in crisis, ensuring that help is always available.



Impact – The CMHA WW and the Wellington County OPP teamed up in 2015 to provide mental health crisis care. They created the Integrated Mobile Police and Crisis Team (IMPACT) to respond to mental health and substance-use related calls. The team consists of specially trained CMHA WW staff and police officers who work together to provide immediate and comprehensive care. The goal of IMPACT is to provide a community-based crisis response that results in better health outcomes for individuals in need. This has reduced the need for emergency room visits and hospital stays.



Here4Hope – Wellington County's community-based life promotion, suicide prevention project.

The project focuses on:

- Raising awareness about suicide and its impacts
- Encouraging community members to attend SafeTALK and ASIST to develop confidence in talking about suicide with those at risk
- Support those impacted in the aftermath of a death by suicide.

Everyone has a role to play in preventing suicide and the goal of Here4Hope is to engage as many individuals and organizations as possible in this important work.

Wellington County OPP Youth Advisory

Committee – Informing youth in Wellington County about accessible mental health services available to them through a poster campaign.

Community-Based Services and Drop-In Centres

Compass Community Services has expanded its network of drop-in centres and case management services, ensuring that individuals can access mental health support without long waiting periods or barriers related to transportation.

Expanded Telehealth and Virtual Supports

– Compass, Suicide Awareness Council and CMHAWW have increased their use of telehealth platforms, allowing residents to connect with mental health professionals remotely, an especially crucial service during public health emergencies or for those in remote areas.

Enhancing Public Education and Awareness

Public Education Campaigns – Here4Hope hosts an annual community event designed to engage the community in promoting life, decreasing stigma, and encouraging help seeking. In 2024, A Practical Path to Mindfulness with Mindful Mike (Mike Masse), encouraged the community to explore how simple breath work is an important tool in your mental health toolbox. In 2023, Tyler Smith one of 13 survivors of the 2018 Humboldt Broncos bus crash, shared an impact message that challenged common misconceptions about mental health. In 2022, the event focused on workplace mental health and featured Mary Ann Banyton, a workplace relations specialist, and one of the founders of the National Standard for Psychological Safety in the Workplace.

Training Programmes and Workshops

– CMHA WW offers training sessions (e.g., safeTALK and ASIST) that provide community members, educators, and first responders with skills to identify and support individuals at risk of self-harm. These programmes empower communities to recognize early signs of distress and intervene before a crisis escalates.

Coordination and Collaborative Efforts

Inter-Agency Collaboration. Here4Hope is a partnership between the CMHA WW and the County of Wellington. This partnership demonstrates the scope of community commitment to raising awareness about mental health and suicide.

Here4Hope in partnership with the Waterloo Region Suicide Prevention Council participated in Roots of Hope a four-year National Suicide Prevention Research Demonstration Project being led by the Mental Health Commission of Canada. Since the project's completion in 2022, Here4Hope has continued to participate in the Roots of Hope National Community of Practice. Where communities across the country working on community-based suicide prevention gather to learn and share knowledge.

Data-Driven Interventions – Our local healthcare providers and public health agencies continuously analyze incident data (e.g., emergency department visits related to self-harm) to identify trends and high-risk populations. This information informs targeted outreach and the allocation of resources to areas with the greatest need.

Impact and Outcomes

Increased Service Utilization – Access to crisis helplines and drop-in services has led to a measurable increase in the number of residents who are content with their mental health support.

Reduction in Self-Harm Incidents – Early evaluations suggest that coordinated education campaigns and training programmes are contributing to a decline in the number of intentional self-harm incidents in Wellington County.

Enhanced Community Engagement – The collaborative efforts have raised public awareness, reduced stigma, and empowered communities to take an active role in suicide prevention and mental health promotion.

Conclusion

The combined efforts of the CMHA WW, Compass Community Services, Wellington County OPP and the SACWD have significantly improved access to mental health supports and contributed to a reduction in intentional self-harm incidents in the region. By offering comprehensive crisis services, public education, training programmes, and a coordinated approach to suicide prevention, these organizations have built stronger, more resilient communities. Continued collaboration and innovation will be essential to sustaining these improvements and addressing emerging challenges in the mental health landscape.





Decreasing Motor Vehicle Collisions in Wellington County

Between 2010 and 2015, Wellington County experienced over 1,600 hospitalizations due to motor vehicle collisions, leading to a potential loss of 437 years.¹

Notably, young Canadians, who represent 13% of licensed drivers, accounted for over 20% of motor vehicle-related fatalities and injuries during this period.² In response, Wellington County has implemented a comprehensive Road Safety Strategy in collaboration with the Wellington County Roads Department, Wellington County OPP, SCWC and all seven member municipalities.

Motor vehicle collisions pose a significant public health risk in Wellington County, impacting individuals, families, and the broader community. To address this issue, a multifaceted approach has been adopted, focusing on data-driven interventions, public education, enforcement, infrastructure enhancements, and community engagement.

Identifying High-Risk Areas

Data Collection and Analysis: The County collaborates with Wellington County OPP and WDGP to gather and analyze collision data, identifying high-risk areas and informing targeted interventions.

Black Cat Radar Units: These devices collect traffic data, including vehicle speed, volume, and classification, aiding in traffic engineering, community safety, and enforcement efforts.

Awareness and Education Campaigns: Public education initiatives highlight the dangers of aggressive, distracted, and impaired driving through a variety of media channels and educational programmes in elementary and high schools across Wellington County.

Enhanced Police Enforcement: The Wellington County OPP has increased its presence in high-risk areas, implementing targeted enforcement initiatives such as the R.I.D.E. (Reduce Impaired Driving Everywhere) programme.

Automated Speed Enforcement

(ASE) cameras: The County has implemented a one-year pilot programme. ASE cameras have been deployed in Community Safety Zones to deter speeding and enhance road safety.



¹ Ontario Mortality Data [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

² National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

Infrastructure Improvements



Traffic Calming Measures:

Implementations such as roundabouts, speed humps, and road narrowing have been introduced to reduce speeding and enhance safety.

Improved Signage and Road Markings:

Enhancements include reflective road markers, LED speed signs, and clearer pedestrian crossings to improve visibility and safety.

Intersection Safety Enhancements: Adjustments to traffic signal timing and the addition of dedicated turn lanes have been made to improve traffic flow and reduce collision risks.

School-Based Programmes: Collaboration with local schools to educate young drivers on safe driving habits - fostering a culture of safety from an early age.

Community Workshops and Outreach: Public forums and safety demonstrations are hosted to engage the community and promote safe driving.

Partnerships with Local Businesses: Businesses are encouraged to promote safe driving habits with employees, extending the reach of safety initiatives into the workplace.

Through these concerted efforts, Wellington County strives to enhance road safety, reduce motor vehicle collisions, and protect the well-being of its residents.

Conclusion

Wellington County has taken a multifaceted approach to reducing motor vehicle collisions, leveraging data analysis, law enforcement collaboration, infrastructure enhancements, and community engagement. The combined efforts of the Wellington County Roads Department, Wellington County OPP, and WDGPH aim to create safer roads and reduce the number of injuries and fatalities associated with motor vehicle collisions. Continued monitoring and adaptation of these initiatives will be crucial to further improving road safety in the region.



Fall Prevention Initiatives for Older Adults in Wellington County



Falls are a leading cause of injury and reduced quality of life among aging adults in Wellington County.³ Recognizing this critical issue, a network of local organizations — including Family Health Teams, the Victoria Order of Nurses (VON), Community Paramedicine Guelph Wellington, the Seniors Centre for Excellence, and SCWC — have implemented a comprehensive, multi-pronged approach to fall prevention.

Our initiatives range from proactive screening and home safety assessments to exercise programmes, educational workshops, and enhanced care coordination. This collaborative effort is designed to reduce fall-related injuries, promote independence, and improve overall well-being in the aging population.

Falls among seniors can lead to significant physical, emotional, and financial consequences. In response, Wellington County's healthcare and community service providers have adopted a holistic strategy that addresses both individual risk factors and environmental hazards. By leveraging expertise across primary care, home care, community paramedicine, and senior support services, these organizations are working together to create safer living conditions and empower seniors with the tools and knowledge to prevent falls.

Fall Prevention Initiatives

Family Health Teams

Proactive Screening and Risk Assessments –

Family Health Teams conduct routine fall risk screenings as part of regular primary care visits. They assess factors such as balance, mobility, vision, and medication side effects that could contribute to falls.

Integrated Care and Referrals – When a senior is identified as at-risk, primary care providers refer them to allied health professionals — such as physiotherapists, occupational therapists, and pharmacists — for further evaluation and intervention.

Medication Reviews – Regular reviews of medication regimens are performed to identify drugs that may increase the risk of falls, with adjustments made as needed.

Home Safety Recommendations – Families receive guidance on modifying home environment — such as installing grab bars, improving lighting, and removing tripping hazards—to reduce fall risk.

VON

Home Visits and Safety Assessments – VON nurses provide home visit services that include comprehensive fall risk assessments. During these visits, they evaluate the home for potential hazards and advise on modifications.

³ National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

Education and Training – The VON conducts educational sessions for seniors and their caregivers on fall prevention strategies, safe mobility techniques, and emergency preparedness.

Follow-Up and Monitoring – Regular follow-up visits ensure that recommended modifications are implemented and that seniors continue to receive support in managing their fall risk.

**Community Paramedicine Guelph Wellington
Rapid Response and Preventive Home**

Assessments – Paramedics visit aging adults in their homes to assess immediate fall risks and provide on-site education regarding safe mobility and emergency response planning.

Integration with Primary Care – Paramedics work in close coordination with Family Health Teams and the VON to ensure that fall risk assessments and recommendations are incorporated into care plans for seniors.

Telehealth and Remote Monitoring – Community Paramedicine programmes are expanding their use of telehealth technologies to conduct remote assessments and follow-ups, especially in rural or hard-to-reach areas.

**Seniors Centre for Excellence and
Local Seniors Centres**

Exercise and Balance Programmes – Seniors Centres offer group exercise classes, such as: Tai Chi, yoga, and strength training, designed to improve balance, flexibility, and overall physical strength—key factors in fall prevention.

Educational Workshops and Seminars – Regular workshops educate seniors on nutrition, safe movement, and strategies for maintaining independence. Topics include proper use of mobility aids and techniques to avoid falls.

Social Engagement and Peer Support – By fostering social connections through clubs and community events, these centres help reduce isolation—a factor that can indirectly increase fall risk by limiting seniors' access to support.



Fall Prevention Initiatives continued...

Resource Distribution – Seniors Centres provide brochures, safety checklists, and one-on-one consultations to guide older adults and their caregivers on practical fall prevention measures.

Collaborative Partnerships and Data Monitoring Integrated Approach – The collaboration between Family Health Teams, VON, Community Paramedicine, and Seniors Centres creates a seamless continuum of care. Information sharing and joint case management ensure that high-risk seniors receive comprehensive support.



Continued collaboration, data-driven strategies, and innovation in service delivery are key to sustaining and further improving these outcomes.

Data-Driven Interventions – Regular collection and analysis of fall-related data enable stakeholders to identify trends and measure the impact of interventions. This data informs continuous improvement in fall prevention strategies.

Strategies implemented at the SCWC Leadership Table – Exercise booklets to increase exercising at home, a fall prevention checklist, and mobility aid purchases.

Community Engagement – Joint public awareness campaigns and community events, supported by all partners, ensure that the broader population is informed about fall prevention, further reducing stigma around seeking help.

Conclusion

Through coordinated, multi-sector efforts, Wellington County's Family Health Teams, the VON, Community Paramedicine Guelph Wellington, and Seniors Centres have made significant strides in preventing falls among older adults. Their comprehensive approach — ranging from clinical risk assessments and home safety interventions to community-based exercise programmes and educational workshops — has not only reduced fall-related injuries but also enhanced the overall quality of life for seniors in the region. Continued collaboration, data-driven strategies, and innovation in service delivery are key to sustaining and further improving these outcomes.

Reducing Accidental Poisonings in Wellington County



Between 2010 and 2015, nearly 1,000 emergency department visits in Wellington County were attributed to accidental poisonings.⁴ In response, Wellington County – together with the Wellington Guelph Drug Strategy (WGDS) and WDGPH – has implemented a range of initiatives aimed at preventing both pediatric poisonings (stemming from hazardous items within a child’s reach) and drug poisoning related incidents in teens and adults.

Accidental poisonings remain a significant public health issue in Wellington County. Young children are at risk due to curious behaviour and inadequate storage of toxic substances, while accidental drug poisonings (also known as overdose) among youth and adults often result from the unpredictability and toxicity of the unregulated drug market. Recognizing these challenges, Wellington County has coordinated with the Wellington Guelph Drug Strategy and WDGPH to develop and implement targeted interventions. These strategies include public education, safe storage initiatives, enhanced data monitoring, and cross-sector collaboration with partners such as the Ontario Poison Centre.

Accidental Poisonings Initiatives



Public Education and Awareness Campaigns

Targeted Outreach for Families – WDGPH, SCWC and the WGDS have launched educational programmes and events directed at community members, parents and caregivers:

- Emphasizing the importance of storing medications, household chemicals, and other hazardous substances securely.
- Substance use Prevention and Awareness Workshops.
- Distributing information about naloxone.
- Community seminars.
- School-based programmes.

This important work continues to provide awareness of poisoning risks among all residents.

Coordinating with partners to plan and implement awareness events, including:

- The Community Harm Reduction Forum held in May 2024, engaged over 150 people across multiple sectors in Wellington County and shared information about harmreduction approaches and substance use services.
- Annual Drug Poisoning Awareness Day Events held in Mount Forest, which brings together health and social services, community members, and those most impacted by the drug toxicity crisis.
- Safer Substance Use Education: The WGDS has incorporated drug poisoning prevention into its broader campaigns within the County. These efforts educate residents about the risks of drug toxicity. Whether from prescription medications, over-the-counter drugs, or unregulated substances, and promote safer substance use practices.

⁴ National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

Multi-Platform Communication – Through the use of local media, social media platforms, informational videos, and community newsletters, evidence-based information is distributed in the community to provide clear and consistent messaging on accidental poisoning prevention. This collaborative messaging has helped ensure that residents receive consistent advice from multiple trusted resources and information about supports and resources within the County.

Policy and Regulatory Support – Efforts are underway to work with local policymakers to encourage standards and, where possible, regulatory measures that support safe storage practices. These policies aim to reduce the accessibility of hazardous substances to children and minimize risks associated with accidental poisonings.

Enhanced Data Collection and Monitoring

Collaboration with the Ontario Poison Centre

– Regular data sharing and consultation with the Ontario Poison Centre has allowed SCWC, Parachute Canada, and WDGPH to track poisoning incidents in real time. Additionally, data related to opioid harms within the County is tracked and monitored through WDGPH. Alerts are circulated through WGDS and WDGPH within the County if there is an increased risk of drug poisoning in the unregulated drug supply. These collaborations support timely responses and help fine-tune prevention strategies based on current trends. Cross-Sector Collaboration and Community Partnerships.

Inter-Agency Task Force

Wellington County has established a multi-stakeholder leadership table that includes representatives from all partner agencies. This task force meets every six weeks to review data, share best practices, and coordinate efforts to prevent accidental poisonings.

Partnerships with Community Organizations

– Local community groups and healthcare providers have joined forces with the WGDS and WDGPH to host events, distribute educational resources, and provide technical assistance to families and at-risk populations.



Safe Storage and Environmental Interventions

Promotion of Safe Storage Practices – Wellington County, in partnership with public health agencies, has promoted the use of child-proof storage devices and secure cabinets in homes and community settings. Educational materials and local initiatives have provided practical guidance on how to safely store medications and toxic substances.

Conclusion

Through a coordinated approach, Wellington County – along with the WGDS, SCWC and WDGPH – has made significant strides in reducing accidental poisonings. By combining robust public education, environmental safety initiatives, enhanced data monitoring, promotion of harm reduction approaches and strong cross-sector collaboration, the County is better equipped to protect its residents from accidental poisoning. Continued investment in these strategies will be essential as Wellington County grows and faces evolving public health challenges.

Enhancing Safety for Vulnerable Road Users in Wellington County

Between 2010 and 2015, over 1,200 emergency department visits in Wellington County were attributed to accidents involving pedestrians and cyclists.⁵ With population projections rising to 122,000 by 2031, increased vehicular traffic is expected, which could further endanger vulnerable road users (VRUs). In response, the County of Wellington, in partnership with its seven member municipalities, aims to strengthen existing safety programmes, educate road users, and explore innovative traffic-calming strategies to safeguard cyclists and pedestrians.

VRUs — including pedestrians, cyclists, and scooter riders — face heightened risks on roadways where vehicular traffic is increasing. In Wellington County, data from 2010 to 2015 shows that accidents involving these groups result in significant numbers of emergency department visits.⁶

In response, the County, in collaboration with its seven municipalities and key partners focused on:

- Strengthening existing safety programmes
- Educating road users
- Identifying new avenues for traffic calming and infrastructure improvements

Vulnerable Road User Initiatives

Traffic Calming and Road Design

- Municipalities have invested in designing and implementing bike lanes, clearly marked crosswalks, and pedestrian islands at high-risk intersections.
- Intersection Redesign: Improvements have been made to signal timing, signage, and intersection geometry to increase visibility and reduce speed in areas with heavy pedestrian and cyclist traffic.
- Speed Management: Initiatives such as speed humps, narrowed roadways, and raised medians have been introduced in residential areas and near schools to lower vehicular speeds.

Active Transportation Initiatives

- Safe Routes Programmes: Collaborative efforts have been made to identify and improve routes that are frequently used by pedestrians and cyclists, including better lighting, signage, and maintenance of sidewalks and trails.
- Pilot Projects: Several pilot projects have been launched in key corridors to test innovative traffic-calming measures and to gather data for future County-wide implementation.
- Creation of both an Active Transportation Plan and Wellington County's Roads Master Action (RMAP).



^{5 and 6} National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

Public Education and Awareness

Targeted Campaigns

- **Driver and VRU Awareness Campaigns:** Wellington County has rolled out multi-media public education campaigns focused on encouraging safe driving practices and educating vulnerable road users on how to navigate busy roadways safely.
- **School and Community Programmes:** Workshops and safety training sessions — such as Safe Walking, Bike Safety, and Winter Walk Month—are provided in schools and community centres. These programmes educate children, teenagers, and their caregivers on the importance of safe road use and the benefits of using protective equipment (helmets, reflective clothing).
- **Canada Youth Road Safety Week, Students Against Impaired Driving Day, Safe Kids Week** are campaigns run by SCWC.

Collaborative Outreach

- **Engaging Local Stakeholders:** The County's leadership table, which includes representatives from all seven member municipalities, works closely with community organizations, schools, and law enforcement to ensure consistent messaging across the County.
- **Data-Driven Messaging:** Educational materials and public service announcements are informed by local crash and injury data, ensuring that the messages address the highest-risk areas and behaviours.

Conclusion

Wellington County has taken a proactive and coordinated approach to improve the safety of its vulnerable road users. Through comprehensive infrastructure improvements, targeted education campaigns, and collaborative inter-municipal efforts, the County is working to reduce the incidence of pedestrian and cyclist injuries. As the County continues to grow, these initiatives — backed by data-driven policies and community engagement—will be critical in ensuring that all residents, regardless of how they travel, can enjoy safer roads and a healthier community.





Decreasing Sports and Recreation Injuries in Wellington County

Between 2010 and 2015, sports and recreation related injuries in Wellington County resulted in over 4,000 emergency department visits.⁷ This figure, recorded prior to the implementation of Rowan's Law in 2018, underscores the high prevalence of injuries — particularly concussions — among young athletes. There is a clear need to strengthen concussion and safety protocols. This environmental scan examines current practices among sports organizations and schools across Wellington County, identifies existing gaps, and outlines opportunities for collaboration with sports medicine.

Wellington County boasts a vibrant sports and recreation culture, with numerous schools, community leagues, and sports clubs engaging youth and adults in physical activities. However, the high volume of sports and recreation related injuries between 2010 and 2015 reveals a critical public health concern. The introduction of Rowan's Law in 2018, which focuses on concussion awareness and management, has marked an important regulatory advancement. Yet, there remains substantial opportunity to build on these measures by integrating comprehensive injury prevention strategies across the County's sports and school communities.

Sports and Recreation Initiatives

Injury Incidence

Over 4,000 ED visits attributed to sports and recreation injuries have been reported, highlighting a notable risk in competitive and recreational sports.⁸

Concussion Protocols

Prior to Rowan's Law, concussion protocols varied widely among local sports organizations. Many clubs have since started to standardize these protocols.

Education and Awareness

Schools have primarily focused on general safety and injury prevention. Enhanced education on concussion risks and injury management protocols is needed to ensure the well-being of student athletes.

Collaboration

Some local schools and teams have partnered with local sports medicine experts. There is a significant opportunity to strengthen these partnerships for ongoing training and rapid response.

Conclusion

Wellington County has made significant strides in addressing sports and recreation injuries, yet the high number of Emergency Department visits prior to the implementation of Rowan's Law signals that further improvements are essential. By standardizing concussion protocols, fostering robust collaborations among sports organizations, schools, medical experts, and enhancing educational outreach, Wellington County can build a safer environment for athletes of all ages. These efforts will not only reduce the incidence of sports-related injuries but also contribute to the long-term health and well-being of the community.



Preventing Agricultural Injuries in Wellington County

Agriculture remains a cornerstone of Wellington County's economy, yet farming activities carry inherent risks. In response, the Wellington County Federation of Agriculture (WCFA), in partnership with Workplace Safety and Prevention Services, has launched a series of initiatives aimed at reducing farm injuries. These efforts focus on education, training, improved equipment standards, on-farm safety assessments, and collaborative data-driven strategies. Together, these measures are designed to minimize the risk of incidents such as: tractor rollovers, grain bin mishaps, and other workplace injuries, thereby safeguarding the well-being of the County's agricultural community.

Farming in Wellington County involves the use of heavy machinery and hazardous equipment, which can lead to serious injuries if proper safety protocols are not followed. Recognizing the need to protect farm workers and owners, the WCFA and Prevention Services have collaborated on comprehensive prevention programmes. Their work includes delivering targeted education, enforcing safety standards, and engaging directly with the agricultural community to promote best practices.

Agricultural Injury Initiatives

Safety Workshops and Seminars

The WCFA regularly hosts training sessions focused on preventing common agricultural injuries. Workshops cover:

- Safe operation of tractors and other farm machinery with an emphasis on the proper use of rollover protective structures (ROPS).
- Grain bin safety protocols, including proper access techniques, lockout/tagout procedures, and emergency rescue methods.
- General farm safety, including the safe handling of chemicals, equipment maintenance, and hazard recognition.

On-Farm Safety Demonstrations

Field-based training sessions allow farmers to see best practices in action. These sessions include demonstrations of equipment checks, hazard assessments, and safe work practices in real farm settings.

Risk Assessments and Audits

Workplace Safety teams, in conjunction with the WCFA, conduct on-site safety assessments. These audits help identify potential hazards on farms—from machinery maintenance issues to environmental risks — and provide recommendations for corrective actions.

Community Engagement

Participation in agricultural fairs and local events provides opportunities for direct engagement with the farming community. These interactions help to raise awareness of farm safety issues and encourage a culture of continuous improvement.

Conclusion

Through robust educational initiatives, rigorous on-farm safety assessments, and strong inter-agency collaboration, the WCFA, Workplace Safety and Prevention Services and The Wellington County Farm and Home Safety Association are making significant strides in preventing farm injuries. These efforts help protect farmers and farm workers from the hazards associated with agricultural operations — such as tractor rollovers and grain bin mishaps — while fostering a culture of safety that is essential for the long-term success of the County's agricultural community.

Priority Risks for Wellington County

Priority Risk # 1 – Mental Health Priority Risks in Wellington County

Wellington County faces significant mental health challenges, particularly amongst youth in rural communities.

Youth Mental Health Concerns

Emergency Responses: In 2024, there were 971 Mental Health Act occurrences reported to the Wellington County Ontario Provincial Police (OPP), indicating a substantial demand for mental health crisis interventions.⁹

Intentional Self-Harm: Intentional self-harm is the leading cause of hospitalizations among youth aged 13-19 years from 2005 to 2021.¹⁰

Suicidal Thoughts: There was a 27% increase in students in grades 7-12 reporting thoughts of suicide between 2019 and 2022.¹¹

Mental Health in the Agricultural Community

- Prevalence of Mental Health Issues: Canadian farmers face unique challenges in their work, such as market volatility and extreme weather events, which are compounded by difficult farm working conditions that involve

long hours in often isolated conditions and a high risk of occupational injury. These stressors correlate with farmers experiencing mental health challenges, including anxiety and depression, at higher rates than the general population.

Future Directions

- Expansion of Virtual Services: Enhancing Telehealth capabilities to reach more remote or underserved populations.
- Strengthening Data Integration: Refining data collection and analysis to better target high-risk areas and measure intervention impacts.
- Ongoing Community Engagement: Sustaining public education efforts and expanding training programmes to reduce self-harm incidents.

Addressing these mental health challenges necessitates a collaborative approach, integrating community resources, healthcare providers, and support networks to foster a healthier environment for all residents of Wellington County.

⁹ Wellington County OPP Detachment Board Report, 2024 Year End, page 32.

¹⁰ Discharge Abstract Database (DAD) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023.

¹¹ Well-Being and Health Youth (WHY) Survey | WDG Public Health

Priority Risk # 2 – Motor Vehicle Collisions

Motor vehicle collisions (MVC) remain a significant public safety issue in Wellington County. In 2018, the mortality rate for MVC related injuries reached its highest level at 11 deaths per 100,000 residents. While there has been a notable decline, with the most recent data from 2021 reporting 6 deaths per 100,000 residents, collisions continue to pose a serious risk to residents.¹²

In 2024 alone, Wellington County responded to 2,072 MVC calls, highlighting the continued frequency of road incidents and the need for ongoing preventative measures.¹³

Future Directions

- Strengthening enforcement and traffic monitoring.
- Expanding the use of Black Cat Radar Units to gather traffic data and identify high-risk areas.
- Increasing police presence in collision-prone areas, with targeted enforcement of impaired, distracted, and aggressive driving.
- Investing in Infrastructure Improvements that are identified in Wellington County's RMAP.
- Expanding Public Education and Awareness
- Collaborating with WDGPH, UGDSB, WCDSB, and the Grove Youth Hubs to run educational campaigns on road safety.
- Engaging the community through workshops, public forums, and partnerships with local businesses to promote responsible driving behaviors.



Priority Risk # 3 – Falls in the Older Population

Current Concerns

Falls account for 64% of injury-related Emergency Department visits and 74% of injury related hospitalizations (2005 – 2021). Among those aged 75 plus years, falls make up 91% of injury-related Emergency Department visits for that age group (2005-2021).¹⁴

Future Directions

Improved Identification and Intervention:

Increased screening and proactive risk assessments have led to earlier interventions, reducing the incidence of falls and related injuries.

Enhanced Home Safety: Home modifications and safety recommendations have decreased environmental hazards, contributing to safer living conditions for seniors.

Increased Participation in Exercise Programmes:

Higher enrollment in balance and strength classes has demonstrated positive outcomes in improving physical stability and reducing fall risk.

Continuous Education: Ongoing training for healthcare providers and community workers, along with periodic refresher courses for seniors, will maintain momentum and ensure long-term success in fall prevention.

Policy Advocacy: Collaborative advocacy for local policies that support home safety modifications, assistive aids and public infrastructure improvements will continue to be a priority.

Increase exercise classes throughout Wellington County.

Priority Risk # 4 – Accidental Poisonings in Wellington County

Among youth aged 0 – 19 years, rates of ED visits for accidental poisonings are highest in children under 4 years of ages (2005 – 2021).¹⁵

Accidental drug poisonings have increased significantly since 2015 in Wellington County.¹⁶ This is due to the unregulated drug supply containing unpredictable and high potency opioids, leading to drug poisonings (also known as overdose).

Fentanyl and its analogues remain the leading cause of opioid-related deaths. In 2023, fentanyl was responsible for approximately 79% of all opioid related deaths in the Wellington Dufferin Guelph Region.¹⁷

Future Directions

Increased Public Awareness: Early evaluations indicate improved awareness among families and the public regarding the safe storage of hazardous substances.

Enhanced Coordination: The collaborative framework has resulted in more consistent and comprehensive messaging across Wellington County, helping to bridge gaps between different municipalities.

Data-Driven Adjustments: With enhanced surveillance, public health officials can more effectively measure the impact of prevention initiatives and adjust programmes as needed.

Scaling Up Successful Initiatives: Plans are in place to expand safe storage campaigns,

educational workshops and harm reduction services throughout the County.

Policy Development: Ongoing discussions with municipal leaders and policymakers aim to establish more formalized standards for the safe storage of medications and toxic substances, as well as the harm reduction services.

Continuous Monitoring and Evaluation: Future efforts will focus on refining data collection methods and using the resulting information to guide further program development and resource allocation.

Partnering with WDGPH to support the expansion of the FAST Overdose response monitoring system within Wellington County to ensure accurate data and monitoring of the drug poisoning crisis through real-time input from partner agencies.

Priority Risk # 5 – Pedestrians and Cyclists (Vulnerable Road Users)

Among Youth Aged 0-19 years, pedestrian and cyclist injury-related ED visits and hospitalizations are highest among youth aged 10 to 15 years (2005-2021).¹⁸

Future Directions

Increased Community Engagement: The collaboration among member municipalities and community stakeholders has fostered a strong sense of shared responsibility, leading to broader public support for safety initiatives.

Improved Infrastructure: Significant investments in road design improvements and traffic calming

¹² Ontario Mortality Data [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

¹³ Wellington County OPP Detachment Board Report, 2024 Year End, page 19.

¹⁴ National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

¹⁴ Discharge Abstract Database (DAD) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

^{15 and 18} National Ambulatory Care Reporting System (NACRS) [2005-2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

¹⁶ https://wdgpublichealth.ca/sites/default/files/bh.01.apr0324.r11_-_injury_surveillance.pdf, page 6

¹⁷ https://wdgpublichealth.ca/sites/default/files/bh.01.sep0424.r28_-_opioids.pdf, page 2

have already been implemented in several high-risk areas.

Scaling Successful Initiatives: The County plans to expand pilot projects and continue refining the centralized data system to ensure that all municipalities can benefit from the most effective strategies.

Preparing for Growth: With population projections rising, ongoing efforts will focus on adaptive planning to manage increased vehicular traffic while protecting VRUs.

Continuous Education: Further investment in public education and outreach is planned to sustain long-term behavioral changes among drivers and VRUs alike.

Priority Risk # 6 – Sports and Recreation in Wellington County

Sports and recreation injuries are the second leading cause of injury-related ED visits in Wellington County, accounting for 13% of injury-related ED Visits (2005 – 2021).¹⁹

Future Directions

Strengthen and Standardize Concussion Protocols

- Develop County-wide guidelines for concussion management, leveraging Rowan's Law as a framework.
- Establish mandatory training sessions for coaches, athletic trainers, and school personnel, conducted in partnership with sports medicine and physiotherapy experts.

Expand Educational Outreach

- Launch targeted public awareness campaigns through social media, local media, and community events to educate athletes,

parents, and educators on the risks of concussions and injury prevention strategies.

- Encourage regular injury prevention workshops and health screenings in schools and sports clubs.

Priority Risk # 7 – Agriculture Related Injuries in Wellington County

Rates of injuries related to agricultural machinery and tools are highest for Wellington County, and specifically the municipalities of Wellington North and Minto.²⁰

Future Directions

Increase awareness about Agriculture related injuries through events, social media and workshops.

Expansion of Training Programmes:

Plans are underway to broaden the scope and frequency of safety workshops, incorporating emerging technologies and updated regulatory standards through Workplace Safety and Prevention Services.

Enhanced Data Collaboration: Future initiatives will focus on integrating real-time data analytics to better track incident trends and tailor interventions accordingly.

Strengthening Policy Advocacy: Continued advocacy for stricter safety regulations and funding for safety equipment improvements will be essential as agricultural operations evolve and expand.

Leveraging Technology: The adoption of new technologies—such as mobile safety apps and remote monitoring systems—will be explored to further support proactive safety measures on the farm.

¹⁹ National Ambulatory Care Reporting System (NACRS) [2005–2021], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: May 2023

²⁰ Injury Surveillance and Prevention Report, Wellington-Dufferin-Guelph Public Health, June 7, 2024, page 3.



Action Groups (Implementation Teams)

Motor Vehicle Collision Action Group
Falls Prevention Action Group
Accidental Poisoning Action Group
Mental Wellness Action Group

County of Wellington Safe Communities Leadership Table (Advisory Committee) - Terms of Reference

Mission

To support the establishment and implementation of a coordinated approach to addressing safety issues in the County of Wellington as identified in the current Injury Prevention Priority Setting Exercise.

Guiding Principles

- Multi-sectoral partnerships and shared responsibility.
- Culturally appropriate (Equity, anti-racism, and anti-oppression).
- Evidence-based.
- Includes crime and other injuries (intentional and unintentional).
- Respect.
- Awareness.
- Accessibility.

Goal/Functions/Activities

Long-Term Goals

- To have an effective and coordinated approach addressing safety issues in the County of Wellington.
- Facilitate implementation of activities that will address the priorities identified in our Priority Setting.
- Maintain a Strategic Plan to support the identified priorities.
- Conduct reviews and evaluations of activities as required.

Glossary of Roles

Co-Chairs

- Chairs Leadership (Advisory Committee) and Executive Table Meetings.
- Responsible for conduct of Leadership (Advisory Committee) and Executive Table meetings and of members.
- Follows agendas created by Safe Communities Programme Coordinator.
- Provides feedback to Safe Communities Programme Coordinator.

Safe Communities Programme Coordinator

- Sole administrator of Safe Communities Wellington County.
- Lead spokesperson for Safe Communities Wellington County.
- Creates agenda and distributes all communication for Leadership (Advisory Committee) and Executive Table meetings.
- Responsible for Marketing, Public Relations, and Event Planning.
- Assists Action Groups, Safe Communities Groups and Municipalities.
- Ex-Officio Member without voting rights.

Executive Table

- A minimum of two members of the Executive Team must approve financial and administrative decisions for Safe Communities Wellington County.
- Attends both Executive Table and Leadership Table (Advisory Committee) meetings.
- Supports Safe Communities Programme Coordinator as required.

Leadership Table (Advisory Committee)

- Votes to elect the Safe Communities Wellington County Co-Chairs.
- Provides the first step in approving the annual Safe Communities Wellington County budget.
- Comprised of a cross section of safety and wellness stakeholders across Wellington County (See Membership List).
- Each municipality must have representation on the Leadership Table (Advisory Committee).
- Determines whether a new Action Group is required based on emerging statistics and priority setting.
- Members present safety and wellness activities from their organizations/action groups/safe communities at each meeting.

Action Group (Implementation Team)

- Create injury prevention strategies and actions based on statistics and priority setting exercise.
- Create strategies and actions based on the capacity of the group.
- Each Group has the opportunity to receive up to \$2,500 annually to support their injury prevention strategies.
- Action Groups are required to submit a donation request form to the Safe Communities Programme Coordinator to request funding.
- A wrap-up document is required to be sent to the Safe Communities Programme Coordinator after receiving the donation.
- Required to submit an annual action plan in January prior to the first Leadership Table meeting of the calendar year.

Safe Communities Groups

- Represents a specific municipality within Wellington County.
- Report about current injury prevention activities for their municipality at each Leadership Table meeting.
- Receives up to \$750 annually for injury prevention activities within their municipality/region.
- Safe Communities Groups are required to submit a donation request form to the Safe Communities Programme Coordinator to request funding.
- A wrap-up document is required to be sent to the Safe Communities Programme Coordinator after receiving the donation.

Membership of Leadership Table (Advisory Committee)

The Leadership Table must include representation from the following:

- A person who represents, Ontario Health, or ii. an entity that provides services to improve the physical or mental health of individuals in the community or communities.
A person who represents an entity that provides educational services in the municipality.
- A person who represents an entity that provides community or social services in the municipality.
- A person who represents an entity that provides community or social services to children or youth in the municipality.
- A person who represents an entity that provides custodial services to children or youth in the municipality.
- An employee of the municipality or a member of the municipal council.
- A person who represents the police service board or, if there is no police service board, the commander of the detachment of the Ontario Provincial Police that provides policing in the area or his or her delegate.

- A chief of police of a police service that provides policing in the area or his or her delegate.
- Municipal Fire Departments in Wellington County.

In addition, representatives from a wide variety of community organizations shall participate.

Leadership Table (Advisory Committee)

Chair Positions

The Leadership Table **(Advisory Committee)** will be co-chaired by representatives chosen from the membership of the Leadership Table **(Advisory Committee)**. Any member of the Leadership Table **(Advisory Committee)** can be nominated to serve as Co-Chair. The Co-Chair position shall be for a two-year period. When the Co-Chair's two-year term expires, the Leadership Table **(Advisory Committee)** can extend the term for a further two-year term in perpetuity. If the current holder of the position does not wish to have their term extended, or another member is interested in the co-chair position, nominations for a new co-chair and an election shall be conducted. To maintain continuity, the Co-Chair terms shall start and end one year apart.

Leadership Table (Advisory Committee)

Temporary Chair Position

From time to time a current Co-Chair may need to step back from their position for a short time. In this instance, the Executive will appoint a current member of the Leadership Table to step into the role until their return or the completion of the term.

Leadership Sub-Committees

- The Leadership Table (Advisory Committee) will establish Action Groups (Implementation Teams) with guidelines to address specific priority areas.
- Membership on Action Groups will include local Safe Communities.
- Membership on Action Groups may include non-members of the Leadership Table.
- Leadership Table (Advisory Committee) may recognize local community groups as sub-committees.
- Additional priorities from the priority setting exercise will be considered for emerging opportunities annually.

Executive of Leadership Table

The Executive may consist of:

- Current Co-Chairs of Leadership Table.
- Appointed representative from Wellington County Council.
- Appointed member from Wellington County OPP.
- Appointed member from the Guelph Wellington Paramedic Service.
- Appointed member from WDGPH.
- Appointed member of Wellington County staff (Not limited to Social Services, Human Resources, Roads).
- Appointed member from Ontario Health or an entity that provides services to improve the physical or mental health of individuals in the community or communities.
- Safe Communities Programme Coordinator (ex-officio member).

Executive Meeting Schedule

Executive meetings will be held monthly or at the call of either Co-Chair.

Specifications of Quorum for Executive Table

A quorum of four members of the Executive must be present for a vote to be held.

Communication

- The Safe Communities Programme Coordinator shall ensure meeting minutes are recorded and circulated to the Leadership Table (Advisory Committee) members, and to the Chairperson of all sub-committees for distribution to their committee members.
- Leadership Table (Advisory Committee) members are responsible to circulate meeting notes to appropriate members of their respective organizations.
- Social media shall be used to distribute appropriate information to members of the public, stakeholders, and members of the Leadership Table (Advisory Committee).

Reporting and Financial Accountability

- Members of the Leadership Table (Advisory Committee) should report to their respective organizations.
- The Action Groups constituted by the Leadership Table (Advisory Committee) will report to the Leadership Table (Advisory Committee).
- Financial Accountability: The Leadership Table (Advisory Committee) will approve an annual budget for Safe Communities Wellington County and will provide the Treasury Department of the County of Wellington with the budget information.
- The Executive will report to the Wellington County OPP Detachment Board on a quarterly basis (at minimum).
- Members of the Executive will approve expenses and Safe Communities Programme Coordinator invoices electronically as needed throughout the year.

Frequency of Meetings

The Leadership Table (Advisory Committee) will meet the following months: January, March, May, June, September and November.

Additional Meetings may be called at the call of the Co-Chairs.

Frequency of Executive Table Meetings

The Executive Table will meet the following months: January, February, March, April, May, June, September, October and November.

Additional meetings may be called at the call of the Co-Chairs.

Decision Making

- Leadership Table (Advisory Committee) decisions will be based on a quorum of eligible voters. The Co-Chairs will encourage meaningful discussion on issues preceding the calling of the vote. All members should be provided the opportunity for full and fair comment on any issues of interest.
- The majority vote of members decides the outcome where a quorum is present.
- The Safe Communities Programme Coordinator will serve in an Ex-Officio role, and shall not have a vote.

Review

Addendum to 4.5

Action Groups are able to create strategies based on the priority settings and current statistics and provide actions that support the specific injury prevention category.

All our Action Groups utilize larger community resources to assist in educating and providing prevention to the residents of Wellington County.



As an executive, we base our strategies on the hospital stays and Emergency Department visits. We recommend all our Action Groups utilize the statistics provided through our Priority setting exercise to assist in their short- and long-term goals.

Safe Communities Wellington County receives funding from Wellington County through direction from the Wellington County OPP Detachment Board. Funding requests can be made at any time in the future should our resources require more than what is currently allotted. Provincial funding was given initially at the creation of the Community Safety and Well-Being Plan. Current funding is for current capacity. Any new grass root organizations are encouraged to approach their local Municipal Safe Communities group and work together to bring their strategy to fruition.

Let's continue to work together in injury prevention and education.

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