

# STRATEGIC PLAN 2022-2025

### OUR PLAN

This document summarizes our organization's aspirations and plans for growth, sustainability and increased community impact for the next 3 years.

Child Safety Link (CSL) is an injury prevention program at IWK Health dedicated to reducing the incidence and severity of unintentional injury to children and youth in the Maritimes (and Atlantic as appropriate).

CSL is committed to working with community organizations, governments and other partners to ensure children are as safe as necessary at home, at play, at school and on the road. The team does this through capacity building and partnerships; communication and public relations; advocacy and healthy public policy; and research and evaluation.

For the next 3 years we aim to increase our impact on the safety and well-being of children and youth in our region.

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# INTRODUCTION

This document outlines Child Safety Link's priorities and areas of focus over the next three years.

This plan is intended to be an active tool that inspires our community and guides decision-making as we strive to reach our goals.

Child Safety Link will continually assess progress in achieving the outcomes laid out in the plan.



## PROGRAM PURPOSE

We have redefined our strategic pillars and expanded our portfolio to include a focus on schools.



## PROGRAM PURPOSE

#### WHAT WE DO

#### **MISSION**

To reduce the incidence and severity of injury to children and youth in the Maritimes (and Atlantic as appropriate).

#### VISION

Atlantic Canada is a safe community where children and youth can grow to reach their full potential.

### **FOCUS AREAS**

We ensure children are as safe as necessary at home, at play, at school and on the road (See page 8 for specifics)

### HOW WE DO IT

### PARTNERSHIP & CAPACITY BUILDING

We develop multisectoral partnerships to build internal and external capacity and support collective learning.

### COMMUNICATIONS & PUBLIC RELATIONS

We communicate evidence-based information and engage with diverse audiences using a variety of tools and tactics.

#### ADVOCACY & HEALTHY PUBLIC POLICY

We advocate for positive change, including support for healthy public policies, that address specific health goals and inequities.

### RESEARCH & EVALUATION

We maintain a comprehensive understanding of injury prevention issues through research, monitoring, and evaluation of health promoting initiatives.

# STRATEGIC DIRECTIONS

Our strategic goals are evidence based and support the needs of our communities and partners.

#### **Strategic Goals:**

#### Improving the resilience and sustainability of our program

We will do this by evaluating our existing programs and engaging in new collaborations and partnerships. For example: we will build relationships with government-level partners, seek out new funding avenues and strengthen our presence across the Atlantic Region.

### Advancing equity and inclusivity in the context of child and youth injury prevention

We will do this by working with those who are disproportionately affected by unintentional injuries. For example: we will develop accessible, multilingual resources and advocate for a reduction in economic barriers to safety.

#### Expanding child and youth injury prevention research and knowledge

We will do this by building internal capacity and identifying research gaps and priorities. For example: we will develop an internal research framework and collaborate with leaders in injury prevention.

#### Providing leadership in our priority areas to drive system change

We will do this by promoting best practices and innovative interventions. For example: we will share evidence-based information, influence policy change, and participate in national conversations.



# STRATEGIC OUTCOMES

Over the next 3 years Child Safety Link commits to:

#### Improving the resilience and sustainability of our program.

Outcomes:

- CSL sustained funding from each Atlantic Province.
- Training opportunities to build capacity of CSL staff to be leaders in their priority areas.
- Consistent/up to date administrative and management processes.
- Widespread internal and external recognition of CSL as a key program of IWK Health.

#### Advancing equity and inclusivity in the context of child and youth injury prevention

Note: focus on equity groups: e.g., Newcomer, Indigenous, and African NS/Descent families

Outcomes:

- CSL educational resources support literacy challenges, ESL, and diverse language needs of population.
- Families who experience barriers related to the social determinants of health have access to appropriate injury prevention messaging, education, and support.
- Families who experience poverty or other barriers have access to free/affordable safety equipment.

#### Expanding child and youth injury prevention research and knowledge

Note: Specific to external audiences

Outcomes:

- Trained and informed service providers to support families to reduce barriers to injury prevention.
- Improved capacity of elementary/junior high schools to support injury prevention initiatives.
- Local data/research/evidence to support programming and advocacy.

#### Providing leadership in our priority areas to drive system change

Outcomes:

- Priority topic expansion to include safe sleep, drowning, & other identified areas with dedicated CSL staffing.
- Pathway for training/supporting new health promoters and agencies with an interest in children and youth injury prevention.
- Communities support and advocate for injury prevention/policies.
- Policies that support relevant SDOH and child and youth injury prevention.
- Connected partners, supporters, and collaborators.





## FOCUS AREAS

#### **PRIORITY SETTING**

From 2022 – 2025, CSL will focus its energy and expertise on several key issues related to child and youth injury prevention. These areas were determined based primarily on Parachute Canada's Cost of Injury Report\*\* and other considerations such as capacity, other partner priorities, etc.

| ISSUE            | FOCUS                  |
|------------------|------------------------|
| Falls            | At home                |
| Playground Falls | At school              |
| Sports           | Concussions            |
| Motor Vehicle    | Child Passenger Safety |
| Pedal            | Helmet use             |
| Pedestrian       | At school              |
| ATV/Snowmobile   | ATVs                   |
| Poisoning        | At home                |

\*\*Potential Lost, Potential for Change: The Cost of Injury in Canada 2021, published by Parachute Canada (<u>www.parachute.ca</u>)

## METHODS

This document and its elements (SWOT, priority focus areas, and strategic goals) result from comprehensive analysis of CSL's prior strategic plan.

The opportunities, vision, and approach described in the plan were informed by indepth conversations with staff and CSL Advisory Council members

Online survey results from a wide range of representatives with an interest in CSL's work have also helped inform this document. They provided input to guide the focus of CSL over the next 3 years.

External consultants were engaged to design and deploy the feedback process; to assist in formulating the plan's direction; and to write the plan.



# INPUT

### SWOT

Elements of the SWOT analysis serve as building blocks for the strategic plan. The analysis was formed using the input of CSL's last strategic plan and insights gained through the survey and interviews. The full SWOT analysis appears in the Plan's addenda.

### SURVEY

Forty-one individuals from around Atlantic Canada provided insights and perspectives to support our planning process, via their participation in our online survey conducted in December 2021.

- 70% of survey respondents were Nova Scotia based
- more than 70% of respondents have been associated with CSL for 6 or more years
- family resource centres represented the largest cohort of respondents. In total, over 85% of survey participants came from family resource centres, the CSL Advisory Council membership, or the IWK community

Responses to the survey helped guide CSL's priorities for the three years ahead. Survey results indicate that all activities rate highly in importance for survey respondents. Priority focus areas ranked from highest to lowest by survey respondents are:

- Providing culturally competent education and resources (Capacity Building)
- Incorporating the social determinants of health into our work (all pillars)
- Using new or expanded communication channels to share information (Communications)
- Developing new strategies to help promote injury prevention (Public Relations)
- Using data and best practices to develop policy (Healthy Public Policy)
- Increasing engagement with the school community (Partnerships)

- Collecting data and information to inform future initiatives (Research)
- Improving access to injury prevention resources for vulnerable populations (Advocacy)
- Monitoring the impact of our injury prevention initiatives (Evaluation).

### **INTERVIEWS**

All CSL team members provided input and direction via one-to-one interviews and in-depth team discussions. Every member of CSL's team has contributed to the document and its elements.

As well, CSL Advisory Council members have provided input and feedback on all elements of the Plan through their participation in a focus group held in January 2022.

As with insights offered by survey respondents, many observations made during the focus group discussion will be used to help inform CSL's operational plan.



# CONCLUSION

Our goals are strategic and well informed, and we are committed in our focus to reduce the incidence and severity of injuries in children and youth.



# CONCLUSION

For the next three years CSL will continue to be guided by the principles that have underpinned our work since the program's inception:

- **Our work is evidence-based.** We use the best available evidence and consult with our partners and key interested parties when planning, implementing, and evaluating prevention programs. Our work is designed to generate evidence and high-quality initiatives. Our evaluation efforts inform future program plans and improve current programming.
- We focus on unintentional injuries in children and youth. We strive to reduce the incidence and severity of unintentional injuries by using multiple strategies and minimizing disparities.
- We are committed to our Maritime-wide mandate and support the Atlantic region when appropriate. We strive to thoughtfully link with our regional community and partners and aim to build our programming to be equitable to all Maritime Provinces (and Atlantic provinces when appropriate).
- We are solution focused to improve practice in the unintentional injury field. We know that we are more likely to find, and help others implement, useful, timely, targeted, innovative, and sustainable

solutions when we use a variety of approaches, address policy-level interventions, and promote evidencebased strategies.

• We believe in the value of collaboration and partnership. We strive to link with our partners and other

key interested parties in all that we do to improve our programming and support their injury prevention initiatives for a united voice.

Child Safety Link embarks on this period in our history of service with a commitment to planning, resiliency, adaptability, and being progressive in our approach. We believe that maintaining focus on the priorities and strategies summarized in the document







# SWOT ANALYSIS

Elements of the SWOT analysis serve as the building blocks for the strategic plan. The following content derives directly from the input of those closest to the life and work of the program — staff and members of the advisory council, as well as partners and key interested parties.

### **STRENGT**

- Partnerships, particularly with family support service providers
- IWK relationship strengthens advocacy work and brand reputation
- Subject matter expertise
- Credibility and brand recognition
- Media relations and public communications
- Culture of external collaboration
- Clarity of mandate
- Knowledge-based resources
- Leadership in transportation safety

### WEAKNESSE

- Small size relative to large mandate
- Limited capacity to undertake research & evaluation
- Breadth of subject matter and external expectation that CSL covers it all
- Absence of high level government relationships outside Nova Scotia
- Clarity of targeted, measurable outcomes and specifics of tactical plans
- Market differentiation from other programs
- Absence of cogent, shared, impact-driven vision that connects to operations
- Limited market penetration outside Nova Scotia
- Bureaucratic impediments as a function of being part of IWK and provincial health systems



### **OPPORTUNITIES**

- Broaden subject matter expertise based on injury incidence in key areas
- Broaden funding base to include new investments and partners
- Focus on underrepresented groups
  - develop greater multi-lingual capacity
  - tailor specific approaches for financially vulnerable populations
- Expand research and evaluation capacity
  - help secure academic research Chair for Injury Prevention in the region.
- Increase profile of child and youth injury prevention
  - build relationship with Public Health
  - increase presence in school systems (and partners in schools)
  - harness digital channels to support all pillars (web, social media, digital content delivery, interactive media)
- Forge partnerships in NB and PEI (within our current mandate)
- Expand our current mandate to include NL
- Become leaders nationally in key specialties (e.g. car safety, poisoning and falls, impacting vulnerable populations)

### **THREATS**

- Emergent safety issues for which we are not equipped to respond
- Public sector funding source largely concentrated in one province
- Unpredictability of externally-sourced research data
- Inability to execute effective evaluation to demonstrate CSL's impact
- Poachable staff and absence of succession plan and systems to preserve "organizational memory"
- Vulnerability of health promotion as a funding priority when there is pressure on the health system's resources