TAUPO SAFE DISTRICT

Project Plan

Vision: Taupo - Safe District to live, work and play



Prepared for the Taupo Safe District Coalition/Steering Committee (March 2009)

Taupo Safe District – Project Plan

TABL	E OF CONTENTS	Page
1.	Taupo Safe District - Project Plan - Strategy	3
1.1.	Taupo District – Summary	3
1.2.	Demographics	3
1.3	Economy	4
2.	Strategic Plan	6
2.1	Vision	6
	2.1.1 Logo	6
	2.1.2 Our name	6
	2.1.3 Why Develop the Strategy?	6
	2.1.4 The Approach	6
2.2	Governance / Organisational Structure	7
	2.2.1 Background	7
	2.2.2 Appointment of Community Projects Officer – Safe Communities	8
	2.2.3 Coalition Steering Group	8
	2.2.4 Working Groups	8
2.3	Statutory Responsibilities	11
2.4	Strategic Alignment; Local & National	11
2.5	Measuring Success	11
3.	The Safe Communities Designation Plan	13
3.1	World Health Organisation International Safe Community Status	13
3.2	Objective	13
3.3	Goals	13
4.	Communication Plan	19
5.	Taupo Safe District Designation: Check Sheet	21
6.	Timelines	22
7.	Taupo Safe District - Flow Chart	24
Appen	dix "A" Injury Data	25
Appen	dix "B" Terms of Reference	29
Appen	dix "C" Community Safety Survey Results - 2007	31
Appen	dix "D" Safe Communities WHO Accreditation Criteria	40

1. Taupo Safe District - Project Plan - Strategy

This plan is delivered in two parts.

The strategic plan sets out the purpose, governance structure, strategic alignment; goals/objectives and activities for the project

The Safe Communities Designation Plan sets out the activities and timeline for achieving designation as an International Safe Community in March 201

1.1 Taupo District - Summary

The Taupo District is a vibrant, exciting, and magical place to live, work, visit, and play. The District prides itself on being a world class tourist destination and event location. Geographically the district has Lake Taupo as a centre point with mountains in the south and the townships of Mangakino to the north/west, Turangi to the South and Taupo on the northern bay of the lake. The Waikato River starts from Lake Taupo and winds it way north encompassing part of the Taupo District and Mangakino.

The surrounding rural landscape is ideal farming country and host to many walking and cycling tracks through native bush and pastoral lands. The district is situated on the volcanic plateau, providing numerous energy outlets which continue to be tapped, and there are many tourist spots offering geothermal activity. The world renowned Huka Falls, and an abundance of sporting and recreational grounds, race tracks, (motor – A1GP, horse motor cross, cycling) plus event centres, libraries, heated pool complexes and numerous cafes, restaurants, bars, and reserves/parks cater for both visitors and residents.

The lake and river offer many attractions from camping, boating, yachting, fishing, pleasure craft, swimming, kilometres of beaches, etc: so in essence the district is a wonderful placed to live, work, visit and play.

1.2 DEMOGRAPHICS

At the time of the 2006 Population Census, Taupo District was home to 32,420 people of which 68% identified themselves as "European" – the same as nationally – with 12% identifying as "New Zealanders" (11% nationwide). The main difference between ethnic diversity locally and nationally was the much larger proportion of Māori in the district's population. Māori made up more than one-quarter (28%) of the district's residents, almost double the 15% nationally. 1

The age distribution of Taupo District's population is similar to the national picture with two exceptions. In 2006, young adults were under-represented, with 15-29 year-olds making up 17% of Taupo residents compared with 20% nationally. Conversely, 60-74 year-olds were over-represented (13% locally and 11% nationwide). All other age groups were within 1 percentage point of their national proportions.

¹ Percentages add to more than 100 because individuals could identify with more than one ethnic group and all were counted.

Taupo Safe District - Project Plan

According to the NZDep2001 index of deprivation² the Taupo District is more socioeconomically deprived than New Zealand as a whole. In Taupo District, five area units -Turangi, Rangipo, Rangitaiki, Wairakei-Aratiatia and Mangakino – were identified as being among the 10% most socio-economically deprived areas in New Zealand (decile 10). Three more area units - Taharua, Central Taupo and Tauhara - were ranked as decile 9. The least deprived area units in the district were located in Taupo town: Acacia Bay (decile 1), Lakewood, Wharewaka and Waipahihi (decile 2), and Rangatira Park (decile 3).

1.3 **ECONOMY**

The five major industries are the primary industries of forestry, geothermal production and farming which are reliant on the natural resources of the district; and the secondary industries of tourism and retail which also rely on the natural environment to attract people to the location.³ Predominantly, tourism is the major driver of the economic growth of Taupo town and tourist numbers in the district are expected to increase by 40% between 2006 and 2026. To service this increased growth the occupational composition in Taupo is expected to continue to be concentrated in the areas of accommodation, restaurants and retail whilst agriculture, construction, business services and forestry will also remain dominant. As the town's economy is based around these industries, the occupational structure matches employer's needs. Taupo District differs significantly from the national occupational structure, with the largest employers being traditionally lower paying industries. The proportion of workers in retail, accommodation, cafes and restaurants is much higher than national trends of occupational composition.

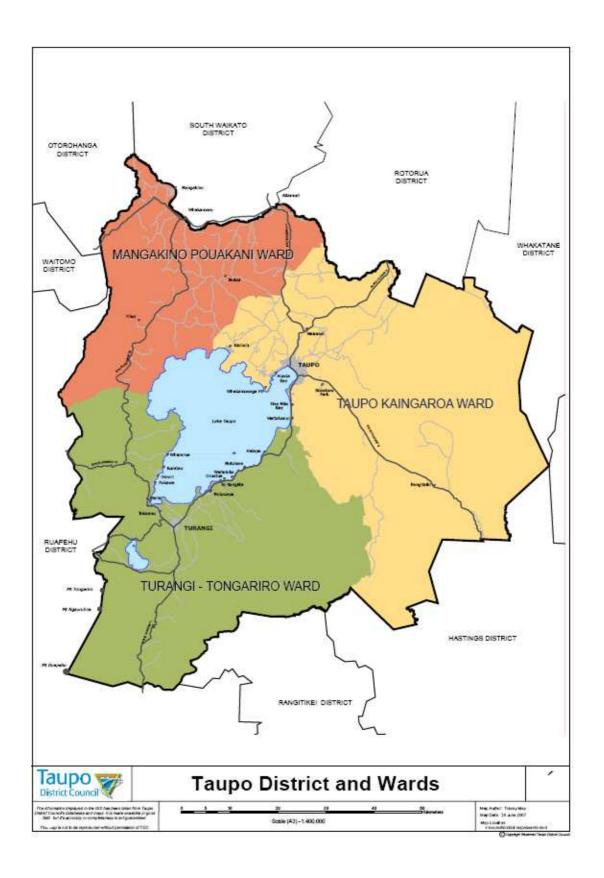
In 2006, the district's main industries for employment were as follows.

- Accommodation and food services employed 12% of working residents (double the national proportion).
- The retail trade also employed 12% of Taupo District workers (10% nationwide).
- Primary industry was a more important employer in the district than across the country, with agriculture, forestry and fishing employing 11% of working residents (7% nationally).
- The construction industry employed 10% of the workforce locally (8% nationally).
- That was followed by manufacturing (9% of the district's employed residents compared with 12% nationwide).
- Education employed 6% locally and 8% nationally.
- Health care and social assistance also employed 6% of Taupo's working residents, a smaller proportion than the 9% across the country.
- The last industry to employ a substantial proportion of Taupo's workers was professional, scientific and technical services (5% in Taupo, 8% nationally).

² The NZDep2001 index of deprivation was created from data from the 2001 Census of Population and Dwellings. The index describes the deprivation experienced by groups of people in small areas. Nine deprivation variables were used in the construction of the index, reflecting eight types of deprivation. The variables used were the proportions of people: aged 18-59 years receiving a means-tested benefit; aged 18-59 years unemployed; living in households with equivalised income below an income threshold; with no access to a telephone; with no access to a car; aged less than 60 years living in a single-parent family; aged 18-59 years without any qualification; living in households above equivalised bedroom occupancy threshold; and not living in own home. ving in households above equivalised bedroom occupancy an establish.

(Tourism Research Council New Zealand, New Zealand Regional Tourism Forecasts 2004-2010).

Page 4 of 43



2. STRATEGIC PLAN

2.1 VISION "Taupo Safe District to live, work and play"

2.1.1 Logo



The logo design shows the three Central Plateau Mountains (Ruapehu, Ngaurohoe, and Tongariro) which represent visitors to and residents of the Taupo District. The long arm of Ruapehu encompasses Taupo as a protective measure, with "Safe" reflecting the injury, safety and crime prevention goals. The use of the macra over the word Taupo demonstrates recognition and incorporation of the various hapu in our District. The background shading is an abstract shape of Lake Taupo and the district. The use of the colour Blue depicts the sparkling waters of the lake and rivers; the use of green depicts the environmental aspects of the District; and the orange/red colouring represents our vision

2.1.2 Our Name

Taupo District Council recently created a Trust, known as "TAUPO SAFER COMMUNITY TRUST." To eliminate any possible confusion between the role of the Trust and the Safe Communities work towards accreditation⁴ all work in progress and future correspondence by the Coalition will be designated "**Taupo Safe District Project**" (TSDP). To clarify further, whereas the TSDP covers the whole of the Taupo District in terms of crime prevention, injury reduction and safety prevention agendas, the Trust's mandate deals with issues of safety and crime prevention matters in Taupo Town only. The "Trust" is one entity working with us toward the accreditation process and all communication relating to the TSDP will reflect this distinction.

2.1.3 Why Develop the Strategy?

The Taupo Safe District Strategic Plan offers the framework to provide a co-ordinated community and agency response to crime prevention, injury prevention, and road safety. It promotes our four key goals and a number of objectives for the District to work towards realising our vision of "Taupo – Safe District to live work and play".

Research into the Taupo Safe District injury data has been carried out and a table showing this is included as (<u>Appendix "A"</u>) attached. Analysis of these statistics, reveal a continuance of national observations in that falls are our most prevalent injury cause, followed by motor accidents, poisonings, assaults and self harm. It is from this, and with assistance from the Safe Communities Foundation New Zealand and partners TDC, LDHB, ACC and NZ POLICE, that Taupo Safe District Project was promulgated, and our goals defined.

In addition, Taupo District residents say they want a safe district, a place they can live "free from crime, violence, abuse and injury" and where they are "safe at home and in the community" See Survey Results attached as (<u>Appendix "C"</u>)

⁴For the purposes of this document "accreditation" refers to accreditation by the World Health Organisations an International Safe Community,

2.1.4 The Approach

The Taupo Safe District Strategy will take a collaborative approach to planning for a safer Taupo District by building on current work performed by local and central government, non government and community agencies in the District. The objective of this collaboration is to identify all current actions occurring with a view to identifying gaps in existing planning and delivery.

The Taupo Safe District Strategy sets out its principles of engagement as:

1) Predominantly Proactive

Where possible agencies will be proactive in their approach to planning so as to promote prevention

2) Collaboration and coordination

In order to strengthen the capacity of agencies to deliver on the project objections, collaboration and coordination between Central and Local government, Iwi, Non-Government, Community organisations and networks is essential

3) Collective Action

The whole community has a role to play in injury prevention, crime prevention, road safety and safety promotion.

2.2 GOVERNANCE/ORGANISATIONAL STRUCTURE

2.2.1 Background

This council is part of COBoP (Community Outcomes Bay of Plenty) which is a regional Collaboration around Community Outcomes. Safe Communities was identified as one of the three themes common to all participating Local Authorities.

In September 2006, the CCBoP the World Health Organization Safe Community working party hosted a workshop in Rotorua to discuss the concept of accreditation as an International Safe Community for both Rotorua and Taupo. This meeting was attended by a range of key stakeholders including staff from the Safe Community Foundation New Zealand, Police, ACC, Lakes DHB, DIA, Tauranga DC, MSD, Dept of Corrections and Chamber of Commerce.

An agenda item to Council on 28 November 2006 provided information regarding Safe Communities and supported further investigation into the feasibility of WHO Safe Community Accreditation.

WHO Safe Community model creates an infrastructure in local communities that address safety initiatives through building of local partnerships.

"A safe and caring community" and "safe and secure" were identified as important Community Outcomes for those living in the Taupo District.

On 26 February 2008 TDC agreed to proceed with WHO Safe Communities Accreditation process for the Taupo District, along with funding partners NZ Police, ACC, and Lakes DHB.

2.2.2 Appointment of Project Manager – Safe Communities

The first step towards this was the decision to appoint a Project Manager - Safe Communities to undertake the work required to apply for accreditation. The appointee works from the offices of the Community and Recreation Group at the Taupo District Council. This is a district wide initiative and encompasses Turangi, Taupo and Mangakino townships and rural areas. It includes the Turangi/Tongariro Safer Community Council, the Mangakino Safe Community Group and the Taupo Safer Communities Trust.

2.2.3 Coalition Steering Group

The second step was the formation of the Coalition Steering Committee⁵, with representatives from the ACC, LDHB, NZ Police, Bay of Plenty District Health Board, NZ Fire Service and TDC, with scope to appoint others as required. This voluntary collaboration of key partner agencies⁶ is tasked with driving the overall strategic direction for injury prevention, safety prevention and crime prevention within the district, through the Taupo Safe District Project. Committee elects own chairperson.

With the majority of the organisations represented in the TSDP also being involved in service delivery activities or in networks of providers, the Project links directly with working groups to ensure that priorities are being addressed, duplication avoided and gaps in service delivery identified.

2.2.4 Working Groups

The third step is to establish Working groups to focus on priority areas of delivery as identified by the Coalition/Steering Group. The Working groups may be existing networks/coalitions, or may be newly formed to address a need or issue. Groups will consist of agencies that have interests/activities and responsibilities in the particular area of focus. Once the Group is established, a lead agency will be nominated to coordinate the activities of the group.

They will work with the Project Manager to:

- o Collect and analyse relevant data
- o Identify high-risk and vulnerable populations and locations
- o Identify existing services, programmes stock take
- o Identify existing formal and informal networks, forums and other collaborative issues
- o Prioritise , support, advocate and participate in services and programmes
- Identify monitoring and evaluation mechanisms.

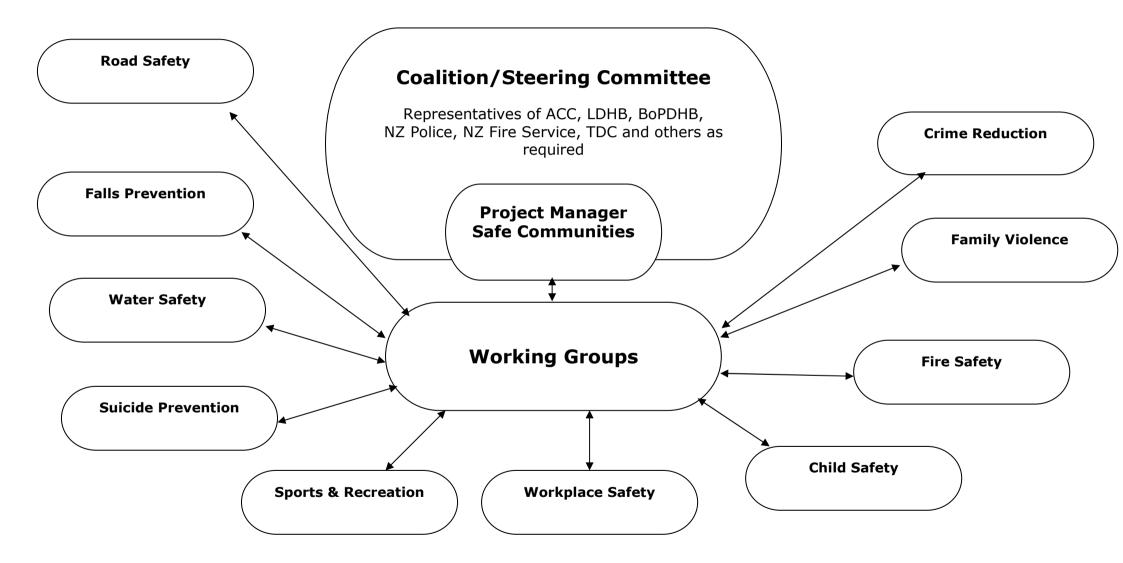
The following diagram demonstrates the proposed Governance/Organisational Structure, which is based on the Safe Community Foundation Guidelines.

⁵ Terms of Reference (<u>Appendix "B"</u>) describe the broad role of the Coalition Steering Committee for the delivery of the Project (TSDP).

⁶ Membership can change as required and the Project is an informal collaboration with no elected office bearers, apart from Chairperson.



Proposed Organisational Structure for Taupo Safe District Coalition



2.3 STATUTORY RESPONSIBILITIES

The project supports activities undertaken as required under legislation. In particular:

- Local Government Act (2002)
- o Resource Management Act (1991)
- Health Act (1956)
- o Crimes Act (1961
- o Children, Young Persons and Families Act (1989)
- o Land Transport Act (1998)
- o Sale of Liquor Act (1989)

2.4 STRATEGIC ALIGNMENT; LOCAL AND NATIONAL

Increasingly, central government is taking the lead in developing over-arching strategies in the areas of injury prevention, crime prevention and community safety. These strategies form the basis for developing local area initiatives and frequently set the parameters and criteria for funding. Of particular relevance to this project are:

- o Crime Reduction Strategy (2000)
- o NZ Injury Prevention Strategy (2003) and (2005/08) Implementation Plan

Other related national strategies include:

- Police Alcohol Action Plan (2006)
- o Fall Prevention Strategy (2005-2015)
- o Drowning Prevention Strategy (2005-2015)
- Te Rito Family Violence Strategy (2002)
- o NZ Suicide Prevention Strategy (2006-2016)
- o Road Safety to (2010)
- o Workplace Health and Safety Strategy for New Zealand to (2015)

2.5 MEASURING SUCCESS

In-depth analysis of data and statistics from NZ Police (Crime, Violence, Accident, Alcohol), ACC (Claims), Lakes District Health Board (Hospital Admission and Injury), Land Transport (Road, Motor, Cycle, Pedestrian) MOH (Youth, Health,) Ministry of Justice, SPARC, ALAC, Government Departments, other organisations, sporting bodies, TDC and residential groups, has been sourced, and will provide a benchmark for which futures measurements will be made.

Progress and success with the strategy and project will also be regularly measured and reviewed using the three yearly Taupo District Council survey on safety issues. From this and some or all of the above mentioned data sets, we will know we are succeeding when:

Rates of Crime and Injury Decline

Rates of youth offending decline
Child abuse and family violence decrease (expected initially to increase)
Vehicle crashes decline including alcohol (as a mitigating factor)
Analysis of Alcohol intake of the injured shows a decline
Fire injuries are reduced
ACC reports/payouts are reduced

Taupo Safe District – Project Plan

People feel safe at all times in the Taupo District

Analysis of surveys (3 yearly) by TDC and Environment Waikato who and increase in perceived feeling of safety in our homes, neighbourhoods and town centre

We are well prepared for natural hazards.

We have excellent safety networks, support services people and services

Maintain strong neighbourhood support groups throughout the district

Excellent support and prevention services are available

We are confident in our Police, Judiciary and other Justice services

Statistics and data will be reviewed no less than on an annual basis so that we have a constant benchmark for measuring our progress

3. The Safe Communities Designation Plan

3.1 World Health Organization International Safe Community Status

The World Health Organization's International Safe Community Accreditation recognises the efforts of communities, their organisations and individuals in working together to promote safety and reduce incidence and/or severity of injuries. The Taupo District is working toward applying for accreditation in 2010. The Taupo District is being guided in its work by the Taupo Safe District Strategy and Project Plan. Upon accreditation the programme is sustained and on going, working towards re-designation in a further 5 years. The criteria for accreditation is contained in (Appendix "D")

3.2 OBJECTIVE

The objective of this plan is to meet the criteria for International Safe Communities designation, and demonstrate that effective targeted programmes and activities are in place and that these align with relevant national strategies

3.3 GOALS

Prior to the commencement of this project a number of activities⁷ were conducted in order to identify the following five key goals for achieving Taupo Safe District

These goals are to

- o Lower injury in the Taupo District by raising the awareness and commitment to injury prevention and safety promotion
- o Improve safety on our roads
- Embrace safety through preventative and supportive crime prevention activities
- o Encourage and support safety and injury prevention through collaboration and coordination.
- o Achieve International Safe Communities designation.

The following section provides an outline of the 5 goals

- Implementing and achieving
- o A communications Plan
- o Taupo Safe District Designation Check Sheet
- o Timelines
- o Flow Chart

⁷ Surveys on safety issues; research and in-depth analysis of data on injuries, priority scoping exercises, and directive from the Coalition/committee members

GOAL 1	Link to WHO Safe Community Criteria	Links to NZIPS
To Lower Injury in the Taupo District by raising the awareness and commitment to prevention and promotion of safety	, , ,	information. (6) Strengthen injury prevention capacity and

- o Provide support to locally led initiatives that make significant contributions to reducing the incidences of injury
- o Support and develop initiatives that prevent sports injuries, prevent falls at all ages and reduce childhood injuries
- o Ensure integrated approach to alcohol related harm, with crime prevention and road safety
- o Support neighbourhood-based initiatives which aim to reduce injury
- o Support initiatives targeted and minimising the rate of suicide and self harm (align to LDHB suicide prevention plan)
- o Disseminate injury data from the Safe Communities Foundation New Zealand, The Injury Prevention Research Centre. The Injury Prevention Research Unit. ACC. Lakes District Health Board, Land Transport New Zealand and New Zealand Police
- o Analyse and utilise LDHB Emergency Department injury data annually, ACC injury claim data, Alcolink and other Police data
- o Use all available data to determine injury priorities for the District and publicise these via newsletter and use of local media.
- o Establish links to partners websites
- o Ensure all Maori Providers have access to Maori Injury data.
- o Liaise with partners on best practise injury prevention information

GOAL 2	Link to WHO Safe Community Criteria	Link to NZIPS
Improve safety on our roads	Focus on environments which are responsible for higher than average injury rates (3)	Raise awareness and commitment to injury prevention (1) Integrate injury prevention activity through collaboration and co-ordination (5)

- o Support the implementation of the Taupo District Road Safety Strategy
- o Support initiatives targeted and minimising alcohol-related traffic injuries
- o Support community based initiatives which enhance road safety i.e. Drink Drive Campaigns, Speed near Schools, Cycling strategies, Intersection Behaviour, Operation Centreline, Highway Crash reduction, Kidz n cars, Reversing Criteria, etc
- Ensure interventions are targeted to prioritised vulnerable groups

GOAL 3	Link to WHO Safe Community Criteria	LINK TO NZIPS								
Embrace safety through preventative and supportive crime prevention activities	Long term sustainable programmes covering both genders and all ages, environments and situations (2) Programmes that target high risk groups and environments, and promote safety for vulnerable groups (3) Programmes that document frequency and cause of injury – both un-intentional (accidents) and intentional (violence and self directed) (4)	systems and products (3)								

- o Provide support to locally led initiatives that make significant contributions to reducing the incidence and effect of crime.
- o Maintain a programme of training and community awareness in the CPTED principals including safety audits for all appropriate staff at Taupo District Council, Mangakino and Turangi Offices and liaison with Police in the three townships
- Support crime prevention and alcohol-related harm initiatives which seek to reduce violence and increase the safety of Taupo District as a whole
- o Support initiatives which reduce the incidences of family violence, child abuse and elder abuse
- o Support neighbourhood based initiatives which aim to reduce crime and increase the opportunity for neighbours to connect.
- Support initiatives around the restoration and wellbeing of victims
- o To support reintegration into the community of offenders
- o Ensure collaboration with Councils in each township on Urban Design safety measures

GOAL 4	Link to WHO Safe Community Criteria	Links to NZIPS
Encourage and support safety and injury prevention through collaboration and coordination		Advance injury prevention knowledge and information. (6) Foster leadership in injury prevention (10)

- o Ensure there are collaborative relationships built between central government, local government, iwi, non-government organisation and the community sector
- o Increase the commitment to Injury prevention and safety promotion networks within the partners organisations, ensuring current programmes address priorities for both genders, cultures, all ages, environments and situations in the community
- Seek long-term sustainable funding for community safety programmes
- Support community groups to undertake and develop intervention projects
- o Ensure all projects initiated through the Taupo Safe District are evaluated
- o Develop a media strategy to enhance public awareness around perception of crime, safety and injury prevention activity

GOAL 5	Link to WHO Safe Community Criteria	Links to NZIPS
International Safe Communities Designation	Ongoing participation in national and international Safe Communities networks (6)	

- o Develop an application proposal for accreditation as an International Safe Community by the WHO that incorporates evaluation results of current programmes
- o Liaise with Safe Communities Foundation (NZ) (based in Auckland) NZIPS and IPANZ
- o Report and disseminate information on the achievements of Project teams to stakeholders, locally, nationally and internationally
- o Encourage participation in the annual Community Safety Awards
- o Ensure ongoing progress to culminate with re-designation in 5 years.

4. Communication Plan

Target Audiences	Activities	Frequency: by whom						
Mayor and Councillors	Formal Reporting to Council	Three Monthly by Project Manager						
	Councillor(s) assigned to Project Engage the Mayor in press statements Meetings and public relations – to include both Taupo Safe District Project Plan, covering the wider district and the Taupo							
Davida ava	Safer Communities Trust.	Du nauta au mambaua of the goalities						
Partners	Minutes and Project Manager's Reports provided back to the appropriate agency managers	• •						
	Funding Contract Reports to funders	By Coalition and Project Manager						
	Promotion of Safe Communities activities through partner internal communication media – establish an informal interagency	· ·						
	communication "team"	By inter-agency communications team						
Iwi/Maori	Formal reporting to appropriate agencies using TDC representative Dylan Tahau Ensure buy-in by Hapu	Three-monthly by Coalition and Project manager and Dylan Tahau						
Working Group Stakeholders	Minutes and updates – personal contacts. Dealing with priorities as required	By Project Manager						

Communications Plan (Continued)

General Public	Web Page on TDC website	TDC Communications and Project Manager
	Ongoing updates to be provided to the public via local newsletters and media release on a monthly basis and on various topics.	TDC Communications and Project manager
	Arrange Media release on topical issues, activities and events using local newspapers, radio, council newsletters to rate-payers etc Turangi, Mangakino and Taupo locally when required	TDC Communications and Project Manager
	Involvement with various Community Groups in District attend meetings, speak on injury, safety and crime prevention, projects and strategies.	Project manager
Safe Communities Foundation and Safe Communities Projects	Informal communication concerning Designation Process Data and Resources	By Project Manager
	Periodic meetings and information-sharing with neighbouring Safe Communities Projects	By Project Manager

5. Taupo Safe District Designation: Check Sheet

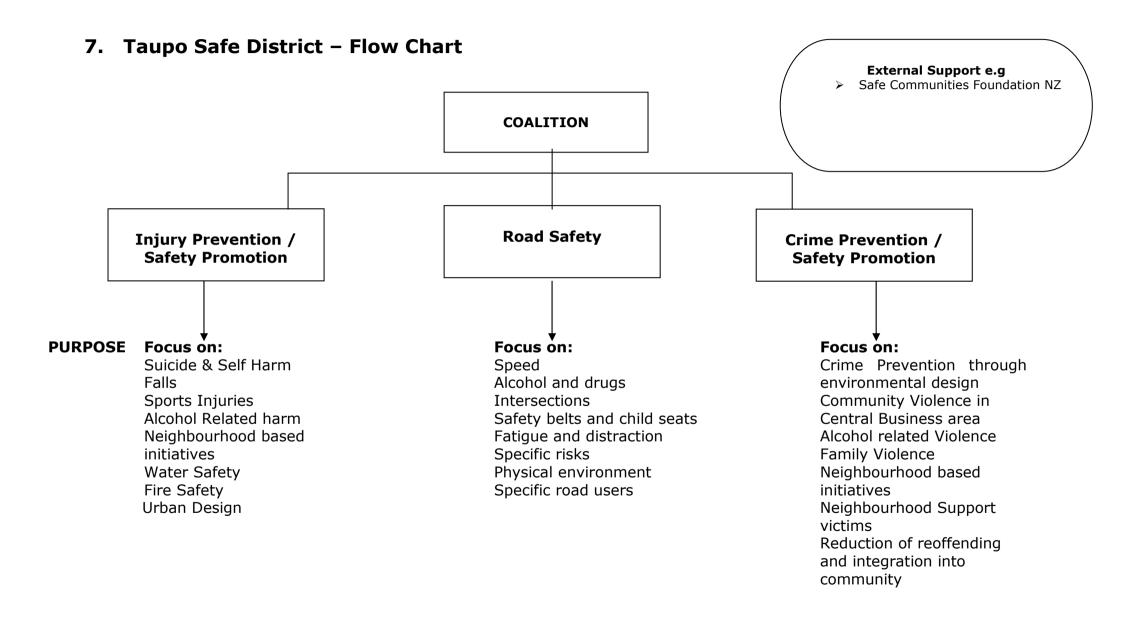
The questions	Activity	By Whom?	By When	Criteria
Who are we?	Governance structure Partners Key Stakeholders Strategic Plan	Governance Group/Coalition- Committee/	December 2008	1
What is our community What are the defining features? What is our history and where are we going? What's happening in		Project Manager (and Coalition)	March 2009	4
crime and injury? What are our priorities? Where/who are our highrisk environments and populations?	Identification of priority focus areas Establish priority sector working groups (or use the existing structures)	Project Manager Coalition and confirmed by key stakeholders	May 2009	3
What's being done? By whom?	Stock take: identify services, networks, programmes and other activities that are addressing the high priority areas	Project Manager with working groups	August 2009	2
How are we doing? What's working well? What's missing?	Monitoring and Evaluation: Identification of monitoring and evaluation mechanisms	Project Manager with working groups	August 2009	5
How do we become and connect to the safe communities' network?	Application for Designation Engagement in national and international network	Project Manager	February 2010	6

6. Timelines

Application for Designation Timeline	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
	08	09	09	09	09	09	09	09	09	09	09	09	09	10	10	10	10	10	10
Governance																			
Confirm governance structure																			<u> </u>
Identify partners																			<u></u>
Identify key stakeholders																			<u> </u>
Strategic Plan																			<u> </u>
Goals and Objectives																			<u> </u>
Methodology																			
Roles and Responsibilities																			
Communications Plan																			
Links to local and national strategies (such as NZIPS)																			
Confirm with key stakeholders/community																			
Data Gathering and analysis																			
Population demographics																			
Business and Environment factors																			
Crime and injury data																			
Key informant interviews																			
Identify priority areas																			
Establish or work with priority working groups																			
By population type																			
By location																			
By industry/activity																			
By incidence																			
Confirm with key stakeholders/community													_						

Taupo Safe District – Project Plan

Application for designation Timeline	Dec 08	Jan 09	Feb -0	Mar 09	Apr 09	May 09	Jun 09	Jul 09	Aug 09	Sep 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10	Apr 10	May 10	Jun 10
Stocktake																			
Broad overview																			
Detailed analysis of priority areas																			ı
Services/programmes/activities																			ŀ
Target groups																			
Networks and coalitions																			
Gaps, duplications, overlaps, barriers																			
to access																			ı
Evaluation																			ı
Evaluation mechanisms																			ı
Application for Designation																			
First draft																			ŀ
Final draft																			
Submit application																			
Site visit																			
celebration																			



APPENDIX "A" INJURY DATA

Gender by Discharge Year, Injuries, in Taupo TLA, between 1998 and 2007														
Gender	Discharge Year													
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007				
F	192	128	125	113	105	119	108	121	144	162	1317			
M	262	259	221	212	224	202	181	154	205	230	2150			
Total	454	387	346	325	329	321	289	275	349	392	3467			

Ethnic Group by Discharge Year, Injuries, in Taupo TLA, between 1998 and 2007											
Ethnic Group					Dischar	ge Year					Total
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
Asian	*	*	*	*	5	*	*	*	5	*	21
European	266	245	202	205	203	203	201	164	234	243	2166
Maori	138	121	110	100	106	104	78	97	93	125	1072
Other	40	16	22	14	8	3	7	8	11	14	143
Pacific Island	8	5	10	6	7	10	*	4	6	8	65
Total	454	387	346	325	329	321	289	275	349	392	3467

^{*} Values less than three have been hidden for privacy

External Cause	T				Dischar	no Voor			2007		Total
External Cause	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	Total
A -l	75										
Adverse Effects	/5	49	59	58	64	59	58	46	66	84	618
Cut/Pierce	36	39	27	21	28	20	24	25	34	20	274
Drowning	*	*	*	*	*	*	*	*	*	*	
Fall	128	123	104	87	91	86	91	77	100	120	1007
Fire/Hot object or	7	5	5	7	3	4	*	*	4	6	44
substance	1 1										

Firearm	*	*	*	*	*	*	*	*	*	*	4	
Machinery	7	11	5	7	6	3	*	3	8	6	58	
Motor Vehicle Traffic	45	34	33	32	32	33	37	40	32	44	362	(2)
Natural/Environmental	0	10	10	٥	7	٥	3	6	5	6	72	\cup

Firearm	*	*	*	*	*	*	*	*	*	*	4	4
Machinery	7	11	5	7	6	3	*	3	8	6	58	3
Motor Vehicle Traffic	45	34	33	32	32	33	37	40	32	44	362	\mathbf{I}_{C}
Natural/Environmental	9	10	10	8	7	8	3	6	5	6	72	
Other Land Transport	26	25	24	24	19	19	15	12	20	21	205	3
Other Specified	7	9	11	9	7	10	8	3	10	10	84	4
Other Specified, nec	*	*	*	4	4	*	*	*	*	*	18	3
Other Transport	*	3	*	*	*	3	3	4	3	5	24	4
Overexertion	14	6	7	9	9	8	4	8	6	7	78	3
Pedal Cyclist, other	14	6	11	8	7	8	3	5	4	7	73	3
Pedestrian, other	5	3	*	*	*	*	*	*	*	*	13	3
Poisoning	39	22	20	21	15	22	10	18	26	18	211	1 (
Struck by or against	31	35	20	22	32	28	18	20	21	24	251	
Suffocation	*	*	*	*	*	*	*	*	*	*	10) (
Unspecified	5	3	4	6	4	9	8	4	3	10	56	3
Total	454	387	346	325	329	321	289	275	349	392	3467	7

* Values	less	than	three	have	been	hidden	for	privacy
----------	------	------	-------	------	------	--------	-----	---------

Location by Discharge Year, Injuries, in Taupo TLA, between 1998 and 2007											
Location					Dischar	ge Year					Total
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
Farm	13	10	7	4	13	10	8	10	15	16	106
Home	155	121	88	95	86	89	75	74	91	95	969
Industrial and construction	16	14	14	11	11	6	*	6	8	6	94
area											
Other specified place of	14	25	18	21	45	28	20	23	20	23	237
occurrence											
Residential institution	8	14	11	4	*	3	*	*	10	17	71

School, other institution and public administrative area	*	6	6	40	69	67	66	57	81	94	486
Sports and athletics area	28	23	26	21	26	26	17	14	25	21	227
Street and highway	47	17	6	23	37	41	40	44	39	55	349
Trade and service area	58	23	3	10	*	6	4	5	10	7	128
Unspecified place of	115	134	167	96	39	45	56	40	50	58	800
occurrence											
Total	454	387	346	325	329	321	289	275	349	392	3467

^{*} Values less than three have been hidden for privacy

A	ge Group by	/ Dischar	ge Year,	Injuries, i	in Taupo	TLA, bet	ween 199	8 and 20	07		
Age Group					Dischar	ge Year					Total
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
00-09 years	78	53	64	39	36	28	25	31	36	29	419
10-19 years	78	66	43	54	46	56	47	41	55	64	550
20-29 years	66	56	53	56	57	47	44	36	49	50	514
30-39 years	48	70	39	42	45	52	22	32	41	48	439
40-49 years	57	28	38	33	39	42	30	35	36	42	380
50-59 years	35	25	28	20	22	24	30	23	34	36	277
60-69 years	45	31	27	26	37	27	34	22	26	44	319
70-79 years	27	31	30	39	27	27	33	32	41	36	323
80-89 years	18	20	21	13	17	12	20	22	27	33	203
90+ years	*	7	3	3	3	6	4	*	4	10	43
Total	454	387	346	325	329	321	289	275	349	392	3467

^{*} Values less than three have been hidden for privacy

Lengt	Length of Stay by Discharge Year, Injuries, in Taupo TLA, between 1998 and 2007										
Length of Stay					Dischar	ge Year					Total
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	

Taupo Safe District – Project Plan

1 day	194	168	141	115	118	129	117	107	122	138	1349
2 days	75	62	51	61	75	57	4 8	38	59	59	585
3 days	39	31	22	34	29	37	24	22	34	46	318
4-7 days	74	54	71	49	47	51	52	55	61	73	587
> one week	72	72	61	66	60	47	48	53	73	76	628
Total	454	387	346	325	329	321	289	275	349	392	3467

APPENDIX 'B' TERMS OF REFERENCE

1. Purpose

The Taupo Safe District Coalition/Steering Committee will contribute to the planning and implementation of injury and safety promotion projects within the Taupo District .This area includes Turangi, Mangakino and Taupo Townships and the rural areas which make up the Taupo District TLA. The group aims to improve the quality of life of local residents and visitors to the district through its actions.

2. Vision

"Taupo - Safe District to live, work and play"

3. Function

3.1 The Taupo Safe District Coalition/Steering Committee provides information, specialist advice, guidance, support and governance and direction to the Project manager, including:

Responsibilities - strategic

- a. Creation of a long term 5 year sustainable plan for safe communities work
- b. Determining projects within the Safe Communities Umbrella network
- c. Financial oversight of the project
- d. Receiving, evaluating reports submitted by working group leaders on project progress, issues and concerns, and this includes data gathering
- e. Make decisions by general consensus on issues to progress the project
- f. Keep information flowing between partners and stakeholders
- g. Sharing of best practise in contributing to local, regional and national agendas about safety, injury prevention and crime prevention, for safe communities
- h Develop communications/media plan.

Responsibilities - operational

Support the Project Manager to:

- a. Seek Funding
- b. Manage financial aspects of the project
- c. Collate existing services and networks, so they meet local needs and progress activities to achieve designation by March 2010
- d. Promotion of Taupo Safe District activities at national Level
- e. Implement the communications/media plan
- f. Develop resources needed by the Project
- g. Inform, lobby and influence relevant organisations and community on injury prevention, crime prevention and safety issues
- h. Develop an action plan to reach the goal of obtaining WHO International Safe Community designation in March 2010 ensuring that all criteria are met, including sustainability of this work beyond accreditation.

3.2 <u>Conflict of Interest</u>

If this should arise then the member is obliged to identify and disclose it to the Relevant people in a timely and effective manner.

4. Membership

- The Taupo Safe District Coalition membership is set out in the "Strategy Project Plan"
- o A quorum will consist of 50% attendance of members.

5. **Meetings**

5.1 Schedule:

- The Taupo Safe District Coalition Group will normally meet from 10am to 12 noon on the 1st Thursday of each month at a mutually agreed venue, or as required
- Meeting dates will be set at the beginning of the year
- o Advanced notice to be given of any cancellation or changes

5.2 Minutes:

- o Will be the responsibility of the Taupo District Council
- o Agenda items will be sought a week prior to meeting
- Agenda and any reports to be considered will be circulated at least 3 days prior to the meeting
- Minutes will be circulated with two weeks of meeting taking place

5.3 Procedure:

- Minutes of previous meeting
- o Matters arising from minutes
- o Project Manager's report
- o Presentations if required
- o General Business

5.4 <u>Accountability and Reporting:</u>

 The activities of the group will be reported in accordance with the requirements of each of the participating organisations

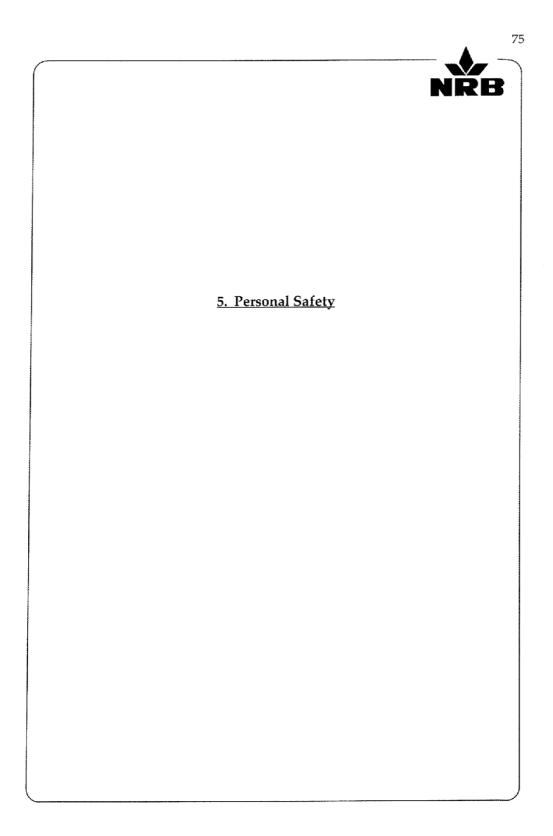
5.5 Annual Review Terms of Reference:

o To be completed by end of June each year.

5.6 <u>Community Communication</u>

The Taupo District Community will be informed regularly on issues and identified needs, by way of media release and/or consultation, which will provide an impetus to guide the coalition in prioritising relevant safety Issues for the Taupo Safe District Project. Communication by way of TDC Web Site, SCFNZ Web Site, Newsletter, Newspaper, public forum, phone call, or surveys can be used to gauge the priorities.

APPENDIX "C" COMMUNITY SAFETY SURVEY RESULTS - 2007



a. Overall Feeling Of Safety

Respondents were asked to think of their overall sense of freedom from crime, at all times of the day and night, and say how safe they feel.

Very safe

27% of all residents and non-resident ratepayers

Safe

Neither safe nor unsafe

Unsafe

Very unsafe

1%

Overall, respondents feel ...

81% of residents and non-resident ratepayers feel very safe/safe (77% in 2005), while 12% feel neither safe nor unsafe and 7% feel unsafe/very unsafe (10% in 2005).

Mangakino-Pouakani Ward respondents are more likely, than other Ward/Ward group respondents, to feel unsafe/very unsafe.

The main reasons* respondents* feel unsafe/very unsafe are:

- burglaries/intruders on property, mentioned by 53% of respondents[†]
- undesirable people around/personal safety, 39%,
- need better response from Police, 16%,
- vehicles broken into/stolen, 6%.

 $^{^{\}dagger}$ Those residents and non-resident rate payers who feel unsafe/very unsafe (N=29) - caution small base.

^{*} multiple responses allowed

SAFE AND SECURE

12.1 Community Safety

Why is this important?

Taupo District communities have said they want to encourage respect for people and property.

What are the measures?

- 12.1a Reported offences per 10,000 population and resolution rates
- 12.1b Perceived level of community safety
- 12.1c Perceived level of personal safety
- 12.1d Notifications to CYFS reported and substantiated cases of child abuse and neglect

How are we doing?

- The number of reported offences per 10,000 population in 2005/06 was 1202.6 for the Taupo Police District compared to 1035.9 for New Zealand overall. Over the six-year period 1999/00 to 2005/06 the number of annual recorded offences fell by 15% in the Taupo Police District compared to a fall of 1% at the overall national level over the same period. The resolution rate for total recorded crime in the Taupo Police District in 2005/06 was high at 55% compared to 44% at the national level.
- Survey results show that most Taupo District residents feel safe or very safe in their community.
- The percentage of Taupo residents who feel safe in their community during the daytime or after dark is similar to the Waikato regional average.
- The number of notifications of child abuse and neglect in the Taupo area has increased substantially in recent years, although in part this may be due to increased awareness within communities.

C	ode	Indicator/Measure	State	Trend	ĺ
12	2.1a	Reported offences per 10,000 population and resolution rate	8	Û	

Numbers of reported offences and crime resolution rates are useful indicators of overall crime and victimisation in the District. Crime is a topic of concern to Taupo communities, not only because people want to feel safe in their communities and homes but also because they want visitors to feel welcome and secure in the District. This indicator shows reported criminal offences per 10,000 population and resolution rates for total crime, violence and sexual offences, drug and anti-social offences, dishonesty, property damage and administrative offences. A 'recorded offence' is any incident reported to or discovered by Police where it is believed an offence is likely to have been committed. A recorded offence is considered to be a 'resolved offence' by Police when an offender has been identified and dealt with (eg, warned, cautioned or prosecuted).

Police statistics show that in the year ended June 2006 there were 6,822 offences recorded in the Taupo Police District (incorporating the Taupo and South Waikato districts). This was a fall of 6% compared to the previous year. The number of reported offences per 10,000 population in 2005/06 was 1202.6 for the Taupo Police District compared to 1035.9 for New Zealand overall. In terms of selected offence categories, administrative offences were down 32% and drug and anti-social offences were down 21%. However, reported drug and anti-social offences had been high in 2004/05 because Police took a firmer approach in dealing with drunk and disorderly offenders in town centres. There was an above average number of sex offences reported in the Taupo Police District during 2005/06, as well as an increase in property damage compared to the previous year. Over the six-year period 1999/00 to 2005/06 the number of annual recorded offences fell by 15% in the Taupo Police District compared to a fall of 1% at the overall national level over the same period. The resolution rate for total recorded crime in the Taupo Police District in 2005/06 was high at 55% compared to 44% at the national level.

Note that changes in reported offending may partly reflect public awareness and reporting of offending rather than trends in actual offending. Note also that some of the reported crime in Taupo can be attributed to victimisation of visitors to the District, which could account for approximately 10% of the difference between Taupo and national recorded offences per 10,000 population.

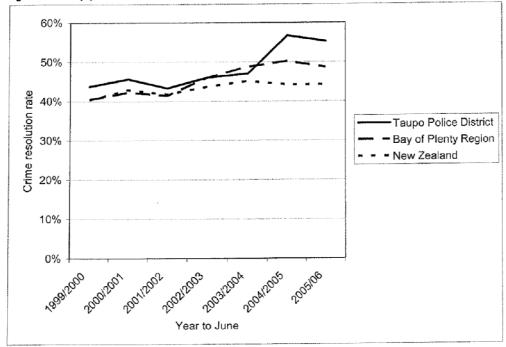
1600 1400 Offences per 10,000 population 1200 1000 ■ Taupo Police District 800 Bay of Plenty Region □ New Zealand 600 400 200 2001/2002 2002/2003 2004/2005 2003/2004 2005/06 Year to June

Figure 12.1a(i) Reported offences per 10,000 population

Source: New Zealand Police, Crime Statistics

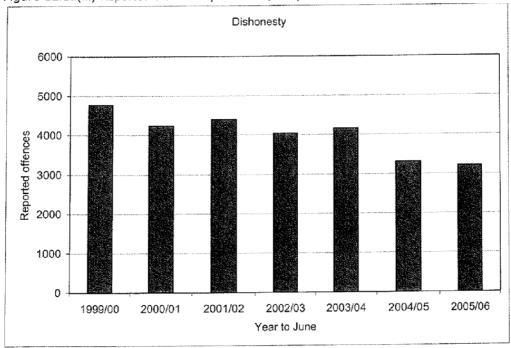
Taupo State of the District - Reference Report (November 2007)

Figure 12.1a(ii) Crime resolution rate - All crime categories



Source: New Zealand Police, Crime Statistics

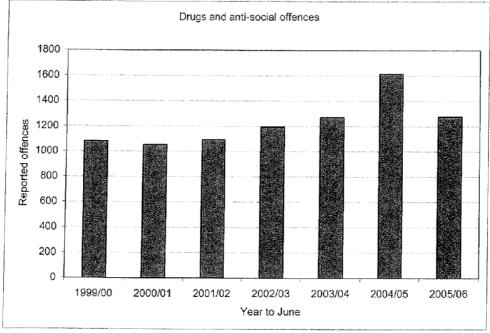
Figure 12.1a(iii) Reported dishonesty offences, Taupo Police District



Source: New Zealand Police, Bay of Plenty Crime Statistics

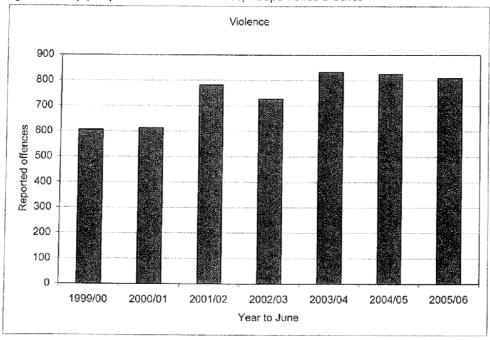
Taupo State of the District - Reference Report (November 2007)

Figure 12.1a(iv) Reported drug and anti-social offences, Taupo Police District



Source: New Zealand Police, Bay of Plenty Crime Statistics

Figure 12.1a(v) Reported violence offences, Taupo Police District



Source: New Zealand Police, Bay of Plenty Crime Statistics

Taupo Safe District - Project Plan

Taupo State of the District - Reference Report (November 2007)

Code	Indicator/Measure	State	Trend
12.1b	Perceived level of community safety	(4)	?

Results from the TDC Resident and Ratepayers Satisfaction Survey (2006) shows that District-wide, 81% of people feel safe or very safe in their community. This varies between towns but is higher overall than in 2005 (77%). In 2006, Turangi had the highest proportion of people feeling safe/very safe (81%). Peer group and national average comparisons are not available for this particular survey item, however results for the Rotorua District are comparable.

Table 12.1b: Perceived level of community safety 2006

Location	Very safe	Safe	Neither safe nor unsafe	Unsafe	Very unsafe	Don't know	Total
Mangakino- Pouakani	13%	50%	12%	26%	0%	0%	100%
Turangi-Tongariro	32%	49%	14%	5%	0%	0%	100%
Taupo/Kaingaroa	26%	57%	12%	4%	2%	0%	100%
Taupo District total	27%	54%	12%	6%	1%	0%	100%

Source: TDC Resident and Ratepayers Satisfaction Survey

Code	Indicator/Measure	State	Trend
12.1c	Perceived level of personal safety	Θ	?

The 2007 MARCO/TDC Community Outcomes Survey included a sample of 70 Taupo District respondents, giving a local margin of error of $\pm 16.6\%$ at the 95 percent confidence level.

The respondents were asked 'Thinking now about issues of crime and safety, and using a scale where 0 = very unsafe and 10 = very safe; please tell me how safe or unsafe you would feel in the following situations'. The majority of Waikato regional respondents (92%) felt safe in their community during the daytime (scores 6 - 10). Two thirds of the sample (66%) felt safe in their community after dark (scores 6 - 10) and 16% felt unsafe (scores 0 - 4). The daytime safety index for the Waikato Region was 82.8 and the after-dark safety index was 64.9. Comparable results for Taupo District were scores of 79.1 during the daytime and 64.3 after dark.

100 90 80 70 Safety Index (0-100) 60 ■ Taupo District 50 ■ Waikato Region 40 30 20 10 0 Safety in your community during Safety in your community after the daytime dark

Figure 12.1c: Perceived level of personal safety 2007

Source: MARCO/TDC Community Outcomes Survey

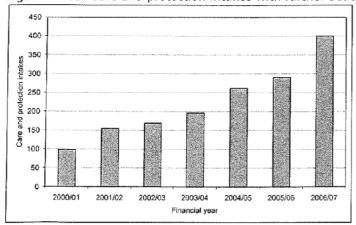
Code	Indicator/Measure	State	Trend
12.1d	Notifications to CYFS - reported and substantiated cases of child	8	Û
	abuse and neglect		

Protecting the physical and psychological health of our young people is a critical component of improving social wellbeing. The protection and nurturing of children is a task shared by families and communities as well as local and national support agencies.

The number of care and protection intakes in the Taupo area with further action required by CYFS has increased considerably since 2000/01. The rate of increase in the Taupo area between 2000/01 and 2006/07 was substantially higher than the national rate. CYFS is working closely with the Police to better identify which family violence situations require notification. Other government agencies and NGOs are also involved in this work. CYF is also working with the Ministries of Health and Education to identify ways that the health, education and welfare sectors can better work together.

In recent years, significant progress has been made in raising awareness of family violence and this is reflected in the increase in the number of notifications. In cases where abuse is found, the nature of the abuse will vary. Generally in more than half of investigations undertaken by social workers, no abuse is found (the "Not Found" figures in the table below). Note that adding the findings types together will not provide a total for the number of children or young people subject to abuse or neglect because an investigation can produce more than one finding of abuse, for example both emotional and physical abuse. Also, investigations carried out and completed within a period are not necessarily the same as intakes received within that same period.

Figure 12.1d: Care and protection intakes with further action required, Taupo CYFS site



Source: Child, Youth and Family

Notes: Refer main text

Care and protection assessment findings of abuse and neglect found and not found, Taupo

Financial Year	Abuse and neglect	Not found
2000/01	24	45
2001/02	42	127
2002/03	45	104
2003/04	19	54
2004/05	51	159
2005/06	. 80	152
2006/07	200	185

Source: Child, Youth and Family

APPENDIX "D" SAFE COMMUNITIES WHO ACCREDITATION CRITERIA

CRITERIA AND PROCESS FOR ACCREDITATION AS A SAFE COMMUNITY

The SCFNZ has been established to work collaboratively with other key stakeholders to further support the development of community-based safety promotion and injury prevention. As previously stated, Safe Communities is a WHO concept that recognises safety as "a universal concern and a responsibility for all." This approach to safety promotion and injury prevention encourages greater cooperation and collaboration between non-government organisations, the business sector, central and local government agencies, and creatively mobilises local community members to action. Additionally, the Safe Communities' model has been nationally and internationally proven as an effective intervention to both promote safety and reduce the injury burden.

The WHO Safe Communities accreditation programme was initiated in Sweden by the WHO Collaborating Centre on Community Safety Promotion at the Karolinska Institute for Social Medicine (www.phs.ki.se/csp). The SCFNZ has been established to further extend this accreditation programme in New Zealand, by working collaboratively with other key stakeholders to further support the development of evidence-based injury prevention and safety promotion. It will provide an opportunity for all relevant stakeholders to increase action on injury prevention and safety promotion. This section outlines the process and criteria for accreditation as either a WHO or New Zealand Safe Community. It is recommended that New Zealand communities wishing to apply for accreditation as a safe community contact the SCFNZ www.safecommunities.org.nz.



DESIGNATION AS A WHO SAFE COMMUNITY

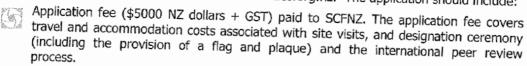
In order to be designated as a WHO Safe Community, communities are required to meet the following six criteria:

- An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community.
- Long-term, sustainable programmes covering both genders and all ages, environments, and situations.
- Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups.
- Programmes that document the frequency and causes of injuries.
- Evaluation measures to assess programmes, processes and effects of changes.
- Ongoing participation in national and international Safe Communities networks.

The above criteria could, for some communities, provide the framework for a strategic plan.

54

The process for designation as a WHO Safe Community includes a written application, and a site visit. When a community considers it has achieved the above criteria they should apply for an application form from SCFNZ www.safecommunities.org.nz. The application should include:



A report describing the safety promotion/injury prevention activities in the 'community', organised around each of the six criteria. Applicants need to describe/define the 'communities' they are working with, in the context of their own environment. No universal definition is implied by the use of the word "community" within the criteria, but mostly it has been applied to a geographical area. SCFNZ is available to support communities as they develop this application.

A shorter text for inclusion in both the WHO and SCFNZ webpage is also required.

The application for membership to become a WHO Safe Community has to be lodged at least one month before a site visit can be arranged.

Representatives from the SCFNZ on behalf of the WHO Collaborating Centre will make the onsite visit (usually 1-2 days) to review your programme and application. Emphasis is given to how your community has achieved each of the six criteria and needs to include:

- A meeting with the cross-sectional group that is responsible for the safety promotion/injury prevention programme in your community; and
- A field visit with community groups/agencies that are responsible for initiatives and other relevant activities relating to injury prevention and safety promotion in your community.

Send five hard copies including all appendices of which one is to be unbound and one electronic copy (including appendices) of the application to:

Dr Carolyn Coggan, Director,
 Safe Communities Foundation New Zealand
 Box 90640, Auckland Mail Service Centre, Auckland.
 c.coggan@safecommunities.org.nz

Applications should be addressed to the:

 Safe Communities Foundation New Zealand Certifying Centre of the WHO Safe Community Network

Once all the above have been satisfactorily completed, a designation ceremony is arranged at a time and place suitable to both your community and the WHO representative.

In addition, the community needs to agree to: make an announcement celebrating their designation; include a SCFNZ billboard indicating that visitors/members of your community are

55

Taupo Safe District - Project Plan

in a WHO Safe Community region; and work with SCFNZ staff as part of your ongoing commitment to the further development of a national and international Safe Communities network.



DESIGNATION AS A NEW ZEALAND SAFE COMMUNITY

In order to be designated as a New Zealand Safe Community, communities are required to meet the following six criteria:

- Demonstration of leadership by coalition or group focused on injury prevention/safety promotion in the community.
- Programme must have been in operation for at least 12 months and can be focused on single injury issue, or be ethnic, gender or age specific.
- Identification of priority areas (population groups, injury issues and settings) based on available data for your community is required.
- Programmes must be based on proven or promising intervention strategies.
- Expected impacts and how they will be measured or evaluated must be outlined.
 - Ongoing participation in national Safe Communities networks is required.

The process for designation as a New Zealand Safe Community includes a written application, and a site visit. When a community considers it has achieved the above criteria they should send three hard copies including all appendices of which one is to be unbound and one electronic copy (including appendices) of the application to:

Dr Carolyn Coggan, Director,
 Safe Communities Foundation New Zealand
 Box 90640, Auckland Mail Service Centre, Auckland.
 c.coggan@safecommunities.org.nz.

The application also include:

- Letters of support from key community champions, local government representatives, community agencies and business leaders, demonstrating their commitment to the programme.
- Evidence of funding including how local/national sponsors and funding representatives are involved in or have been asked to be involved in the programme.
- A strategic plan demonstrating your programme's direction for the next 2/3 years.
- A short text for inclusion in the SCFNZ website.

56



An Application Fee to cover administration (\$2500 NZ dollars +GST) The application fee covers travel and accommodation costs associated with site visits, and designation ceremony (including the provision of a plaque).

Representatives from the SCFNZ, in conjunction with selected representatives form the national Safe Communities network will make the on-site visit (usually one day) to review your programme and application. Emphasis is given to how your community has achieved each of the six criteria as well as reviewing your communities' strategic plan.

Once all the above has been satisfactorily completed a designation ceremony at a time suitable to your community and the SCFNZ can follow.

In addition, the community needs to agree to: make an announcement celebrating their designation; include a SCFNZ billboard indicating that visitors/members of your community are in a New Zealand Safe Community region; and work with SCFNZ staff as part of your ongoing commitment to the further development of a national Safe Communities network.



COMPARISON WHO/NZ SAFE COMMUNITY

The following table compares the criteria for WHO and New Zealand Safe Community accreditation.

WHO Safe Community six criteria	New Zealand Safe Community criteria
Infrastructure governed by a cross-sectional group, including involvement of Territorial Local Authority.	Demonstration of leadership by coalition or group focused on injury prevention/safety promotion in the community.
Long-term, sustainable programmes covering both genders and all ages, environments and situations.	Programme must have been in operation for at least 12 months and can be focused on single injury issue, or be ethnic, gender or age specific.
Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups.	Identification of priority areas (population groups, injury issues and settings) based on available data for your community is required.
Programmes that document the frequency and causes of injury.	Programme must be based on proven or promising intervention strategies.
Evaluation measures to assess their programmes, processes and effects of change must be provided.	Expected impacts and how they will be measured or evaluated must be outlined.
Ongoing participation in national and international Safe Communities networks.	Ongoing participation in national Safe Communities networks is required.

As previously stated, the SCFNZ has been established to work collaboratively with other key stakeholders to further support the development of community-based safety promotion and injury prevention. The unique value of establishing the SCFNZ is the accreditation of communities currently engaged in safety promotion/injury prevention (and in some cases crime prevention and/or alcohol and other drug misuse) initiatives. An accreditation process provides, not only support for communities, but an indication of a level of achievement within the field of safety promotion and injury prevention.