Municipal Alcohol Policy Template Evaluation

Grey Bruce Health Unit



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Introduction

This report highlights the results of a study evaluating the uptake by municipalities in Grey Bruce in adopting components of a common Municipal Alcohol Policy template.

Background

Drinking alcohol has become increasingly normalized in Grey Bruce. Approximately, 26% of Grey Bruce residents are considered to be regular heavy drinkers (Grey Bruce Health Unit, 2013). To make matters worse, some legislative controls in the province have eroded and alcohol marketing has expanded. Fortunately, many municipalities have adopted Municipal Alcohol Policies (MAP's) that clearly outline expectations about how and where alcohol can be safely served. According to a Public Health Ontario study (Public Health Ontario, 2015), 53.1% of Ontario municipalities have an approved Municipal Alcohol Policy. Grey Bruce is ahead of the curve with all 17 municipalities having formally adopted a MAP - the latest being finalized in June of 2013.

Building on the great work being done locally, the Grey Bruce Health Unit (GBHU) launched into discussions with several municipalities who expressed an interest in learning more about recent changes to the Liquor License Act. It was recognized that these changes would result in impacts at the local level; predominately, the need to balance liability concerns while limiting losses in revenue through Special Occasion Permit (SOP's) events. Municipal partners identified that many event organizers were "cross border shopping" in order to find a municipality where the regulations were less strict.

To help address these concerns, GBHU held an information workshop in September 2012. The session featured presentations from the Alcohol Gaming Commission of Ontario (AGCO), and a lawyer specializing in alcohol liability. Emerging from the discussion was the desire to develop a common Municipal Alcohol Policy template that could be adopted by municipalities within the two counties.

Municipal Alcohol Policy Template Development Process

A post-workshop survey identified seven municipalities and one county facility who were interested in working collaboratively to develop a common MAP template. This group met monthly between November 2012 and June 2013. Provincial and national policy best practice documents were reviewed to ensure all necessary sections were included, and input was received from local police, insurance providers, the local AGCO Inspector, and a legal representative.

In working together, partners identified a common interest in learning more about the benefits of licensed facilities. As a result, a second education session was held in May 2013. Presentations were provided by an AGCO constable as well as two neighbouring municipalities with several years of experience operating their facilities using a liquor license.

In October of 2013, the final version of the "evergreen" MAP template was released to the 17 municipalities and two counties within Grey Bruce. A presentation was provided to the Grey Bruce Board of Health to raise awareness amongst elected officials. GBHU staff and municipal partners were also invited by Public Health Ontario to present the process in a webinar. In January 2015 an evaluation was undertaken to determine the uptake by local municipalities in adopting components of the common MAP template.

Evaluation

Purpose and Design

The purpose of this evaluation was to explore the outcomes that have resulted from the development of the Grey Bruce Municipal Alcohol Policy template.

Evaluation Questions

- 1. Have municipalities/county facilities used, or do they plan to use, the MAP template to revise their MAP?
- 2. Which sections of the MAP template were used to update policies? Why were certain sections not used to update policies?
- 3. What have been the benefits and challenges experienced by municipalities/county facilities related to the revisions made to their MAP? Do the benefits outweigh the challenges?
- 4. How can Public Health continue to support municipalities/county facilities in their efforts revise MAPs?
- 5. Have municipalities/county facilities considered licensing facilities?
- 6. What strategies have municipalities used to address alcohol consumption in undesignated areas (specifically "drinking in dressing rooms" at recreational facilities)? What challenges have they experienced?

Data Collection Methods

Sample

A total of 19 key informant interviews were conducted from January 2015 to March 2015. One key informant from each of the 17 municipalities in Grey and Bruce Counties was invited to participate. A key informant from each of the two County-owned museums (henceforth referred to as "county facilities") was also invited as the museums are sites used to host events where alcohol is served. Key informants were typically the staff person or elected official identified as being the most knowledgeable about their Alcohol Policy.

Data Collection

An interviewer met with each of the key informants either in-person or over the phone, at a prearranged time, to complete the survey (Appendix A). Questions were asked verbally by the interviewer who then recorded the answers. One key informant was unable to meet in person and so that individual completed the survey independently and emailed it back. All completed surveys were entered into online survey software (Fluidsurveys) for analysis.

Response

Surveys were completed by all 17 municipalities in Grey and Bruce Counties, and by two County facilities (one in Grey, one in Bruce).

Results

Have municipalities/county facilities used, or do they plan to use, the MAP template to revise their MAP?

Since the MAP Template was distributed in November 2013, 8 of the 19 municipalities/county facilities have used one or more component(s) of the Template to revise their MAP.

Of the 11 respondents who had not yet used the template, 10 were planning to use it to revise their MAP in the future, and only 1 was unsure.

Table 1: Have you used, or do you plan to use, the MAP Template to revise your MAP?

Response	Count
Have used one or more component(s) of the template to revise our MAP	8
Plan to use it to revise our MAP sometime in the future	10
Do not plan to use it to revise our MAP in the future	0
Not sure if there is a plan to use it to revise our MAP in the future	1
Total Responses	19

Which sections/components of the MAP template were used to update policies?

Most of the municipalities/county facilities who used the MAP Template to update their policy, revised all 7 sections. All eight municipalities/county facilities updated Section 2, seven updated Sections 3, 4 and 5, and six updated Sections 1, 6, and 7. (Table 2)

Any decision to not revise a section was almost consistently due to the fact that the existing language in their policy was already in accordance with what is outlined in the MAP template. The only exception was one municipality who did not revise Section 1 because their existing language linking the policy to their strategic plan was preferred over the focus on health benefits outlined in the template. (Table 2)

Table 2: Sections and Components of Policy Revised by Municipalities/County Facilities Who Used MAP Template

Section Number	Section Name	Components	# who revised this section	# who did not revise this section	Reason(s) for not Revising
1	Overview	GoalsRisksObjectivesDefinitions	6	2	 Language for this section was already consistent with what is outlined in the MAP template (n=1) Existing language linking policy and strategic plan preferred over focus on health benefits outlined in the template (n=1)
2	Designation of Properties, Events, and Roles	Designation of propertiesDesignation of eventsRoles and responsibilities	8	0	• n/a
3	Management Process	 Insurance Recommended minimum staffing ratios for SOPs Youth admittance for all ages events Gambling 	7	1	Language for this section was already consistent with what is outlined in the MAP template (n=1)
4	Prevention Strategies	 Safe transportation Safe environment Low alcohol content No alcohol promotions to youth 	7	1	Language for this section was already consistent with what is outlined in the MAP template (n=1)
5	Signage	 Required signage provided by municipality Required signage provided by permit holder Additional recommended signage 	7	1	Language for this section was already consistent with what is outlined in the MAP template (n=1)
6	Actions to Enforce	 Duty to report Consequences for failure to comply with MAP Consequences for alcohol consumption in undesignated areas Other consequences 	6	2	Language for this section was already consistent with what is outlined in the MAP template (n=2)
7	Policy Review and Implementation	Policy ReviewImplementation Phase	6	2	Language for this section was already consistent with what is outlined in the MAP template (n=2)

What have been the benefits and challenges experienced by municipalities/county facilities related to the revisions made to their MAP?

Benefits

All 8 of the municipalities/county facilities indicated that they have experienced benefits related to the revisions made to their policy using the MAP Template. Some respondents listed more than one benefit.

Increased awareness and understanding of MAP by users

Almost all of the respondents felt that facility users have become more aware of, and better understand, the MAP. Some comments were:

Users are asking more questions. People are actually reading the MAP in its entirety.

Definitions provide a better understanding of policies for users.

User groups seem better educated.

Improved compliance with the MAP

About half of the respondents felt that revising the MAP has improved compliance with the policy. Some comments were:

Fewer problems with over-consumption and with alcohol from outside sources.

Improved compliance specifically related to Special Occasion Permits.

Municipal staff are more equipped to provide answers to the public

Two of the respondents felt that revising the MAP has helped municipal staff to feel informed and equipped to provide answers to the public. One comment was:

The MAP has allowed staff to share the document with event organizers. It assists with education of [users] and provides clear cut rules and regulations.

Increased protection against liability

One respondent felt that that revising the MAP has helped to protect the municipality/county facility against liability.

Challenges

Six of the eight municipalities/county facilities indicated that they have experienced challenges related to the revisions made to their policy using the MAP Template.

Enforcement of MAP

Two respondents felt that there were challenges associated with enforcing the MAP. One comment was:

[There can be] inconsistent enforcement of the MAP amongst those staffing events. For example, one facility staffed by municipal staff and another staffed by volunteers.

Special Occasion Permit (SOP) holders' lack of awareness of policy changes related to alcohol

Two respondents felt that there were still some challenges associated with SOP holders' lack of awareness of the policy changes related to alcohol, specifically SOP holders who tend to be more focused on the AGCO limitations placed on gambling instead of on alcohol.

Additional requirements for users

One respondent felt that the revisions to the MAP have increased the paperwork required for users to host a Special Occasion Permit event:

The [municipality] now requires a budget and copy of Special Occasion Permit (SOP) forms.

Lost revenue

One respondent felt that changes to their policy has resulted in decreased profits from renting facilities:

[There is] Increased liability insurance and rentals are down. Other communities are not following the legislation and so renters are looking outside the area where there are less hurdles to overcome.

Counterbalancing the culture of alcohol consumption in the region

One respondent noted that even with the revised MAP it is still difficult to counterbalance the culture of alcohol consumption in the community:

[There is a] culture of alcohol use in the region. Alcohol is not treated with enough respect.

Do the benefits associated with revising the MAP using the MAP template outweigh the challenges?

Respondents were asked to indicate whether the benefits to the revisions they have made outweigh the challenges they have experienced. Five respondents felt that the benefits outweigh the challenges, and three were "not sure". (Table 3)

Table 3: Do the benefits to the revisions made to the MAP outweigh the challenges experienced?

Response	Count
Yes	5
Not sure	3
Total Responses	8

How can Public Health continue to support municipalities/county facilities in their efforts revise MAPs?

Respondents were asked to indicate how Public Health could continue to support municipalities/county facilities in their efforts to revise their alcohol policies. The suggested supports were grouped into five main categories:

Facilitate education and provide information to Municipal Staff

Many of the respondents felt that public health could support MAP revisions by continuing to provide education and information to municipal staff. Specific areas mentioned included: updates to legislation by AGCO; education for both frontline and senior staff/elected officials; and information from insurance companies regarding liability.

Continue to facilitate collaborative work amongst municipalities

Three respondents felt that public health could support MAP revisions and implementation by continuing to facilitate collaborative work amongst the municipalities.

Support Municipalities in reviewing and revising MAPs

Three respondents felt that public health could support MAP revisions and implementation by supporting municipalities in their annual and 5-year policy reviews and providing recommendations for revisions.

Provide information and resources to the public

Two respondents felt that public health could support MAP revisions by providing information and resources to the public. Specific suggestions included statistics on alcohol risks; low-risk drinking guidelines; and media geared towards underage drinking.

Elicit support from Municipal Councils

Two respondents felt that public health could support MAP revisions and implementation by providing a presentation about the Municipal Alcohol policy template to elected officials at Municipal and County Council meetings.

Other support

One respondent felt that public health could provide support with developing a template that reflects best practice requirements for licensed facilities.

Have municipalities/county facilities considered licensing facilities?

Licensing a facility involves the facility obtaining a permit to sell alcoholic beverages. The AGCO encourages municipalities to license facilities as a way to ensure maximize oversight of alcohol related events. In 2013, Public Health hosted an education session for municipal and county representatives about the benefits of licensing facilities. Respondents were asked in this survey whether or not they would be interested in learning more about the benefits to licensing a facility. All but one respondent answered "no". This may be an indication that the previously held education session gave attendees the information they needed.

Almost all (n=16) of the 18 respondents indicated that their municipality/county facility has, at some point, considered licensing one or more of their facilities. At least three municipalities in Grey Bruce already have one, or more, of their facilities/recreational spaces licensed. Those who have licensed facilities/recreational spaces expressed that it has been a positive experience. The most common benefit noted was increased revenue.

Those who have considered licensing but decided against it noted perceived challenges that influenced the decision. The most common were the need for additional staffing resources; and liability concerns.

What successes and challenges have municipalities experienced with regards to addressing alcohol consumption in undesignated areas?

Respondents were asked to describe any successes and challenges their municipality/county facility has experienced with regards to addressing alcohol consumption in undesignated areas, specifically "drinking in dressing rooms" at recreational facilities.

Challenges

The most commonly mentioned challenge associated with addressing alcohol consumption in dressing rooms is difficultly in having facility staff enforce the policy. Some comments were that "facility staff should not be made to enforce this aspect of the policy" and that it is "too challenging for staff to enforce".

Another noted challenge was the municipality's concern for potential lost revenue. There is a fear that if this aspect of the policy is enforced, sports teams may decide not to play, or move to another facility where the rules for drinking in dressing rooms are not as strictly enforced.

Strategies for Addressing Alcohol Consumption in "Dressing Rooms"

Respondents were asked to describe the strategies they have used to address alcohol consumption in the "dressing rooms". The most commonly mentioned strategies included: signage; time limits for vacating the dressing rooms after games (30 minutes); and, having a police presence at games and facilities (including ride-checks). Another strategy mentioned for addressing the issue was becoming a licensed facility.

Conclusions & Recommendations

An evidence table has been prepared which links the evaluation questions with the evidence obtained during this evaluation, the conclusions drawn and the recommendations advanced for consideration. It is presented in Table 4.

While the work related to reviewing, enhancing, and enforcing MAPs in Grey Bruce is ongoing, the MAP Template project has contributed to positive change in a number of areas. The MAP template was well received by municipal and county partners and almost all respondents have already adopted or will consider adopting during their review process. Most of the partners who have used the template to

update their policy revised all 7 sections. The participatory approach to development of the template is likely to have contributed to its usefulness and the receptivity of partners. While there were some challenges experienced by those who revised their policies (e.g., enforcement of the policy; additional requirements for users), all agreed that the benefits associated with revising their MAP outweighed any challenges. Benefits experienced included: increased awareness and understanding of MAP by users; improved compliance with the MAP; increased preparedness of municipal staff to provide answers to the public; and, increased protection against liability.

Moving forward the Grey Bruce Health Unit can continue to support Municipal Alcohol Policy by:

- Maintaining ongoing communication with municipal/county partners and encouraging them to approach Public Health as concerns or questions arise related to MAPs.
- Facilitating education and the dissemination of information relevant to MAP.
- Supporting the evolution of the MAP template and assisting municipalities as they review and revise their MAPs.
- Working with all 17 municipalities, and the two counties, to ensure that MAPs are as consistent as possible, and that enforcement of the policies is also consistent.

Table 4: Evaluation Questions, Evidence and Conclusions

Evaluation Question	Evidence	Conclusions / Recommendations
Have municipalities/county facilities used, or do they plan to use, the MAP template to revise their MAP?	Since the MAP Template was finished in November 2013, 8 of the 19 respondents have used one or more component(s) of the Template to revise their MAP. Of the 11 respondents who have not yet used the template, 10 are planning to use it to revise their MAP in the future, and only 1 was unsure.	Initial impressions indicate that the MAP template has been well received by municipal and county partners. The involvement of partners in the development process is likely to have enhanced the use of the template. Ongoing communication and networking with partners is recommended as additional municipalities/county facilities consider adopting components of the template or as legislation changes.
Which sections of the MAP template were used to update policies? What is the reason that certain sections/components were not used to update policies?	Most of the municipalities/county facilities who used the MAP Template to update their policy, revised all 7 sections. All eight municipalities/county facilities updated Section 2, seven updated Sections 3, 4 and 5, and six updated Sections 1, 6, and 7. The decision to not revise a section was consistently due to the fact that the existing language in the policy was already accordant with what is outlined in the MAP template. The only exception was one municipality who did not revise Section 1 because the existing language linking the policy to their strategic plan was preferred over the focus on health benefits outlined in the template	Overall, the majority of sections included in the MAP template were found to be valuable to those engaged in the review process. This indicates there was agreement with the information presented in the template and only those who typically already possessed similar language decided not to make the suggested revisions.
What have been the benefits and challenges experienced by municipalities/county facilities related to the revisions made to their MAP? Do the benefits outweigh the challenges?	All eight of the municipalities/county facilities who have used the template indicated that they have experienced benefits related to the revisions made: - Increased awareness and understanding of MAP by users - Improved compliance with the MAP - Municipal staff more equipped to provide answers to public - Increased protection against liability Six of the eight municipalities/county facilities who have used the template indicated that they have experienced challenges related to the revisions made: - Enforcement of MAP - Awareness of Special Occasion Permit (SOP) holders - Additional requirements for users - Lost revenue - Culture of alcohol consumption in the region	All respondents agreed that the benefits associated with revising their MAP outweighed any challenges experienced. Many of the challenges identified in this evaluation were also expressed by partners throughout development of the template and the collaborative group was unable to identify any simple solutions. It is anticipated that as user groups become more familiar and comfortable with the new policies the challenges associated with these polices will be lessened.

Evaluation Question	Evidence	Conclusions / Recommendations
How can Public Health continue to support municipalities/county facilities in their efforts revise MAPs?	There were 5 main categories of support that were suggested: Facilitate education and provide information to Municipal Staff Continue to facilitate collaborative work amongst municipalities Support Municipalities in reviewing and revising MAPs Provide information and resources to the public Elicit support from Municipal Councils	While Public Health played a coordinating role, development of the MAP template was a collaborative process that brought various partners to the table. Without involvement of the municipalities, counties, AGCO, police, and other stakeholders, the process would likely have not have achieved such a favourable outcome. Public Health should continue to support the process and evolution of the MAP template. Municipal and county partners should be encouraged to approach Public Health as concerns or questions related to MAPs arise. Many respondents identified a need for education, awareness and training and suggested that Public Health could continue to facilitate education and the dissemination of information.
Have municipalities/county facilities considered licensing facilities?	All but one respondent felt that they have the information they need about the benefits to licensing facilities. Almost all (n=16) of the 18 respondents indicated that their municipality/county facility has, at some point, considered licensing one or more of their facilities. At least three municipalities already have one, or more, of their facilities or other recreational spaces licensed. Those who have licensed facilities expressed that it has been a positive experience. The most common benefit noted was increased revenue. Those who have considered licensing but decided against it noted perceived challenges that influenced the decision. The most common were the need for additional staffing resources; and liability concerns.	Despite clear support for licensing of facilities from the AGCO, there are obvious concerns by local partners. Perceived concerns about the need for additional staff resources and liability concerns seemed to outweigh the benefits of having more controls in place. Despite the general lack of interest in moving towards licensing facilities, it was clear from the interview process that municipal and county partners felt that they had the information they needed to make an informed decision on this topic.
What strategies have municipalities used to address alcohol consumption in undesignated areas (specifically "drinking in dressing rooms" at recreational facilities)? What challenges have they experienced?	The most commonly mentioned strategies included: signage; time limits for vacating the dressing rooms after games (30 minutes); and, having a police presence at games and facilities (including ride-checks). Another strategy mentioned for addressing the issue was becoming a licensed facility. The most commonly mentioned challenge associated with addressing alcohol consumption in dressing rooms is difficulty for facility staff in enforcing the policy. Another noted challenge was the municipality's concern for potential lost revenue due to "cross border shopping" with users potentially moving to another facility where the rules for drinking in dressing rooms are not as strictly enforced.	Drinking in the dressing rooms continues to be a highly contentious subject that is avoided if possible. "Out of sight, out of mind" seems to be the common approach taken by many local municipalities. The culture of alcohol, and concerns with lost revenue and enforcement of the policy by staff appear to outweigh obvious concerns with liability. While some municipalities are enacting strategies to address the issue, all municipalities should take heed of the potential risks associated with not taking a more proactive approach. To deter "cross-border shopping", Public Health should continue to support partners in working towards developing consistent MAPs, and consistent enforcement of the policies.

References

Grey Bruce Health Unit. (2013). *CCHS Indicators: Regular Heavy Drinking*. Owen Sound: Grey Bruce Health Unit.

Public Health Ontario. (2015). Provincial Municipal Alcohol Policy (MAP) Scan.

Appendix A: Grey Bruce MAP Template Survey

Grey Bruce Municipal Alcohol Policy Template Survey - January 2015

Familiarity with, and use/intent to use, the MAP Template

	you familiar with the MAP Template that was developed in 2013 by the Grey Bruce Health Unit and a variety nunicipal and county partners?
0	Yes
0	No
0	Not sure
Hav	e you (and/or or another colleague) reviewed the MAP Template?
0	Yes
0	No
Whe	en was your MAP last reviewed and/or updated?
Wha	at is your anticipated date for the next review of the MAP?
Wha	at was your involvement in the MAP Template Development Process?
(Che	eck all that apply)
	Not at all involved in the MAP Template development process
	Attended one, or both, of the workshops offered by Public Health (Presenters: AGCO, Legal Rep, Liquor Inspector, etc.)
	Participated in one of the initial brainstorming sessions regarding MAP Template development
	Participated in the first MAP working groups (when there was 4 separate working groups)
	Participated in the larger MAP working group (consisted of 8-10 people)
	Participated in the final working group/review team (consisted of 3-4 people)
	Other, please specify
Hav	e you used, or do you plan to use, the MAP Template to revise your MAP?
0	Have used one or more component(s) of the template to revise our MAP
0	Plan to use it to revise our MAP sometime in the future
0	Do not plan to use it to revise our MAP in the future
0	Not sure if there is a plan to use it to revise our MAP in the future

Can you describe why you do not plan to use (or are unsure about using) the MAP Template to revise your municipality's MAP?

Revisions to MAP

(For each of the 7 sections of the MAP Template, the interviewer described each section and asked whether or not they used (or plan to use) the MAP template to revise any components in that section. For example:

Section 1: Overview

Components of this section are: Goals of the MAP, Risks of alcohol service, Objectives of the policy, and Definitions

Have you used (or do you plan to use) the MAP Template to revise any of these components?					
0	Yes				
0	No				
0	Not su	re			
0	Refuse	d			
Whi	ich com	ponents?			
		Have used	Plan to		
Goal	ls				
Risks	S				
Obje	ectives				
Defi	nitions				
Wh	y not?				
	Our lar	nguage for the	ese components was already consistent with what is in the MAP Template		
	Curren	t language in	policy is preferred over language provided in the MAP Template		
	Policy i	eview is bein	g completed at a later time		
	We do	not plan to us	se the policy template when revising our policy		
	Other,	please specify	<i>/</i>		
Hav	e you i	ncluded a ch	ecklist agreement for licensed events that organizers complete?		
0	Yes				
0	No				
	Do you require all event organizers using your facilities to sign this agreement?				
	0	Yes			
	0	No			
Doy	you hav	e a sports a	ctivity agreement within your MAP?		
0	Yes				

0	No		
		Do	you require all sports organizations to sign this agreement?
		0	Yes
		0	No
Hav	e th	nese a	agreements increased compliance with your MAP?
0	Ye	S	
0	No		
Ber	nefit	s and	Challenges Related to Revisions
			r has your municipality) experienced any benefits related to the revisions that have been made to pality's MAP?
Ber	efit	s cou	ld be related to making the revisions, implementing, or enforcing any new revisions put in place, etc.
0	Ye	S	
0	No		
0	No	t sure	
Can	ı yoı	u brie	efly describe what those benefits have been?
	-	-	r your municipality) experienced any challenges related to the revisions that have been made (or tempted) to your municipality's MAP?
Cha	llen	ges c	ould be related to making the revisions, implementing, or enforcing any new revisions put in place.
0	Ye	S	
0	No		
0	No	t sure	
Can	ı yoı	u plea	ase briefly describe what those challenges have been?
In y	our	opin	ion, do the benefits to the revisions you have made outweigh the challenges you have experienced?
0	Ye	S	
0	No		
0	No	t sure	

General Questions for All Respondents

Is there anything that Public Health can do to support you in your efforts to continue to revise (now or in the future) your municipality's MAP?

Has your municipality considered licensing any or all of your facilities?

0	Yes
0	No
0	Not sure
Com	ments:
Wou	ald you be interested in learning more about the benefits to licensing a facility?
0	Yes
0	No
0	Not sure
	have heard from other municipalities that it is difficult to enforce drinking in the dressing rooms. Can you e any challenges or successes you have experienced on this issue?
Bef	ore we end the survey, is there anything else you would like us to know?

This completes the survey. Thank you for taking the time to answer our questions. You will receive a summary of the survey via email once all respondents have completed the survey