

Welcome to the Ontario Museum Association Museum Impact Survey 2018!

Thank you for taking the time to complete this survey which should take around 30 minutes. These 30 minutes are a vital investment in the future of Ontario museums, as we work towards the goals of Vision 2025 for: Relevant & Meaningful Collections; Vibrant & Vital Museums; an Effective & Collaborative Workforce; and a Strong & Successful Sector.

Why this survey now?

With your institution's current information, we can make a strong case for support of museums by governments and funders. With changes across all levels of government, now is a vital time for coordinated action.

Museums must better demonstrate the impact of our sector on key priorities of current governments for more effective advocacy, including the E's; Education, Employment, and Economic Development. From these data, we will develop our key messages and compelling stories to influence policy and renewed funding.

The data collected will be confidential, and will only be reported in an anonymous and aggregated form. The survey results will be shared widely and will provide benchmarking potential and advocacy resources for individual institutions.

PRIZES

Complete the Museum Impact Survey by December 7, 2018, for a chance to win one of four grand prizes for your institution:

- One \$500 Apple Store Gift Card
- One full year OMA Institutional membership
- One Full Registration for the OMA Conference in Brantford, October 2019
- One Pre-Conference Study Tour Registration for the OMA Conference in Brantford

How do I complete the survey?

Please take a moment to settle in with materials to assist you, such as staffing information and your latest annual report on your organization's operations, including financials.

Please note: The survey is a continuous scroll, so please do not use the Back or Refresh buttons, as you will lose your progress. You may use "n/a" if the question doesn't apply to your organization, or "0" in the case of numeric questions.

Please participate in the Museum Impact Survey online here: <http://bit.ly/MuseumImpactSurvey>. Please share this survey widely with other museums, galleries, and heritage sites in the province, but we request only one response per institution.

Need help?

Additional information on our survey is available on our website at <https://members.museumsontario.ca/programs-events/advocacy/MuseumImpactSurvey>, including: a glossary of financial terms from Canada Revenue Agency, definitions from the *Government of Canada Survey of Heritage Institutions*, and additional information about the survey questions.

If you need any assistance or have questions, please contact the OMA Monday-Friday, 9am to 5pm, by phone at 1-866-662-8672 (Toll-free in Ontario), or 416-348-8672, ask for Christopher Shackleton (community@museumsontario.ca)

* 1. What is the common name of your organization?

2. What is the most powerful story that you tell to represent your institution's value, importance, and impact? This response is open-ended and please feel free to share any comments, stories, issues, or insights.

3. In order for us to communicate our sector's impact, please allow us to share your story of impact from above (Q.2)

- Yes, I give my consent to have the above story shared by the OMA and attributed to my museum.
- Yes, but please contact me regarding the use of my story.
- No, I do not give my consent to have the above story shared.
- No, I did not enter a story above.

4. What is the official (legal) name of your organization?

- Same as above
- Other (please specify)

5. What is the alternate name(s) of your organization, including bilingual forms? Please write as a list, separated by commas.

6. What are the former or previous names of your organization (past ten years)? Please write as a list, separated by commas.

7. What is the **administrative mailing or P.O. address** of your organization?

Address

Address 2

City/Town

Province

Postal Code

Country

8. What is the **physical street address** of your organization?

Same as above

(Put an X in this box)

Address

Address 2

City/Town

Province

Postal Code

Country

9. What is your organization's general **phone number advertised to the public**?

10. What is your organization's general **public email address**? (Leave blank if none)

11. What is your organization's **primary website address**? (Leave blank if none)

12. Please provide the contact information of your top non-elected, non-political operational manager/CEO/Executive Director.

Name

Title

Email Address

Phone Number

13. Please provide the contact information of your **Board/ Advisory Committee Chair**. (Leave blank if none)

Name	<input type="text"/>
Title	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

14. How many Board or Advisory Committee members does your organization have? (Leave blank if none, enter a number only)

15. Please provide the contact information of your **Head/ Lead Curator**. (Leave blank if none)

Name	<input type="text"/>
Title	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

16. Please provide the contact information of your **librarian/archivist**. (Leave blank if none)

Name	<input type="text"/>
Title	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

17. What is the primary description that **best** describes your organization? Please check **ONE** only.

- | | |
|--|---|
| <input type="radio"/> General Museum / Museum Activities | <input type="radio"/> Science or Technology Museum or Centre |
| <input type="radio"/> Community Museum | <input type="radio"/> Educational Organization or Institution (University, College, Board of Education) |
| <input type="radio"/> Art Museum or Gallery | <input type="radio"/> Archive |
| <input type="radio"/> History Museum | <input type="radio"/> Children's Museum |
| <input type="radio"/> Local History (including historical organizations, historical societies and/ or historic sites & preservation) | <input type="radio"/> Interpretive, Cultural, or Exhibition Centre |
| <input type="radio"/> Natural History or Natural Science Museum | <input type="radio"/> Virtual Museum |
| <input type="radio"/> Botanical Garden, Arboretum, or Botanical Organization | <input type="radio"/> Ecomuseum |
| <input type="radio"/> Zoo or Zoological Organization | |
| <input type="radio"/> Other (Please specify, written as a list separated by commas) | |

18. What other descriptions could also apply to your organization? (Check **ALL** that apply)

- | | |
|---|--|
| <input type="checkbox"/> General Museum / Museum Activities | <input type="checkbox"/> Science or Technology Museum or Centre |
| <input type="checkbox"/> Community Museum | <input type="checkbox"/> Educational Organization or Institution (University, College, Board of Education) |
| <input type="checkbox"/> Art Museum or Gallery | <input type="checkbox"/> Archive |
| <input type="checkbox"/> History Museum | <input type="checkbox"/> Children's Museum |
| <input type="checkbox"/> Local History (including historical organizations, historical societies and/ or historic sites & preservation) | <input type="checkbox"/> Interpretive, Cultural, or Exhibition Centre |
| <input type="checkbox"/> Natural History or Natural Science Museum | <input type="checkbox"/> Virtual Museum |
| <input type="checkbox"/> Botanical Garden, Arboretum, or Botanical Organization | <input type="checkbox"/> Ecomuseum |
| <input type="checkbox"/> Zoo or Zoological Organization | <input type="checkbox"/> Nature Trails or Outdoor Education Facilities |
| <input type="checkbox"/> Other (Please specify, written as a list separated by commas) | |

19. Does your collection include any **Indigenous objects**?

- Yes
 No

20. Has your organization offered any **Indigenous exhibitions and / or programs** in the past 3 years ?

- Yes
 No

21. Do your programs and / or exhibits reflect any of the following content areas? (Please check **all** that apply.)

International/ Global content

Local/ Regional content

Canadian content

Indigenous content

Ontario content

Comments.

22. Is your museum a **shared facility** with another cultural entity? (Such as an art gallery, library, historic site, or archive)

Yes

No

Partially

Which one(s)? Please write as a list separated by commas.

23. To what degree is your museum content for the public **fully bilingual (French and English)**?

English only

Partly bilingual

Fully bilingual (French and English)

French only

24. Is your museum mostly **Francophone or Franco-Ontarian focused**?

Yes

No

25. Does your museum offer content in any other non-official languages? (Such as Mandarin, Cree, etc.)

Yes

No

If Yes, please specify in a list separated by commas.

26. Please provide your organization's primary **social media addresses**. (Leave blank if none)

Twitter

Facebook

Instagram

YouTube

Pinterest

Google+

Google Maps (Yes or No)

TripAdvisor

Yelp

LinkedIn

Tumblr

Snapchat

Flickr

Reddit

Public Online Calendar

Institutional Blog

Other

(Please list, separated by
commas)

27. Please share your **financial numbers** (rounded to the nearest dollar) from your latest complete fiscal year. (Use (0) when none, no need for a \$ sign)

Definitions used are based on the Government of Canada Survey of Heritage Institutions. Find the definitions [here](#)..(opens in a new window)

Federal unearned revenues (funds or grants)

Provincial unearned revenues (funds or grants)

Local / Municipal unearned revenues (funds or grants)

Personal donations : Tax receipted

Personal donations : Non-Tax receipted

Donations from other charities

Interest / Investment Income

Gross Income from rentals of facilities

Membership fees

Admission fees

Public Program fees

Fundraising from Corporations / Private Sector

Sales of Goods and Services (food, retail)

Other Earned revenue

28. Is your organization exempt from **property tax**?

Yes

No

29. Does your museum have a **separate fundraising foundation or 'Friends of' group**?

Yes

No

30. How large is your **total reserve funds and / or endowment?** (Rounded to the nearest dollar, use zero (0) if none, no \$ sign needed)

Amount

31. Does your organization have **Canada Revenue Agency (CRA) charitable status?**

Yes

No

32. What is your **governing authority?** (to whom your organization officially reports)

Federal government

Educational institution or religious organization

Ontario government

For-profit institution or business

Local, municipal, or County government

Not-for-profit institution or organization

First Nations Council

Conservation authority

33. Did your museum receive **Community Museum Operating Grant (CMOG) funding** in 2017?

Yes

No

34. Has your museum ever been refused CMOG funding?

Yes

No

Comments.

35. Does your museum have a **retail operation / gift shop?**

Yes

No

36. Does your museum have a **food service operation (restaurant / coffee shop)?**

Yes

No

37. If your museum has a retail or food service operation, are they run by volunteers or paid staff?

- Volunteers
- Paid Staff
- Combination
- My museum does not have a retail or food service operation.

38. Please provide your annual personnel statistics. (Please use zero (0) if none, and estimate where needed)

of **paid Permanent**

Full-time employees

(more than 30 hours / week)

of **paid Permanent**

Part-time employees

(less than 30 hours / week)

of **paid Seasonal**

employees (full- or part-time)

of **paid Contract**

workers

(for whom your organization did not issue a T4; such as custodial, catering, or security staff, etc.)

of Volunteers

Total annual # of hours worked by all volunteers

39. Please enter the number of workers who were part of the following programs:

Young Canada Works

Canada Summer Jobs

Summer Experience Program

High school co-op or volunteer hours

Post-secondary co-op or internship

40. Please indicate the number of **individual paid employees** in the following roles:

Management	<input type="text"/>
Administration	<input type="text"/>
Archivist / Librarian	<input type="text"/>
Conservation / Preservation	<input type="text"/>
Collections Management	<input type="text"/>
Curatorial, Research, or Scientist	<input type="text"/>
Education, programming, visitor engagement, or interpretation	<input type="text"/>
Digital / IT	<input type="text"/>
Exhibitions / Touring	<input type="text"/>
Facilities maintenance / security	<input type="text"/>
Retail / Food Service Operation	<input type="text"/>
Fundraising	<input type="text"/>
Multiple job roles	<input type="text"/>

41. Does your organization have a union?

- Yes
 No

42. What percentage (estimated) of your organization's paid employees receive group benefits from your organization?

- 100% 1-33%
 67-99% None
 34-66%

43. Does your organization provide **professional development and / or training opportunities** for staff and volunteers? Check **ALL** that apply.

- | | |
|--|--|
| <input type="checkbox"/> Yes, including those below: | <input type="checkbox"/> In-house training program |
| <input type="checkbox"/> Orientation program for Board/ governing authority | <input type="checkbox"/> Collection of current reference material |
| <input type="checkbox"/> Orientation program for paid staff | <input type="checkbox"/> Funding for professional development (seminars, courses, workshops, conferences, etc.) |
| <input type="checkbox"/> Orientation program for volunteers | <input type="checkbox"/> No |
| <input type="checkbox"/> Volunteer engagement, retention, or recognition program | |
| <input type="checkbox"/> Other (please specify in a list separated by commas) | |

44. Please provide your most recent annual attendance numbers:

# of visits	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of online visits	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of students / school groups	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of student visits (as a part of school groups)	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of members	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>

45. Please provide your most recent annual exhibitions, events, and programs numbers. (Estimate if needed)

# of Permanent exhibitions currently on display	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of Temporary exhibitions created	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of Temporary exhibitions hosted	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of Online exhibitions hosted	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
# of Public programs (excluding school visits)	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>
Estimated annual program attendees (not general visitors)	<div style="border: 1px solid black; width: 485px; height: 22px;"></div>

46. Does your museum offer programming linked to provincial JK- Grade 12 curriculum requirements?

Yes

No

Other (please specify)

47. Please estimate the number of academic and/or public research requests in the last full year.

48. How many **buildings / structures** does your organization have in each age category? Please enter the number of buildings in each category below:

Less than 10 years

11-25 years

26-50 years

51-75 years

76-100 years

More than 100 years

49. Is your organization planning to undertake any infrastructure upgrades, renovations, or building projects in the next three (3) years?

- Yes, construction of a new facility or expansion to your existing facility. No, my institution is not planning on undertaking any upgrades within the next 3 years.
- Yes, improvements to your current facility (e.g. improved visitor flow, accessibility, storage, curatorial spaces). Don't know
- Yes, improvements to your facility's physical plant (e.g. HVAC, lighting). Does not apply
- Yes, improvements in visitor experience (e.g. displays, exhibits).
- Comments: Do you have any special needs for your buildings?

50. Is your museum accessible and **Accessibility for Ontarians with Disabilities Act (AODA)** - compliant?

- Yes
- No
- Almost

51. Please estimate the degree to which your museum storage is standards-compliant and adequate.

Not at all Fine Very good



52. Please tell us about your collections. (Estimate where needed, put (0) if none) Definitions of terms used are found [here](#):

Total # of artifacts on display or in storage	<input type="text"/>
# of artifacts on display	<input type="text"/>
# of linear metres of textual materials (bookshelves, archival storage etc.)	<input type="text"/>
# of graphic/ image materials	<input type="text"/>
# of hours of video/ sound recordings	<input type="text"/>
# of natural history/ scientific specimens	<input type="text"/>
# of gigabytes of born (solely) digital records	<input type="text"/>
# of gigabytes of records converted to digital	<input type="text"/>
% of all records converted to digital (estimate)	<input type="text"/>
% of all digital content available online (estimate)	<input type="text"/>

53. How many days of the **week** is your museum open?

54. How many days of the **year** is your museum open?

55. Is your museum only open for a partial year or certain season?

- Open Year Round
- Open only in Summer
- Open only during School Year

Please specify.

56. Any other comments on your museum's **hours of operation**?

57. For whom is admission free at your museum, and what is free to do? (Check **ALL** that apply)

- | | |
|--|---|
| <input type="checkbox"/> Everything and everyone | <input type="checkbox"/> All programs |
| <input type="checkbox"/> Admission is by donation | <input type="checkbox"/> Some programs |
| <input type="checkbox"/> Student admission | <input type="checkbox"/> Special days |
| <input type="checkbox"/> Children's admission | <input type="checkbox"/> Special evening(s) |
| <input type="checkbox"/> Seniors' admission | |
| <input type="checkbox"/> Other (please specify, written as a list separated by commas) | |

58. Please provide your museum's lowest cost / basic membership fees for the following categories.
(Rounded to the nearest dollar, no need for a \$ sign, leave blank if no option)

No memberships available
(Put an X in this box)

Family

Adult

Senior

Student

Children

59. Please provide the cost of a single general admission in the following categories: (Leave blank if no option, or zero (0) if free)

Optional Donation (put an X in this box)

General admission

Family

Adult

Senior

Student

Children

Other (please specify, written as a list separated by commas)

60. Does your museum offer free passes through the public library or other organizations?

Yes

No

Please specify.

61. Does your museum offer a paid pass that includes other partner museums or local sites/institutions/attractions?

Yes

No

62. Does your museum have any formal partnerships with other organizations? (Check **ALL** that apply)

- | | |
|---|---|
| <input type="checkbox"/> First Nations communities | <input type="checkbox"/> Arts or Culture Organizations |
| <input type="checkbox"/> School Boards | <input type="checkbox"/> Performing Arts Organizations |
| <input type="checkbox"/> Universities | <input type="checkbox"/> Service Clubs |
| <input type="checkbox"/> Colleges | <input type="checkbox"/> Associations |
| <input type="checkbox"/> Tourism Organizations | <input type="checkbox"/> Historical Societies/ Heritage Districts |
| <input type="checkbox"/> Friends Organizations | <input type="checkbox"/> Archives |
| <input type="checkbox"/> Registered Charities | <input type="checkbox"/> Galleries |
| <input type="checkbox"/> Businesses (BIA, Chambers of Commerce) | <input type="checkbox"/> Public Libraries |
| <input type="checkbox"/> Municipal Departments (e.g. Parks and Recreation, Social Services) | <input type="checkbox"/> Other Museums |

Other (please specify)

* 63. Please provide the contact information of the person filling out this survey, in case we need to follow up and to share the survey's results.

Name	<input type="text"/>
Title	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>