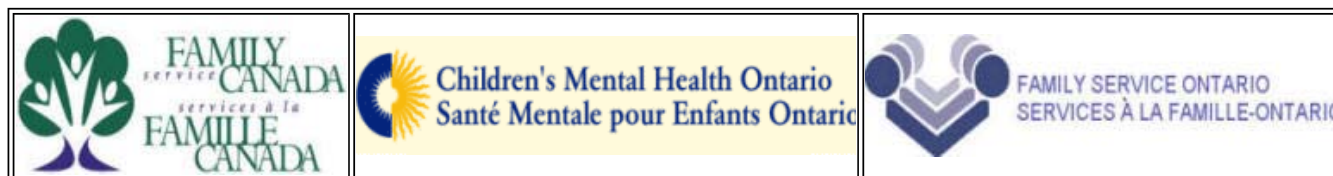


2008 Canadian Compensation Survey



Purpose: Your answers will constitute the factual basis for the 2008 Canadian Compensation Report.

Confidentiality: All answers are confidential and will not be further disclosed other than in aggregate form.

Caveat: If you correct data on a previously entered screen and click "Next" you will have to re-enter all data from that point forward.

Survey navigation:

- To advance from one question to the next you may either use your tab key or computer mouse.
- The space bar or a mouse click checks an item or choice.
- The left and right arrows move among choices (radio buttons) within a question.
- To advance to the next page, click the "Next" button at the bottom left-hand side of the page or hit the return/enter key.

Important notes to survey users:

- Required fields are few in number and are so noted.
- Please do not lead with the "\$" sign, end with the "%" sign, or use words in fields that request monetary figures (e.g., 45 million).
- Position salaries and employee benefits are those in effect on January 31, 2008, however CEO benefits are those in effect for calendar year 2007.

The survey consists of ten (10) sections

I. Agency Demographics	VI. Health Insurance
II. Senior Executive Positions	VII. Other Benefits
III. Director and Manager Positions	VIII. Retirement Plan
IV. Direct Service Positions	IX. Paid Annual Leave
V. Staffing Levels	X. CEO Benefits

Next

Please address any technical questions or problems with the survey to:

Laura Pinsoneault, Research Analyst (800) 221-3726, Ext. 3644, lpinsoneault@alliance1.org

2008 Canadian Compensation Survey

I. Agency Demographics

Organization Name (Required) _____	City (Required) _____
Total Annual Operating Budget for FY 2008* (Required) \$ _____	Province (Required) (Click here to choose) <input type="button" value=""/>

Affiliation (check all that apply)

<input type="checkbox"/> Children's Mental Health Ontario	<input type="checkbox"/> Family Service Canada	<input type="checkbox"/> Family Service Ontario
-----------------------------------------------------------	------------------------------------------------	-------------------------------------------------

*FY 2008: fiscal year ending in year 2008

[Next](#)

2008 Canadian Compensation Survey

II. Senior Executive Positions

Please provide the annual base salary and highest earned academic degree for incumbents of the following positions as of January 31, 2008.

CEO/Executive Director/Administrator

Annual base salary (Required) \$ <input type="text"/>		Years in CEO position <input type="text"/>		Age of CEO (will not be published): <input type="text"/>	
Academic Degree	<input type="radio"/> BA/BS	<input type="radio"/> MA/MS	<input type="radio"/> MSW	<input type="radio"/> PhD	<input type="radio"/> Other (specify) <input type="text"/>

Chief Financial Officer/Director of Finance

Annual base salary \$ <input type="text"/>					
Academic Degree	<input type="radio"/> BA/BS	<input type="radio"/> MA/MS	<input type="radio"/> MBA	<input type="radio"/> PhD	<input type="radio"/> Other (specify) <input type="text"/>

Next

2008 Canadian Compensation Survey

III. Director and Manager Positions

Please provide the annual base salary and highest earned academic degree for incumbents of the following positions as of January 31, 2008.

	Annual Base Salary	Highest Academic Degree of Incumbent					
Director of Development/Fundraising	\$ _____	BA/BS	MA/MS	MSW	PhD	Other	specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Director of Research	\$ _____	BA/BS	MA/MS	MSW	PhD	Other	specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Director of Marketing/Public Relations/Communications	\$ _____	BA/BS	MA/MS	MSW	PhD	Other	specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Director of Program Services/Clinical Services	\$ _____	BA/BS	MA/MS	MSW	PhD	Other	specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Director of Human Resources	\$ _____	BA/BS	MA/MS	MSW	Other		specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Project Director/Site Director/Program Manager*	\$ _____	BA/BS	MA/MS	MSW	Other		specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Office Manager*	\$ _____	High School Diploma	Associate Degree	BA/BS	Other		specify
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		

* report average salary and skip academic degree if there are multiple incumbents for Project Director and Office Manager positions.

[Next](#)

2008 Canadian Compensation Survey

IV. Direct Service Positions

Please report the lowest and highest annual salaries for incumbents of the following positions as of January 31, 2008. Provide actual employee salaries and not salary ranges.

	Lowest Base Salary	Highest Base Salary
Social Service Worker	\$ _____	\$ _____
Social Worker (BSW)	\$ _____	\$ _____
Social Worker (MSW)	\$ _____	\$ _____
Child and Youth Worker (Residential programs)	\$ _____	\$ _____
Child and Youth Worker (Outpatient, day treatment and community programs)	\$ _____	\$ _____

Next

2008 Canadian Compensation Survey

V. Staffing Levels

Our organization defines a work week for full-time employees as:	<input type="text"/> hours per week
------------------------------------------------------------------	----------------------------------------------

	Number of Full Time Staff	Number of Part Time Staff	Number of Contracted Staff
Total Number of Management Staff (count all positions above social worker)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Number of Professional or Direct Service Staff	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Number of Other Staff (count all positions not enumerated above)	<input type="text"/>	<input type="text"/>	<input type="text"/>

If necessary, provide details or comments here regarding staffing levels:



Next

2008 Canadian Compensation Survey

VI. Health Insurance

Agency pays for health insurance for full-time employees? (if No, skip questions below and proceed to next screen)

- Yes
 No

Agency pays a set dollar amount toward the health insurance premium?	
<input type="radio"/> Yes	<input type="radio"/> No
\$ _____ towards single plan	
\$ _____ towards family plan	

Agency pays for a percentage of the health insurance premium?	
<input type="radio"/> Yes	<input type="radio"/> No
_____ % towards single plan	
_____ % towards family plan	

What is the minimum number of hours per week needed to qualify for health insurance coverage? _____ hours per week

Does the agency pay the premium in proportion to time worked?

- Yes
 No

If necessary, provide details or comments here regarding health insurance:



Next

2008 Canadian Compensation Survey

VII. Other Benefits

Does the organization offer the following benefits for full-time employees? **Check all that apply**

	Benefit Offered/Provided?	Agency Contributes to Benefit?
Dental Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Vision Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Life Insurance	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Short-term disability	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Long-term disability	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

Employee Assistance Program (EAP) offered/provided?	
<input type="checkbox"/> Yes	If yes: _____ maximum number sessions per year

If necessary, provide details or comments here regarding other benefits:



Next

2008 Canadian Compensation Survey

VIII. Retirement Plan

Does the organization offer the following benefits for full-time employees?

Retirement plan offered/provided? (if No, skip questions below and proceed to next screen)

Yes

No

	Benefit Offered/Provided?		
RRSP Retirement Plan	<input type="checkbox"/> Yes		
	Benefit Offered/Provided?	Agency Contributes to Plan?	Percent of Salary Contributed by Agency?
Employer Pension Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	_____ %

If necessary, provide details or comments here regarding retirement plan:

Next

2008 Canadian Compensation Survey

IX. Paid Annual Leave

Consider full-time staff benefits for the following categories. Please note the timeframe differences.

Vacation Days - (Minimum)	days per year
Vacation Days - (Maximum)	days per year
Personal Days	days per year
Statutory Holidays	days per year
Religious Holidays	days per year
Education Leave	days per year
Sick Leave	hours per month
Compassionate Leave - (Minimum)	days per event
Compassionate Leave - (Maximum)	days per event

If necessary, provide details or comments here regarding annual leave:



Next

2008 Canadian Compensation Survey

X. CEO Benefits

Did the Executive Director/CEO receive any of the following benefits in 2007? **Check all that apply**

Bonus	<input type="checkbox"/> Yes	\$ _____ in year 2007
Sabbatical Leave	<input type="checkbox"/> Yes	_____ months (normalized per 10 years)
Car Allowance	<input type="checkbox"/> Yes	\$ _____ in year 2007
Professional Association Membership(s)	<input type="checkbox"/> Yes	
Professional Development/Education	<input type="checkbox"/> Yes	
Service Club Membership(s)	<input type="checkbox"/> Yes	
Social Club Membership(s)	<input type="checkbox"/> Yes	

Did the Executive Director/CEO receive a salary increase (in 2007)?

- Yes
 No

If yes, what was the percent increase? _____ %

Next

2008 Canadian Compensation Survey

We appreciate your taking the time to complete this survey online. We would like to improve on this survey. You may leave any comments or suggestions below that might help us improve this survey's ease of use.



Survey prepared by (Required):	<input type="text"/>	Preparer's email (Required):	<input type="text"/>
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[Submit Survey](#)

Please address technical questions to:
Laura Pinsoneault, Research Analyst (800) 221-3726, Ext. 3644, lpinsoneault@alliance1.org

Survey Submitted

Thank you for completing the 2008 Canadian Compensation Survey.

Please address any technical questions or problems with the survey to:

Laura Pinsoneault, Research Analyst (800) 221-3726, Ext. 3644, lpinsoneault@alliance1.org

All other questions should be addressed to your association:

[Family Service Canada](#)

[Family Service Ontario](#)

[Children's Mental Health Ontario](#)

Learn more about the services offered by the Alliance's Department of Research and Evaluation Services

To view our recently published brochure, click [here](#) [PDF] 850kb

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