



Healthy Connecticut 2020
The Connecticut State Health Improvement Plan

Agenda

Focus Area: Injury & Violence Prevention

Meeting 4: Objectives & Strategies

Date: June 26, 2013

Time: 9:00 a.m. – 12:00 p.m.

Location: 300 George Street, New Haven, CT

Time	Agenda Item	min	Notes
9:00 – 9:15	<ul style="list-style-type: none"> • Sign-in • Welcome & Introductions • Overview of Agenda 	<i>15 min</i>	
9:15 – 10:00	<ul style="list-style-type: none"> • Continue to develop 1-2 Objectives for the following areas of concentration: <ul style="list-style-type: none"> ○ Combat Injuries ○ Occupational Injury 	<i>45 min</i>	
10:00 – 11:45	<ul style="list-style-type: none"> • What is a strategy? Review definition & examples • Review sample strategies and develop strategies for each objective 	<i>1hr 45min</i>	
11:45 – 12:00	<ul style="list-style-type: none"> • Next Steps <ul style="list-style-type: none"> ○ Phase objectives for implementation during the first 1-3 years of the project ○ Brainstorm potential resources and partners for areas of concentration ○ Scheduling additional meeting time 	<i>30 min</i>	

Meeting Notes

Present:

Amanda Durante (co-chair), Pina Violano (co-chair), Carol Bower (DPH), Nadine Fraser, Faith Vos Winkel, and Amanda Ayers (HRiA).

Phone:

Donna Campbell, Phyllis DiFiori, Deb Shulansky, Peggy Gallup, Paul Possenti.

Feedback on Minutes of last meeting:

- Areas of Concentration:
 - Clarify with commissioner - Combat & Occupational injuries (don't have full control (OSHA?) and occupational committee) Environmental work group is addressing occupational illness
 - Add Sports injuries
- Objectives are more general, strategies are more specific. Looking at Homicide/Community violence objectives; may change to be more broad and make strategies more specific.

- Falls:

Objective 1: Prevent an increase in fall related deaths among all persons.

Objective 2: Prevent an increase in fall related deaths among adults aged 65 years and older.

Objective 3: Prevent an increase in Emergency Department fall related deaths among adults aged 65 years and older.

****Change Objective 3: Prevent an increase in ED fall related visits among all ages.**

- Homicide/Community Violence:

Consider disparities; like to focus objective on disparity directly

Objective 1: Reduce the firearm homicide rate in BNH males between the ages of 12 and 35 by X to X.

Objective 2: Reduce the firearm injury rate in BNH males between the ages of 12 and 3.5 by X to X.

Objective 3: Reduce the incidence of rape.

Change Homicide/Community Violence objectives to:

Objective 1: Reduce the firearm homicide rate.

Objective 2: Reduce ED visits related to domestic violence.

Objective 3: Reduce the incidence of rape.

Objective 4: Reduce the number of family violence arrests.

Motion to accept the minutes. Minutes accepted.

- Connecticut concussion task force – no central registry right now to collect and measure data for concussions.
 - Sports concussions should be listed as so in the ED. – Coded as the mechanism of injury.

Traumatic Brain Injury:

Objective 1: Decrease the incidence of deaths, hospitalizations and ED visits resulting from TBI.

Objective 2: Reduce the incidence of sports related brain injury. - add

What is a strategy?

Review strategy sheet:

- How do we get from where we are to where we want to be?
- How will we achieve our objective through action?
- Identify, advocate, etc.

Areas of Concentration for Injury & Violence Prevention:

1. Motor Vehicle Crashes
2. Homicide/Community Violence
3. Poisoning
4. Suicide
5. Falls
6. Child Maltreatment
7. Traumatic Brain Injury
8. Combat Injuries
9. Occupational Injury
10. Sexual Assault
11. Sports Injuries

Motor Vehicle Crashes:

Objective 1: Decrease **alcohol-related crashes**, motor vehicle crash- related injuries and fatalities from X to X by 2020.

- Strategy 1: Advocate for increased DUI and sobriety check-points.
- Strategy 2: Expand the current educational awareness campaign on driving under the influence.
- Strategy 3: Expand the current educational awareness campaign on CT graduated driving licensing laws.
- Strategy 4: Advocate for driver re-testing for drivers aged 80 and over.
- Strategy 5: Advocate for high visibility enforcement of distracted driving laws.
- Strategy 6: Advocate for increased public awareness of the adverse effects of poly-pharmacy. (especially among the older adult population)

Objective 2: Reduce the number of unrestrained occupants in fatal crashes from X to X by _____ delete this objective

Objective 3: Increase the statewide observed seatbelt rate to at least 95% by 2020.

- Strategy 1: Expand the number of State agencies doing high-visibility enforcement events.
- Strategy 2: Expand the current educational awareness campaign on the consequences of not wearing a seatbelt.

Objective 4: Increase the % of children in child safety restraints. (data source?)

- Strategy 1: Recruit and train child passenger safety technicians.
- Strategy 2: Develop educational materials for non English speaking and low literacy populations on child passenger safety.
- Strategy 3: Expand screening and distribution of child restraint seats.
- Strategy 4: Align State child safety restraint requirement with American Academy of Pediatric guidelines.

Objective 5: Decrease the injury and fatality rate for 16-19 yr. olds. delete

Objective 6: Decrease the injury and fatality rate for motorcycle drivers and passengers by X to X.

- Strategy 1: Advocate for reinstatement of a helmet law for motorcycle drivers and passengers.

Objective 7: Decrease motor vehicle traffic death rate for people ages 80 and over by X to X. delete

Child Maltreatment:

Objective 1: Reduce the incidence of child maltreatment injuries and deaths.

- Strategy 1: Advocate for increased screening, surveillance, recognition and reporting for mandatory reporters.
- Strategy 2: Train mandatory reporters on signs and symptoms of child maltreatment.
- Strategy 3: Advocate for the expansion of who is a mandatory reporter.
- Strategy 4: Promote the awareness of the Careline for medical personnel.
- Strategy 5: Promote positive parenting techniques that are culturally and linguistically appropriate.
- Strategy 6: Advocate for programs to address and serve families “at risk” for child maltreatment.

Objective 2: Reduce nonfatal child maltreatment. delete

Traumatic Brain Injury:

Objective 1: Decrease the incidence of deaths, hospitalizations and ED visits resulting from TBI.

- Strategy 1: Collaborate with partners to provide awareness of leading causes of and prevention measures for TBI including falls, sports-related TBI, motor vehicle crashes, suicide attempts, abusive head trauma in children and domestic violence.
- Strategy 2: Educate the public and providers about the effects of TBI including the long term effects associated with head injury.
- Strategy 3: Educate the public and providers that concussions are brain injuries and the signs, symptoms and what are the appropriate treatments for concussions.
- Strategy 4: Develop and distribute standardized protocol for post-concussion management.

Discussion about adding an additional objective: Objective 2: Reduce the incidence of sports related brain injury, however, the group decided that sports-related TBI was covered through strategy 1.

Homicide/Community Violence:

Objective 1: Reduce the firearm homicide rate.

- Strategy 1: Advocate for and increase programs that support employment opportunities for all skill sets.
- Strategy 2: Advocate for and support programs that offer educational incentives to stay in school.
- Strategy 3: Ensure the implementation of the gun offender registry and penalties for use of a firearm in the commission of a crime legislation.
- Strategy 4: Support and promote anti-gang or violent group initiatives, such as Project Longevity.

Objective 2: Reduce ED visits related to domestic violence.

Objective 3: Reduce the incidence of sexual violence. (change from rape)

Objective 4: Reduce the number of family violence arrests.

CTkidsreportcare.org - Donna in drop box

Poisoning:

Objective 1: Decrease the rate of death and injury due to unintentional or undetermined poisoning.

Next Steps:

The group formulated a strategy for completing the work remaining for this work group:

1. Seeking input/guidance on objectives for:
 - A. Combat/Sports injuries
 - B. Occupational injuries
2. Developing strategies for:
 - A. Homicide and Community Violence (to include family, sexual and bullying)
 - B. Unintentional Poisoning
 - C. Falls
 - D. Suicide
 - E. TBI - possibly additional strategies here upon review of the group
3. Phase objectives for first three years of project
4. Generate partners and resources for each area of concentration

Upon review of these minutes, please feel free to weigh in on strategies and provide feedback to Amanda Ayers @ aayers@hria.org by July 10th. Feedback will be compiled and sent out to the group for review and input.

Meeting adjourned at 1:00 p.m.