

Injury Prevention Task-force Subcommittee

Thursday, March 3, 2016 @ 9:00

AGENDA	COMMENTS
I. Call to order	TSOMC - medical director is Dr. Aboutanos; ACS consultative recommendations; FOIA (Freedom of Information Act) requires us to meet in person:
II. Introductions	Diamond (UVA), Linda (INOVA), Corey (VCU), Joanie (HCA), Cassie (CNRV), SarahBeth(RMH), Melissa (MaryWashington), and Amy (MaryWashington)
III. Overview of Lead Taskforce Meeting	State Trauma plan with 6 subcommittees - our committee to do an injury prevention plan, <b>look at different states injury prevention plans</b> . At some point there was an injury prevention plan but it has not been updated in 5 years+ the plan was implemented by the VDH, <b>Heather Board</b> has all the information. Once the grant went away, the group dispersed. VDOT is the holder of a grant for safe route to schools The American College of Surgeons recommend a closer relation ship with the office of EMS and traffic accidents.
a. Structure	Pg 46, structuring the committee,
b. Mission/Vision/Values	
c. HRSA Model Trauma System Planning	
IV. Injury Prevention Taskforce Purpose	Come up with a trauma injury prevention state plan

<p>V. Review the American College of Surgeons (ACS) System recommendations for Injury Prevention</p>	<p>pg. 11 - Use HERSA as a guide to develop and implement injury prevention state plan, <b>pg 13</b> injury epidemiology, <b>pg 14</b> - optimal elements, <b>pg 15</b> analyze current status, they felt we were fortunate to have an epidemiologist, epidemiologist is closely aligned with injury prevention data, population based data, recommend clinical data, prehospital and trauma registry data for injury prevention, <b>pg 16</b> utilizing prehospital and trauma registry data, no statewide data has been introduced since 2011 as a result the trauma system does not have accessed, no fact sheets made since 2010 - VDH makes those fact sheets; YRBS and online reporting system would be utilized, <b>pg 17</b> - ensure that the injury epidemiologist has access to the prehospital and trauma registry data to produce detailed description of injury for Virginia, Seek legislative authority to establish a state emergency department discharge dataset, encourage the new trauma statistician to develop a relationship with the injury epidemiologist, integrate elements of injury every 3 years, frame the report to demonstrate the value of the trauma system for response to the burden of injury, <b>pg 30</b> - build a broad coalition of state holders, Ensure that the information about the trauma system, as well as links to injury data and injury prevention resources, are readily available on the OEMS website and social media outlets, <b>pg 43</b> - prevention and outreach, <b>pg44</b> - recommendations and what we currently have, <b>pg45</b> - injury needs assessment annually , <b>pg46</b> - members of the committee doing predominately, <u><b>injury prevention manager</b></u> at the state office, trauma program managers to validate our priorities from hospital stand point, there is no stable funding for injury prevention, have a plan implemented in 2016 and implement an initiative in 2017, strengthen trauma designation with injury prevention, web-based clearinghouse of data for public use.</p>
<p>VI. Injury Prevention plan &amp; timeline to accomplish goals</p>	<p>Plan needs to be completed by December 2016.</p>
<p>VII. Unfinished business</p>	

a. Previous work completed by IP subcommittee	
VIII. Public Comment	
IX. Adjournment 11am	

ACTION
looking at Hawaii's state plan, Florida's state plan, Georgia's state plan, figuring out our priorities,

30 minute video

[https://www.vdh.virginia.gov/OEMS/Files\\_Page/trauma/ACSVirginiaTSCReport2015.pdf](https://www.vdh.virginia.gov/OEMS/Files_Page/trauma/ACSVirginiaTSCReport2015.pdf); we are going to have to have a sole FTE for injury prevention, Community needs assessment for your coverage region. We need to regionalize our injury prevention using the diaster regions versus current EMS regions.

Community needs assessment and old prevention plan will be emailed out recommendations for change,

Looking at the VDH plan, community needs assessment and other state's strategic plans, come up with suggest list of committee members, guidelines, timeline, drafted outline of how we want to do an assessment. 90 days of how we can handle the plan not how we will handle the plan, google group made public, but no chatting, emailing vs conference call, injury prevention symposium

Meet quarterly in Richmond, and then meet monthly where?
DriveSmartVA conference 9/18 and 9/19 distracted driving symposium, businesses and corporate
Next meeting April 18 from 1000-1200 at Fairfax Inova, May 16th 1000-1200 at Carilion RMH, June 2nd 0900-1100 @ VDH Perimeter center