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HCT2020 Year 1: 2016 Action Agenda Injury and Violence Prevention

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Focus Area 5: Injury & Violence Prevention

Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.

Area of Concentration: Fall Prevention

SHIP Objective IV-1: Decrease by 10% the number of fall deaths among persons of all ages.

Dashboard Indicator: [Number of deaths from falls among persons of all ages in Connecticut.](#)

Strategies	Actions and Timeframes	Partners Responsible	Progress
<p>Engage healthcare, childcare, and other care providers to implement fall prevention initiatives</p>	<p>a. Communicate with Primary Care Providers (PCP) on training opportunities – CDC STEADI (Stopping Elderly Accidents, Deaths, and Injuries) training with CME’s; online (Q1)</p> <p>b. PCP’s screen for adult fall risk (Q1) – group would like to recommend that this include screening for:</p> <ul style="list-style-type: none"> a. Exercise b. Medication c. Vision d. And home environment 	<ul style="list-style-type: none"> • Injury Prevention Center at Hartford Hospital • Connecticut Collaboration for Fall Prevention • CT State Medical Society • Department of Aging • Local Public Health Departments • SHIP Advisory Council • DPH • Senior Centers • Department of Insurance 	<p>04.01.16</p> <ul style="list-style-type: none"> • Hartford Healthcare has created a fall prevention assessment tool to be piloted 2nd quarter. • Dept. of Aging has dispersed grant dollars throughout the state to address fall prevention interventions. • DPH contracts with Local Health Departments (LHD) recommending the use of evidence based screening <p>7/1/16 Hartford Hospital Model project at Duncaster has begun screening and subject enrollment.</p>
<p>Promote implementation of evidence-based multi-faceted programs for community dwelling older adults that integrate fall risk reduction strategies</p> <ul style="list-style-type: none"> • Universal fall prevention screening for all seniors • All communities have access to fall prevention programming • Promote certification of trainers <p>Need definitions:</p> <ul style="list-style-type: none"> • Residential = living within a facility • Community = non-residential 	<p>a. Identify evidence-based programs Ex: Tai Ji Quan: Moving for Better Balance (Q1) identify link for CDC Evidence based programs; Action Team member organizations promote on websites</p> <p>b. Increase the number of Tai Chi programs that conform to the ‘Moving for Better Balance’ model (Q1)</p> <p>c. Promote the availability of fall prevention programs at Senior Centers (Q2)</p> <p>d. Facilitate communication between PCP’s and Senior Centers regarding referrals to fall prevention programs (Q3)</p> <p>e. Connect to faith based communities to promote the availability of fall prevention initiatives in their community (Q3)</p> <p>f. Offer train the trainer programs</p>	<ul style="list-style-type: none"> • Injury Prevention Center at Hartford Hospital • Connecticut Collaboration for Fall Prevention • CT State Medical Society • Department of Aging • Local Public Health • Senior Centers • DPH Injury Prevention 	<p>04.01.16</p> <ul style="list-style-type: none"> • Hartford Healthcare is working with Duncaster Retirement Community to conduct research on screening and referral to services. <p>7/1/2016 Hartford Hospital Model project at Duncaster has begun screening and subject enrollment.</p>

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Decrease the number of secondary and tertiary lift assist and transport calls	<ul style="list-style-type: none"> a. Engage leadership at OEMS b. Capture data on the number of repeat fall and lift assists in the pre-hospital system. (Q1) c. Establish a framework for effective guidelines to establish a referral system; care coordination with follow-up (Q1) d. Implement proactive follow-up to referral process (Q3) e. North Central EMA Presidents (Q2) 	<ul style="list-style-type: none"> • Office of Emergency Medical Services • CT EMS Advisory Board • VNA • Senior Centers • CADH – CT Association of Directors of Health • DESPP/DSET 	<p>04.01.16</p> <ul style="list-style-type: none"> • LLHD has initiated the discussion in southeastern CT and spreading north to northeast CT.
Resources Required (human, partnerships, financial, infrastructure or other)			
<ul style="list-style-type: none"> • Partnerships, collaboration & integration 			
Monitoring/Evaluation Approaches			
<ul style="list-style-type: none"> • Provide quarterly report outs 			

Focus Area 5: Injury & Violence Prevention

Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.

Area of Concentration: Opioid Poisoning

SHIP Objective IV-3: Reduce by 10% the number of deaths caused by unintentional poisonings.*

SHIP Objective IV-4 Decrease by 10% the number of hospitalizations for unintentional poisonings.*

Dashboard Indicator:

**2016 efforts will focus on unintentional poisonings related to opioids and prescription drugs. These objectives will be addressed collaboratively with the Mental Health and Substance Abuse ACTION Team.*

Strategies	Actions and Timeframes	Partners Responsible	Progress
Educate and inform consumers regarding the risks and benefits of regulated products using strategies appropriate to culture, language, and literacy skills.	<ul style="list-style-type: none"> a. Work with Regional Action Councils (RACs) to educate the public on prescription drug-related consequences b. Partner with the DPH Public Health Campaign to produce a prescription drug misuse public health alert for consumers c. Link to website with information on the locations and proper use of drop boxes for public medication disposal 	<ul style="list-style-type: none"> • State of CT DMHAS Opioid Prevention Workgroup • State of CT Department of Consumer Protection • Alcohol and Drug Policy Council (ADPC) 	<p>7.1.2016</p> <ul style="list-style-type: none"> • Website currently contains information on the location of unused medication drop boxes and the list of pharmacies that carry Narcan • Uconn approved and published in their online newsletter, the Daily Digest, which is sent to students and faculty each day the PSA. See link to announcement under "Saftey, Health and Wellness:" http://dailydigest.uconn.edu/publicEmailView.php?cid=74&id=1774.
Educate health care professionals on proper opioid prescribing, brief screening, intervention referral and treatment, and effective use of prescription drug monitoring programs.	<ul style="list-style-type: none"> a. Identify barriers to improved prescribing practices, such as patient education, reimbursement, and availability of non-opioid therapies for pain management b. Promote adoption of opioid prescribing guidelines, such as SAMHSA's in-person continuing education course, <i>Prescribing Opioids for Chronic Pain</i> c. Work with UCONN Health to offer CT SBIRT training d. Work with Connecticut Pharmacists Association to engage pharmacies and prescribers in promoting proper medication storage to customers/patients when dispensing opioids, including the sale and use of personal medication lock boxes 	<ul style="list-style-type: none"> • Bristol Hospital • Connecticut Institute For Communities • State of CT Department of Consumer Protection • State of CT Department of Correction • State of CT DMHAS Office of Multicultural Healthcare Equality • UCONN Health • ADPC (<i>educate on prescriber guidelines</i>) 	<p>04.01.16</p> <ul style="list-style-type: none"> • DPH and its partners in the state developed and disseminated evidence based PSA to address the opioid/prescription drug issues in CT youths • DPH and its partners in collaboration with the governor's office launched a state wide website called www.drugfreect.org to address the issue of opioid/prescription drug • DPH using the recently awarded funding from CDC will carry out community health systems intervention in CT communities via the local health departments <p>7.01.2016</p> <ul style="list-style-type: none"> • DCP in collaboration with DPH using funding from CDC will conduct an awareness campaign to educate prescribers and dispensers on the benefits of registering and using the prescription drug monitoring program (PDMP).

Focus Area 5: Injury & Violence Prevention

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Area of Concentration: Opioid Poisoning

SHIP Objective IV-3: Reduce by 10% the number of deaths caused by unintentional poisonings.*

SHIP Objective IV-4 Decrease by 10% the number of hospitalizations for unintentional poisonings.*

<p>Facilitate controlled drug disposal programs, including official prescription take-back events and local drop-boxes.</p>	<p>a. Support DCP efforts to increase the number of prescription drug drop boxes for public medication disposal</p> <ul style="list-style-type: none"> • Update mapping of existing drop boxes <p>b. Increase state level efforts to publicize National Drug Take Back Days sponsored by the DEA</p> <p>c. Work with RAC's to develop and disseminate Point of sale/distribution signage for pharmacies in all RAC regions across the state to promote drop boxes and awareness of opioid poisoning prevention. (Q1) <i>(collaborate with MHSA ACTION Team)</i></p>	<ul style="list-style-type: none"> • State of CT DMHAS Opioid Prevention Workgroup • State of CT DCP • Police Chiefs • ADPC • Regional Action Councils • CT Poison Control Center 	
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Resources Required (human, partnerships, financial, infrastructure or other)

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Monitoring/Evaluation Approaches

- Provide quarterly report outs

Focus Area 5: Injury & Violence Prevention

Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.

Area of Concentration: *Motor Vehicle Crashes*

SHIP Objective IV-6: Reduce by 5% the number of deaths from motor vehicle crashes.

Dashboard Indicator: [Number of deaths from motor vehicle crashes in Connecticut.](#)

Strategies	Actions and Timeframes	Partners Responsible	Progress
<p>Advocate for high visibility enforcement of distracted driving laws</p>	<p>a. Training for stronger enforcement including prosecution for violations (Q1)</p>	<ul style="list-style-type: none"> • CT Police Chief’s Association • DOT • DESPP/POST • State’s Attorney’s Office • DMV 	<p>04.01.16</p> <ul style="list-style-type: none"> • DOT gearing up for high visibility enforcement during April and August. Will have an increased presence of enforcement on highways. Providing grants to local police departments for extra enforcement and education • May, June, and July will disseminate social norm messaging • DMV currently offers education classes (violators class) 2-hour program. <p>7/1/2016 Law Enforcement issued 12,000 citations for 14-296aa</p>
<p>Promote proper installation and distribution of child restraint seats for newborns</p>	<p>a. Partner with highway safety to increase visibility of fitting stations (Q1)</p> <p>b. Promotion fitting station locations via the website (Q1)</p> <p>c.)</p> <p>d. Promote universal car seat inspection at time of discharge (Q3)</p> <p>e. Expanded education of law enforcement on child restraint seats (Q4)</p> <p>f. Need to conduct an environmental scan of available locations - Pat</p> <p>g. Add to Emergency Medical Service toolkit for local planning - recommendations to include in to planning the promotion of proper installation with their plans – Mike/Jonathan??</p>	<ul style="list-style-type: none"> • DOT • DMV • Safe Kids CT • Hospitals • Yale New Haven Hospital • DCF 	<p>04.01.16</p> <ul style="list-style-type: none"> • Discussed partners including central link to promote availability of stations <p>7/1/2016</p>

Focus Area 5: Injury & Violence Prevention			
Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.			
Area of Concentration: <i>Motor Vehicle Crashes</i>			
SHIP Objective IV-6: Reduce by 5% the number of deaths from motor vehicle crashes.			
Expand the current educational awareness campaign on Connecticut graduated driving licensing laws	<ul style="list-style-type: none"> a. Continued and increased education of parents on the GDL (Q1) b. Expanded education of law enforcement on GDL (Q4) 	<ul style="list-style-type: none"> • Police • Driver’s Education Companies • DMV • DOT • CT Driving School Professions • IMPACT – parent advocacy group 	<p>04.01.16</p> <ul style="list-style-type: none"> • DPH has included in a recent grant proposal to the CDC to address graduated driver licenses • CT DMV endorsed the Model curriculum developed by CT Children’s Medical Center for the 2-hour parent class <p>7/1/2016</p> <ul style="list-style-type: none"> • CDC GDL proposal NOT FUNDED • CT Children’s proposal to AAA Foundation NOT FUNDED
Resources Required (human, partnerships, financial, infrastructure or other)			
<ul style="list-style-type: none"> • 			
Monitoring/Evaluation Approaches			
<ul style="list-style-type: none"> • Provide quarterly report outs 			

Focus Area 5: Injury & Violence Prevention

Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.

Area of Concentration: Suicide Prevention

SHIP Objective IV-12: Reduce by 10% the age-specific suicide rates for persons 15 to 64 years of age.
 SHIP Objective IV-14: Reduce by 20% the proportion of students in grades 9-12 who attempted suicide in the past 12 months.

- Dashboard Indicator (IV – 12):**
- [Rate of suicide for persons 15 to 19 years of age in Connecticut](#)
 - [Rate of suicide for persons 20 to 24 years of age in Connecticut](#)
 - [Rate of suicide for persons 25 to 34 years of age in Connecticut](#)
 - [Rate of suicide for persons 35 to 44 years of age in Connecticut](#)
 - [Rate of suicide for persons 45 to 54 years of age in Connecticut](#)
 - [Rate of suicide for persons 55 to 64 years of age in Connecticut](#)
- Dashboard Indicator (IV – 14):**
- [Proportion of Connecticut high school students in grades 9-12 who attempted suicide in the past 12 months.](#)
 - [Proportion of Connecticut students in grades 9-12 who seriously considered attempting suicide.](#)

*****Injury and Violence Prevention ACTION Team will work with the Connecticut Suicide Prevention Advisory Board to develop action items and align efforts with the Connecticut Suicide Prevention Plan 2020, which was recently released. Strategies and Actions will be developed in collaboration with this existing group in 2016.**

Strategies	Actions and Timeframes	Partners Responsible	Progress
<p>Coordinate and implement suicide prevention program and training around the state.</p>	<p>a. Strengthen and expand Question, Persuade and Refer (QPR) and Assessing and Managing Suicide Risk (AMSR) trainings</p>	<ul style="list-style-type: none"> • State Department of Education • CTSAB • DMHAS • DCF • Wheeler Clinic • DPH 	<p>04.01.16</p> <ul style="list-style-type: none"> • NA <p>7.01.2016</p> <ul style="list-style-type: none"> • DPH has executed a contract with Wheeler clinic to conduct 3 sessions of training on AMSR. • DMHAS, DPH and DCF agencies are collaborating on a SAMHSA grant (Garret Lee Smith) to implement suicide prevention programs in the state.
<p>Provide resources and education on college campuses to promote wellness and prevent suicide care.</p>	<p>a. Expand fresh check days on college campuses</p>	<ul style="list-style-type: none"> • CTSAB • Jordan Porco Foundation (JPF) • Wheeler Clinic • DPH 	<p>04.01.16</p> <ul style="list-style-type: none"> • NA <p>7.01.2016</p> <p>DPH has executed a contract with Wheeler clinic and a sub contract with JPF to expand fresh check days on college campuses</p>

Resources Required (human, partnerships, financial, infrastructure or other)

- Monitoring/Evaluation Approaches**
- Provide quarterly report outs

Focus Area 5: Injury & Violence Prevention			
Goal 5: Create an environment in which exposure to injuries is minimized or eliminated.			
Area of Concentration: Sexual Violence			
SHIP Objective IV-18: Reduce by 10% the incidence of sexual violence.			
Dashboard Indicator:			
Strategies	Actions and Timeframes	Partners Responsible	Progress
Disseminate best practices and effective primary prevention strategies of sexual violence.	<ul style="list-style-type: none"> a. Promote and expand the ‘Where do you stand?’ campaign on college campuses b. Engage State Department of Education in conversations to expand the ‘Where do you stand?’ campaign to high schools c. Create a statewide, online campaign to highlight best practices and effective primary prevention strategies. d. Adapt current sexual violence prevention campaign and curriculum for use with adolescent males according to best practices. e. Provide ongoing and on-demand training and technical assistance to all (9) rape crisis centers and other key partners on the implementation of effective sexual violence prevention strategies 	<ul style="list-style-type: none"> • State Department of Education • CT Alliance to End Sexual Violence (formerly CONNSACS) • CT Alliance to End Sexual Violence • DPH Sexual Violence Prevention Coordinator and CT Alliance to End Sexual Violence 	<p>04.01.16</p> <ul style="list-style-type: none"> • The Where Do You Stand? campaign is now on 17 college campuses as well as the US Sub Base, and last year over 3,700 people attended a WDYS training. <p>07.01.16</p> <ul style="list-style-type: none"> • All 9 member centers were conducting WDYS campaign on college campuses during this period (total number of trainings and attendees will be reported 7/15/16) • Over 50 Sexual Assault Awareness activities were held throughout CT, and all activities featured WDYS materials • Beginning October 1, 2016 all regional and local school boards must implement sexual abuse and violence prevention curriculum in K-12 grades. The framework for this curriculum has been created and is currently being reviewed by SDE. Once finalized, there will be a press conference to present the framework and then the 6 Regional Education Service Centers around the state will train teachers on implementing the plan
Advocate for sexual assault educator training to build capacity for prevention efforts.	<ul style="list-style-type: none"> a. Hold Training Of Trainers with crisis centers b. Trainings for men who work with adolescent males on best practices for sexual violence prevention. c. The Male Leadership Council will convene to promote men becoming trained and involved in sexual violence prevention. 	<ul style="list-style-type: none"> • CT Alliance to End Sexual Violence • Crisis Centers • DPH 	<p>04.01.16</p> <ul style="list-style-type: none"> • All 18 advocates working at rape crisis centers were trained on the WDYS campaign this year • The Male Leadership Council has convened and so far this year 21 male leaders have been trained about sexual violence prevention <p>07.01.16</p> <ul style="list-style-type: none"> • 1 male Leader was approached about chairing the Male Leadership Council so that it can be a male only space to discuss sexual violence and prevention in CT. He agreed and meetings will convene shortly • A day long training for all advocates about transforming justice was held 6/23. It was an in-depth look at the experience of sexual violence, emphasizing Black, Native and Latino LGBTQ people
Resources Required (human, partnerships, financial, infrastructure or other)			
Monitoring/Evaluation Approaches			
<ul style="list-style-type: none"> • Provide quarterly report outs 			