

2009–2013 Florida Injury Prevention Strategic Plan

Injury Prevention for All



2010 Annual Status Report

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Executive Summary

The 2009–2013 Florida Injury Prevention Strategic Plan serves as a successor to Florida’s 2004–2008 Injury Prevention Strategic Plan, which is considered nationally as a model state plan. The Florida Department of Health, Office of Injury Prevention (OIP) brought together state and local prevention partners to develop the 2009–2013 Injury Prevention Strategic Plan, with a mission to reduce Florida’s injury burden through leadership, education, and policy.

Florida is the first state injury prevention program to complete the implementation of an existing five-year strategic plan while drafting a successor plan. The OIP continues its commitment to reduce Florida’s needless burden of injuries by collaborating with the Florida Injury Prevention Advisory Council (FIPAC) and Strategic Plan Goal Teams (Goal Teams).

Based on Florida’s 2004–2008 experience, yearly action plans maintained focus and accountability throughout plan implementation and will remain an integral part of the 2009–2013 plan processes.

This document summarizes the activities of the OIP and FIPAC towards implementation of the 2010 Action Plan. Overall 92.5% of the plan activities for 2010 were completed (111/120 activities). The goals of the 2009–2013 Florida Injury Prevention Strategic Plan are listed below:

Goal 1: “Establish a sustainable infrastructure that provides leadership, funding, data, advocacy, and evaluation for injury prevention”—88% of activities completed (22/25).

Goal 2: “Facilitate opportunities for collaborative injury prevention efforts in Traffic Safety, Poisoning, Interpersonal Violence, Suicide, Child Maltreatment and other injuries.”—100% of activities completed (16/16).

Goal 3: “Establish a collaborative effort to provide statewide direction and focus for fall-related injury prevention for Florida’s seniors.”—96% of activities completed (26/27).

Goal 4: “Establish a collaborative effort to provide statewide direction and focus for early childhood water safety and drowning prevention in Florida.”—86% of activities completed (19/22).

Goal 5: “Enhance the skills, knowledge and resources of Florida’s injury prevention workforce.”—93% of activities completed (13/14).

Data Workgroup: “Establish a sustainable infrastructure that provides data for injury prevention.”—83% of activities completed (15/18).

For a complete list of 2010 strategies and activities, please see the 2010 Action Plan (Appendix A).

Goal 1

Establish a sustainable infrastructure that provides leadership, funding, data, advocacy and evaluation for injury prevention.

Strategies

- 1A:** Establish the 2009–2013 Florida Injury Prevention Advisory Council (FIPAC), Strategic Plan Goal Team Leaders and Strategic Plan Goal Teams, which is the advisory infrastructure for the implementation and coordination of injury prevention activities.
- 1B:** Facilitate the involvement of the Florida Injury Prevention Advisory Council and Strategic Plan Goal Teams in the implementation and coordination of injury prevention activities.
- 1C:** Facilitate, maintain and increase collaboration with the community level Department of Health Injury Prevention Liaison Network, which works with local community partners.
- 1D:** Develop and maintain a comprehensive Department of Health, Office of Injury Prevention web site.
- 1E:** Facilitate an annual injury prevention award recognizing at least one individual who has demonstrated commitment to injury prevention.
- 1F:** Facilitate at least one injury prevention training for the injury prevention workforce.
- 1G:** Facilitate the 2005–2010 Centers for Disease Control and Prevention (CDC) Public Health Surveillance and Prevention grant.
- 1H:** Pursue applicable injury prevention funding opportunities.
- 1I–M:** These strategies are discussed in the Data Workgroup section of this document (p. 8–10).
- 1N:** Strengthen policy and public awareness activities to reduce and prevention injuries.
- 1O:** Build injury prevention program evaluation capacity.

Members

The Florida Department of Health, Office of Injury Prevention serves as Goal Team 1.

- Towana Bonnett
- Leilani Gruener
- Sarah Hinkel-Young
- Heather McHenry
- Kyla Shelton
- Lisa VanderWerf-Hourigan

88% of Activities Completed (22/25)

Strategy 1A—Completed in 2009

Strategy 1B—100% Complete (3/3)

The Office of Injury Prevention was unable to hold conference calls in April and September due to staff vacancies. Priority was instead placed on Goal Team conference calls in order to ensure that all major activities were still able to be accomplished.

FIPAC meetings were held October 6–7, 2009 and June 22–23, 2010 in Tampa, Florida. During the May 27–28, 2009 FIPAC meeting it was decided that conference calls would be held on an as needed basis and Goal Team conference calls schedules would be determined by each Goal Team. Some Goal Teams hold regularly scheduled conference calls and some hold conference calls on an as needed basis. Goal Team Leaders are regularly contacted through email.

Strategy 1C—66% Complete (2/3)

Activity 1C(1): Update the CHD/CMS/Headquarters IP Liaison contact list.

The IP Liaison contact list is updated as necessary when a contact leaves their position. Surveys for upcoming training opportunities are developed as necessary. Quarterly emails are sent to IP liaisons as a reminder to add local injury prevention trainings and events to the Injury Prevention Calendar located at: <http://calendar.doh.state.fl.us/main.php?calendar=InjuryPrevention>.

Strategy 1D—100% Complete (4/4)

Activity 1D(1–2): Activities concluded in 2009.

Activity 1D(3–4): Staff revisions incorporated.

Reminders are sent to appropriate Office of Injury Prevention (OIP) staff members when assigned web pages have not been reviewed in 90 days. Submitted web requests are incorporated in a timely manner. Goal Team revisions are incorporated as necessary, and are typically sent to the appropriate Goal Team Liaison to submit.

Strategy 1E—75% Complete (3/4)

Injury Prevention Award nomination applications were made available in June of 2010. The nominations were reviewed by Office of Injury Prevention staff on September 17, 2010 and by the Award Select Committee on September 24, 2010. Dr. Virginia Dodd, Ph.D. was the selected recipient.

Activity 1E(4): Injury Prevention Award presented at the fall Florida Injury Prevention Advisory Council meeting.

The notice of nomination was sent of September 27, 2010. However due to travel restrictions, the fall Florida Injury Prevention Advisory Council meeting was unable to take place. It will be presented during the March 2011 FIPAC meeting.

Strategy 1F—100% Complete (3/3)

Activity 1F(2): Notify injury prevention stakeholders of injury prevention webinars and conference calls.

Stakeholders are notified of injury prevention webinars and conference calls as they come up through emails and through the OIP calendar. Also, stakeholders have access to the OIP calendar and can add their events as desired.

Activity 1F(3): Facilitate the CDC Grant required symposium.

The 2010 Water Safety and Drowning Prevention Marketing Symposium was held on June 2, 2010, at Broward General Medical Center in Fort Lauderdale, Florida. Speakers included representatives from: Ron Sachs Communication; the Florida Swimming Pool Association; Broward, Collier and Lee county health departments; and the Children's Services Council of Broward County

Strategy 1G—100% Complete (2/2)

Activity 1G(1): Meet financial and program reporting measures in CDC grant.

The 2009–2010 Grant Narrative and the 2010-2011 Cost Extension Application were submitted to the Centers for Disease Control and Prevention (CDC) on April 30, 2010.

Activity 1G(2): Meet performance measures in CDC grant.

Performance measures in the CDC grant were met and documented in the 2009–2010 Grant Narrative which was submitted to the CDC on April 30, 2010.

Strategy 1H—100% Complete (2/2)

Activity 1H(1): Subscribe to and monitor list serve announcements.

The OIP is subscribed to CDC and Safe States (formerly the State and Territorial Injury Prevention Directors Association [STIPDA]) list serve announcements.

Activity 1H(2): Network with other injury prevention organizations.

The OIP participates with other injury prevention organizations such as the CDC, Safe States, the Southeastern Regional Injury Control Network (SERICN), the Association of State and Territorial Health Officials (ASTHO), other state agencies and some local organizations or agencies involved in injury prevention.

Strategies 1I–1M are detailed in the Data Workgroup section.

Strategy 1N—50% Complete (1/2)

Activity 1N(1): Submit an injury related proposal to DOH management.

In Progress—The Director for the OIP has been working with the CDC National Center for Injury Prevention and Control (NCIPC) and Safe States on a CDC draft document, “Affecting Policy to Prevent Injuries and Violence” A Guide for State Health Department Injury and Violence Prevention Programs. In addition, a policy component was added to the latest CDC grant core VIPP application.

Activity 1N(2): Provide updates for injury prevention stakeholders regarding federal and state injury prevention legislation.

Email updates were sent by the OIP during and after the 2010 legislative session.

Strategy 1O—100% Complete (2/2)

Activity 1O(1): Identify current injury prevention evaluation methods currently used by injury prevention programs.

Evaluation methods were identified and include formative, process, impact and outcome evaluations.

Activity 1O(2): Identify injury prevention community program planning and evaluation experts who will act as consultants for the injury prevention community and include on the OIP website.

The OIP has contacted identified experts and is in the process of updating the OIP website to include a page specifically for evaluation resources.

Data

Establish a sustainable infrastructure that provides data for injury prevention.

Strategies

- 1I:** Obtain and format each data source in the Florida Injury Surveillance System.
- 1J:** Analyze injury data sources to complete required data reports and deliverables.
- 1K:** Monitor and evaluate opportunities for new or additional surveillance data sources.
- 1L:** Disseminate injury data to stakeholders.
- 1M:** Provide data consultation and guidance that supports injury prevention efforts of other goal teams.

Members

- **Michelle Akins**—Department of Health, State Child Abuse Death Review Committee
- **Nancy Tamariz**—Agency for Health Care Administration
- **Gillian Hotz**—University of Miami, Jackson Memorial Hospital
- **Anthony Llau**—Miami-Dade County Health Department
- **Michael Lo**—Department of Health, Trauma Program Manager
- **Joe Nelson**—State Emergency Medical Services Medical Director
- **Carl Schulman**—University of Miami, Jackson Memorial Hospital
- **Kyla Shelton**—Office of Injury Prevention Liaison

83% of Activities Completed (15/18)

Strategy 1I—100% Complete (4/4)

Between June and October, the five data sources in the Florida Injury Surveillance System were retrieved and formatted. The data sources include: Death Certificates, Hospital Discharge Data, Emergency Department Discharge Data, Crash Records, and Medical Examiner Drugs Identified in Deceased Persons Database.

Strategy 1J—100% Complete (5/5)

Between March and December, the following data reports/deliverables were completed to fulfill various grant requirements and complete various performance improvement measures: (1) Annual Report of Injury Morbidity and Mortality Indicators, (2) Electronic Injury Indicator Spreadsheets, (3) Sterling Quality Improvement Objectives Scorecard, (4) Division of Emergency Medical Operations Long Range Program Planning Indicators, and (5) Maternal and Child Health Block Grant Health Status Indicators and National Performance Measures.

Strategy 1K—Postponed until 2011

The Data Workgroup will meet in early 2011 to finalize their annual report on progress made towards monitoring and evaluating new or additional surveillance data sources. This activity was postponed until 2011 due to staff maternity leave.

Strategy 1L—66% Complete (4/6)

In 2010, the Office of Injury Prevention shared current injury data presentations during at least seven meetings and fulfilled numerous ad-hoc data requests. In addition, 13 injury-specific fact sheets and county-level profiles were developed and published to the office website throughout the year. Each of the 13 fact sheets contains GIS maps indicating levels of injury burden among rural and non-rural counties.

Activity 1L(4): Develop a detailed data analysis request form and post on the OIP website for ad hoc data requests.

This activity was postponed until 2011 due to the Injury Epidemiologist being involved in the grant writing process for the CDC Core Violence and Injury Prevention 2011–2016 grant applications and preparing for maternity leave at the end of 2010.

Activity 1L(6): Monitor and report on progress towards increased available of injury data on the Florida CHARTS website.

The Office of Injury Prevention continues to support the data expansion efforts of Florida CHARTS. For example, in 2010, data was provided to update injury portions of the Child and Adolescent Health, Minority Health, and Pregnancy and Young Child Profiles. In July 2009, the CHARTS team began adding non-fatal data to Florida CHARTS. In fact, two of the health profiles now contain non-fatal injury hospitalization data in addition to fatal injury data.

Activity 1L(7): Analyze and disseminate descriptive statistics on poisoning deaths using the linked death certificate/medical examiner databases.

This activity was postponed until 2011 due to staff involvement in the grant writing process for the CDC Core Violence and Injury Prevention 2011–2016 grant applications, staff maternity leave, and delays in obtaining department approval.

Strategy 1M—66% Complete (2/3)

Data consultation and guidance was provided in the form of injury fact sheets, ad-hoc data request, and technical assistance. The Injury Epidemiologist responded to several requests from Goal Teams 3 and 4. Requests were related to the economic impact of senior falls and the time and location of childhood drowning events. Average response time was one day. The most current senior falls and drowning fact sheets with 2008 data was distributed to Goal Teams 3 and 4 by email and appropriate liaison.

Activity 1M(3): Solicit data requests and questions from Goal Teams 3 and 4.

This activity was incomplete. There is no formal method of soliciting requests from Goal Teams 3 and 4. A formal solicitation method will be developed and implemented in 2011 with corresponding activities added to the 2011 Action Plan.

Goal 2

Facilitate opportunities for collaborative injury prevention efforts in: Traffic Safety, Poisoning, Interpersonal Violence, Suicide, Child Maltreatment and other injuries.

Strategies

- 2A:** Include a brief update (rotate topics) during each FIPAC and Goal Team meeting on each of the following: Traffic Safety, Poisoning, Interpersonal Violence, Suicide, Child Maltreatment, and other injuries.
- 2B:** Conduct two pilot Community and State Injury Prevention Resources meetings focusing on local resources for Traffic Safety, Poisoning, Interpersonal Violence, Suicide, Child Maltreatment, and other injuries. One pilot will be held in an urban area and one in a rural area.
- 2C:** Establish regional Community and State Injury Prevention Resources meetings focusing on local resources for Traffic Safety, Poisoning, Interpersonal Violence, Suicide, Child Maltreatment, and other injuries.
- 2D:** Create and maintain a State-wide Injury Prevention Resources Inventory by county and by mechanism.
- 2E:** Create and maintain a State-wide Injury Prevention Activity Tracking tool.
- 2F:** By July 31, 2011, conduct a satellite broadcast for the injury prevention community on the topic of human trafficking.

Members

- **Wendy Loomas**—Pinellas County Health Department
- **Cindy Magnole**—Jackson Memorial Hospital
- **Patricia Byers, M.D.**—University of Miami/Ryder Trauma Center
- **Jan Davis**—Department of Health, Division of Family Health Services
- **Lt. Colonel Ernesto Duarte**—Department of Highway Safety & Motor Vehicles
- **David Fechter**—Pinellas Metropolitan Planning Office
- **Dawn Johnson**—Florida Parent Teacher Association
- **Bonnie McDougale**—Tampa General Hospital/FL Poison Information Center
- **Melissa Lugo**—Orange County Health Department
- **Marisa Rappa Mowat**—St. Joseph’s Children’s Advocacy Center
- **Keely Smith**—St. Joseph’s Children’s Advocacy Center
- **Olumide Sobowale, M.D.**—Lakeland Regional Medical Center
- **Mimi Sutherland**—University of Miami/Jackson Memorial Hospital
- **Marianne Trussell**—Department of Transportation
- **Leilani Gruener**—Office of Injury Prevention Liaison

100% of Activities Completed (16/16)

Strategy 2A—100% Complete (4/4)

Mimi Sutherland and four GATE Program graduates provided an educational update on violence and JoAnn Chambers-Emerson provided an education update on poisoning during the June 2010 FIPAC meeting. Both educational updates were evaluated by meeting attendees on June 23, 2010. The overall response was 99.5% positive.

On June 22, 2010, human trafficking was selected as the primary topic and suicide the secondary topic for the fall FIPAC meeting. Jan Davis and Keely Smith were identified to present on human trafficking for the fall FIPAC meeting. Dr. Ceslo was recommended by Dr. Patricia Byers to present on suicide prevention.

Due to increased travel restrictions, the fall FIPAC meeting was not approved to be held. The educational update topics chosen for the meeting will be carried forward to the next FIPAC meeting which is tentatively planned to be held in March 2011.

Strategy 2B—100% Complete (3/3)

Activity 2B(1–2): Activities concluded in 2009.

Activity 2B(3): Determine the ability to use teleconferencing to conduct the regional meetings.

Teleconferencing could be used for regional meetings, however in-person pilot meetings should still be conducted in order to develop the toolkit that will be provided to local injury prevention organizations as a template for the planning and development of regional meetings.

The county health departments (CHDs) all have teleconferencing capability. Children's Medical Services sites and the regional Brain and Spinal Cord Injury Program sites could also be used as teleconference locations. Currently, other organizations and agencies that have teleconferencing capability, such as the Department of Transportation, may not be able to be used as teleconference locations due to issues concerning the Department of Health's firewall.

Activity 2B(4): Pilot Urban Community and State Resources Meeting.

The Pilot Urban Community and State Resources Meeting (Urban Pilot) was originally planned to be held on March 5, 2009, in Miami, Florida. Due to travel policy changes and increased approval procedures, the Urban Pilot meeting was held on June 3, 2010, at the Elk's Lodge in Miami, Florida in conjunction with the 2010 Water Safety and Drowning Prevention Marketing Symposium.

Approximately 40 individuals representing: counseling centers, fire rescues, hospitals, local county health departments, local injury prevention coalitions, non-profit organizations, other state agencies, police departments, Safe Kids, and universities. The overall response to the Urban Pilot was positive. A complete listing of Urban Pilot attendees is provided in Figure 1 on page 14.

Activity 2B(5): Pilot Rural Community and State Resources Meeting

Pending—On June 22, 2010, it was determined that the Pilot Rural Community and State Resources Meeting (Rural Pilot) would be held in conjunction with the spring 2011 FIPAC meeting. The Rural Pilot is tentatively scheduled to be held at the Florida Hospital—Heartlands in Sebring, Florida on March 17, 2011.

Injury data for six rural counties served by the Tampa Poison Control Center (DeSoto, Glades, Hardee, Hendry, Highlands and Okeechobee) was reviewed by Goal Team members. During the July 13, 2010 conference call it was determined that the Rural Pilot topics would include: falls (all ages), motor vehicle traffic (including bicycle, pedestrian and motorcycle), poisoning and intentional violence (including sexual violence, domestic violence and human trafficking).

Strategy 2C—Activities postponed and will begin in 2011.

Due to delays in holding the Urban and Rural Pilot Community and State Resource meetings, this activity timeframe will be adjusted after both pilot meetings have been held.

Strategy 2D—100% Complete (1/1)

Activity 2D(1–3): Activities concluded in 2009.

Figure 1: Urban Pilot Attendees

Urban Pilot Attendees

- **Max Acanda** — AAA Auto Club South
- **Lisa Anderson** — Nursing Student
- **Marina Aviles** — Miami Beach Coalition
- **Olivia Bamishigbin** — Florida Department of Health
- **Harvey Beanstein** — MDPWD
- **Omar Costa** — Florida Department of Health, Brain and Spinal Cord Injury Prevention Program—Region 5
- **Tamara Covadia** — Alliance for Aging
- **Malvina Duncan** — Safe Kids/Miami Children's Hospital
- **Debra Eddington** — Health Choice Network
- **Danny Ferrer** — Miami-Dade Police Department
- **Grieco Gioanna** — City of Miami Fire-Rescue
- **Terry Gratner** — Department of Transportation, OMCC
- **Frances Gray** — Miami-Dade County Health Department
- **Sergio Guerrero** — Miami-Dade Police Department
- **Caroline Gutierrez** — University of Miami/Walk Safe
- **David Henderson** — Miami-Dade Metropolitan Planning Organization
- **Leslie Jauregui** — Injury Free Coalition for Kids of Miami — Buckle up for Life Program
- **Pascale Jean** — CIGNA HealthCare
- **Carolle LaFrance** — MDCPS
- **Chirstina Lalama** — Family Counseling Services of Greater Miami
- **Marilyn Larrieu** — Florida Department of Health, Brain and Spinal Cord Injury Prevention Program
- **Anthoni Llau** — Miami Dade County Health Department
- **Samantha Lorenzo** — Miami Bridge Services
- **Cindy Magnole** — Jackson Health System
- **Janet Mondshein** — MADD
- **Javier Otero** — The Miami Coalition
- **Elio Perez** — Florida Department of Health, Brain and Spinal Cord Injury Prevention Program
- **Jeannette Piaz** — Alliance for Aging
- **Lynda Roberts** — Miami-Dade Police Department
- **Carlos Sarmiento** — Florida Department of Transportation
- **Kyla Shelton** — Florida Department of Health, Office of Injury Prevention
- **Rosane St. Paul** — Injury Free Coalition for Kids — Buckle Up for Life
- **Wendy Stephan** — Florida Poison Information Center Miami
- **Debra Stewart** — Coventry Workers' Comp
- **Christine Stinson** — University of Miami, Walk Safe
- **Marie-Claire Timothee** — The Miami Coalition
- **Lisa VanderWerf-Hourigan** — Florida Department of Health, Office of Injury Prevention
- **Vivian Villaamil** — MDCPS

Activity 2D(4): Administer the developed survey tool at the two pilot meetings.

The survey tool was administered at the Urban Pilot Community and State Resources meeting on June 3, 2010. Overall response to the Urban Pilot was positive.

Pending—The survey tool will be administered at the Rural Pilot Community and State Resources meeting which is tentatively scheduled to be held on March 17, 2011, at the Florida Hospital—Heartlands in Sebring, Florida.

Strategy 2E—100% Complete (3/3)*

****Activities 2E(4) through 2E(7) have been postponed until 2012 as additional funding is required.***

This strategy was added based on discussions during the Goal Team 2 breakout sessions at the October 2009 FIPAC meeting. Goal Team 2 members reviewed the Centers for Disease Control and Prevention's (CDC) definitions for; Activity, Strategy, Program, and Comprehensive Program, during the December 8, 2009 conference call. Wendy Loomas (Goal Team 2 Co-Leader), lead the discussion regarding the possible use of the CDC definitions. Based on the discussion, the OIP created draft definitions for Activity, Project and Program. The draft definitions were provided them to Goal Team members for review and were approved on February 9, 2010. The final definitions are provided in Figure 2 below.

Figure 2: Injury Prevention Definitions

Activity—A single effort to address a focus area.

- Examples:**
- Holding a drowning prevention meeting.
 - Providing drowning prevention materials via targeted mailing.
 - Participating in a health fair to provide drowning prevention information.

Project—A group of activities conducted to create a unique product, service or result. A project has a defined beginning and end.

- Example:** The "Keep Your Eyes on the Kids" Drowning Prevention Campaign occurs from April–June. The participating counties provide numerous drowning prevention activities during the campaign.

Program—An ongoing set of projects and activities that are geared to accomplish a certain major goal.

- Example:** The Office of Injury Prevention's water safety and drowning prevention program consists of the following projects and activities:
- Compiling drowning data for each county in Florida as well as for Florida as a whole.
 - Facilitating the "Keep Your Eyes on the Kids" Drowning Prevention Campaign.
 - Hosting the Water Safety and Drowning Prevention Marketing Symposium.
 - Providing Organizations with drowning prevention materials as requested.

Approved on 2/9/2010

During the spring of 2010, the OIP contacted several DOH offices and other organizations to share the Injury Prevention definitions. The DOH Office of Trauma and the DOH Bureaus of Emergency Medical Services and Brain and Spinal Cord Injury Prevention plan to use the injury prevention definitions in upcoming state strategic plans. Lisa VanderWerf-Hourigan, the director of the OIP, also shared the injury prevention definitions at the 2010 Joint Annual Meeting of the Safe States Alliance and the CDC Core I & II State Injury Grantees meeting in April 2010. The Safe States Alliance and the state health departments in Kansas and Oklahoma expressed interest in using the definitions.

“The [injury prevention] definitions are absolutely necessary to the evaluation of injury programs in trauma centers”

› Michael Lo, Epidemiologist, Office of Trauma

Discussion regarding the information that should be gathered through the IP activity tracking tool was discussed in detail during the February and March, 2010 Goal Team 2 conference calls. Consensus was reached by Goal Team members on March 9, 2010.

On September 8, 2009, Goal Team members discussed using the Florida Department of Transportation (DOT) Safety Program Tracking tool as a template for the IP activity tracking tool. The DOT Safety Program Tracking tool is used to monitor traffic safety activities that occur throughout the state. Goal Team members also suggested linking the two tracking tools together, allowing users who submit traffic safety, motor vehicle, pedestrian and bicycle safety activities to submit information once to update both tracking tools. The DOT Safety Program Tracking tool can be accessed at <http://www2.dot.state.fl.us/safetyprogramtracking/>.

In March 2010, the OIP contacted the DOH Information Technology (IT) Governance office and began working on the required documentation to use the DOT Safety Program Tracking tool as the template for an IP activity tracking tool. However due to the transition of IT services from individual state agencies to a single, shared IT service the IT Governance process was delayed.

During the initial development research it was ascertained that additional funding is necessary in order to develop and maintain the IP activity tracking tool. On November 9, 2010, it was determined that this activity would be closed out for the 2010 and 2011 Action Plans and would be reopened and reviewed during implementation of the 2012 Action Plan. In the meantime, the OIP will track injury prevention activities within the office’s programs such as the Bicycle Helmet Promotion Program, Safe Kids, and the Special Needs Occupant Protection Program.

Strategy 2F—100% Complete (5/5)

This strategy was added based on discussions during the Goal Team 2 breakout sessions at the October 2009 FIPAC meeting.

Human trafficking, or modern-day slavery, is an all-too-common and tragic occurrence in today’s world. Florida is considered third in the U.S., in the prevalence of

human trafficking. In response to requests from stakeholders for information and resources aiding in the prevention of human trafficking, during October 2010, it was decided that the Human Trafficking Awareness satellite broadcast (HT Broadcast) would be held during National Slavery and Human Trafficking Prevention Month.

During the July 13, 2010, Goal Team 2 conference call, possible topics and speakers for the HT Broadcast were discussed. Topics and speakers were finalized in November 2010. The topics chosen for were: Introduction to Human Trafficking Laws, Trends and Cases, Domestic Minor Sex Trafficking, Victims' Healthcare Needs and Response Efforts. The HT Broadcast agenda was reviewed and finalized on December 14, 2010, and individuals and organizations were identified and invited to attend the broadcast. Invitees included: county health departments, the DOH Distance Learning Network, the DOH, Sexual Violence Prevention Program contacts, and FIPAC members.

Activity 2F(5): Conduct satellite broadcast and administer evaluation.

On January 6, 2011, the Florida Department of Health, Office of Injury Prevention and Sexual Violence Prevention Program sponsored an educational program to provide medical professionals with a general overview of human trafficking. Over 225 individuals participated in the live broadcast and webcast. The program reached county health departments, researchers, general practitioners, educators, and a myriad of others involved in the fight to prevent human trafficking not only in Florida, but in numerous other states such as; Illinois, New Hampshire, New York and Pennsylvania. Twenty-seven evaluations were submitted for the HT Broadcast. Overall response was 80% positive.

Presenters on the broadcast included nationally/internationally renowned speakers: Terry Coonan, Director, Florida State University Center for the Advancement of Human Rights; Floy Turner, AMBER Alert Training and Technical Assistance Program; and Robin Thompson, Florida State University Center for the Advancement of Human Rights.

During the broadcast participants learned:

- The magnitude of the problem
- The types of human trafficking and the difference between human trafficking and human smuggling
- About Federal and State laws regarding human trafficking
- About Domestic Minor Sex Trafficking and how to recognize its victims
- About Federal, State and Local resources for referral and treatment

Topics specific to medical professionals included:

- The prevalence of human trafficking victims in a health care practice
- How human trafficking presents itself in a health care setting
- How to screen for trafficking victims
- Mandatory reporting obligations, including issues regarding privacy
- Key health indicators related to human trafficking victims

Continuing Medical Education (CME) credits were provided for live broadcast participants through the Florida Medical Association. The Florida Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. Continuing Education Units (CEUs) were provided for live broadcast participants through the Florida Department of Health, Office of Public Health Nursing.

In addition to the live broadcast and webcast, copies of the recorded broadcast were provided to each county health department and Children's Medical Service's regional office. Copies of the broadcast are also available upon request, through the OIP.

Goal 3

Establish a collaborative effort to provide statewide direction and focus for fall-related injury prevention for Florida's seniors.

Strategies

- 3A:** By November 2009, establish a steering committee of subject matter experts for senior falls prevention (15–20 committee members).
- 3B:** By June 1, 2010, establish a statewide senior falls prevention coalition.
- 3C:** By 2012, develop a statewide senior falls prevention plan.
- 3D:** By November 2009, and quarterly thereafter, identify, review and pursue, if applicable, additional senior falls prevention funding opportunities.
- 3E:** By June 2009, and ongoing thereafter, increase policy and public awareness activities to reduce and prevent senior falls-related injuries.
- 3F:** By October 2009, and ongoing thereafter, provide updates for injury prevention stakeholders regarding federal and state senior falls prevention legislation.
- 3G:** By June 2010, and annually thereafter, review, identify and update evidence-based interventions and best practices.
- 3H:** By 2012, identify an evidence-based senior falls prevention intervention that may be replicated statewide.
- 3I:** By 2013, implement a pilot project of the identified evidence-based intervention.
- 3J:** By November 2009, and annually thereafter, review senior falls prevention data, disseminate, and present to injury prevention stakeholders as needed.

Members

- **Mark Brimer, Ph.D.** (Leader)—Community Volunteer
- **Michele Mulé** (Leader)—Florida Department of Elder Affairs
- **Larry Baxter**—Florida Department of Elder Affairs
- **Syndi Bultman**—Lee Memorial Health Systems
- **Judy Copeland**—Epilepsy Foundation of Florida Department of Health
- **Bill Cosner**—Geriatric Medical Associates
- **Janine Curlutu**—Lakeland Regional Medical Center
- **Pam Fico**—Southwest Florida Area Agency on Aging
- **Lowell Gerson, Ph.D.**—Lee County Injury Prevention Coalition
- **Don Hughes**—Satellite Beach Fire Department
- **Randall Hunt**—Senior Resource Alliance
- **Rosemary Laird, M.D.**—Health First Inc.
- **Diana Liebnitzky**—Holmes Regional Medical Center
- **Sue Littnan**—Citrus County Health Department
- **Nina Mattei**—Hernando County Health Department
- **Jeffrey O’Brien, M.D.**—Health First, Inc.
- **Julia Paul**—Shands Jacksonville Medical Center
- **Gail Powell-Cope**—James A. Haley Veterans Hospital
- **Joanne Puia**—Broward General Medical Center
- **Patricia Quigley, Ph.D.**—James A Haley Veterans Hospital
- **Don Rapp**—Community Volunteer
- **Corey Richter**—Indian River Fire Rescue
- **Diana Silvey**—Winter Park Health Foundation
- **Patricia Sovonick**—Community Aging and Retirement Services of Pasco
- **Mark Tesoro**—Lee Memorial Health System
- **Cheryl Urbas**—Florida Department of Health
- **Sarah Hinkel-Young**—Office of Injury Prevention Liaison

96% of Activities Completed (26/27)

Strategy 3A—100% Complete (4/4)

Activity 3A(1–3): Activities concluded in 2009.

Activity 3A(4): *By November 2009, hold the initial steering committee meeting. In 2010, the steering committee will transition to the statewide falls prevention coalition.*

The Statewide Senior Falls Prevention Coalition (Coalition) was successfully transitioned from the Steering Committee in April of 2010. The Coalition held their first meeting on May 21, 2010 via webinar. They have been meeting bimonthly in conjunction with Goal Team Three members via conference calls. Conference call minutes are available on the OIP website at: <http://www.doh.state.fl.us/injury/seniorfall.html>.

Strategy 3B—100% Complete (3/3)

Activity 3B(1): *By January 15, 2010, complete a list of potential coalition members.*

The Florida Coalition Taskforce of Goal Team three identified a complete list of potential coalition members in January, 2010. Representation included potential participants from a number of different specialty areas.

Activity 3B(2): *By March 1, 2010, create and send invitations to initial statewide falls prevention coalition meeting.*

A letter of invitation was sent by the Office on Injury Prevention on May 10, 2010 to initiate the statewide senior falls prevention coalition meeting.

Activity 3B(3): *By June 1, 2010, hold the initial meeting of the statewide falls prevention coalition in conjunction with the Florida Injury Prevention Advisory Council meeting.*

The initial Statewide Senior Falls Prevention Coalition meeting was held via webinar on May 21, 2010. There were 15 attendees from a variety of nonprofit, for profit, governmental agencies, and academic partnerships. A complete list of attendees is found in Figure 3 below. The Statewide Senior Falls Coalition agenda and meeting minutes can be found on the OIP website at: <http://www.doh.state.fl.us/injury/seniorfall.html>.

Due to new travel restrictions, the meeting was not able to be held in person and in conjunction with the Florida Injury Prevention Advisory Council meeting.

Figure 3: Initial Statewide Senior Falls Prevention Coalition Meeting Attendees

- **Syndi Bultman** — Lee Memorial Hospital
- **Diana Silvey** — Winter Park Health Foundation
- **Dianna Liebnitzky** — Holmes Regional Medical Center, Trauma Center
- **Patricia Quigley** — VISN 8 Patient Safety Center of Inquiry
- **Jeffrey O'Brien** — The Orthopedic Center
- **Mark Brimer** — City of Satellite Beach
- **Gail Powell-Cope** — Tampa VA Hospital
- **Jacqueline Bunton** — Sacred Heart Hospital
- **Mark Tesoro** — Area Agency on Aging of Southwest Florida
- **Patricia Sovonick** — CARES, Inc.

Strategy 3C—0% Complete (0/1)

Activity 3C(1): By December 2010, prioritize falls-related injuries to target as part of the Florida Falls-Related Injury Prevention Plan for Seniors.

In progress—The Senior Falls Prevention Plan is currently under development by the Statewide Senior Falls Prevention Coalition. Due to increased travel constrictions, the Florida Injury Prevention Advisory Council and the Statewide Senior Falls Prevention Coalition meetings were not approved to be held. The Senior Falls Prevention Plan is being developed via conference calls and will be carried forward to the next meeting which is tentatively planned to be held in June 2011.

Strategy 3D—100% Complete (6/6)

Activity 3D(1): Activity concluded in 2009.

Activity 3D(2): Identify foundations whose mission includes senior fall prevention.

The Funding Taskforce of Goal Team Three, with the help of Mark Tesoro and Diana Silvey developed a list of foundations whose mission included senior falls prevention.

Activity 3D(3): Develop a list of contacts within companies, corporations, partnerships, and service organizations who support senior falls prevention.

Mark Tesoro and members from the Corporate Partner Taskforce of Goal Team Three developed a list of contacts within companies, corporations, partnerships, and services organizations. Initial contact has been made with the identified organizations.

Activity 3D(4): Develop a presentation for use in seeking financial support for senior falls prevention efforts.

The Presentation Taskforce of Goal Team Three created a presentation that could be used to help explain the function of the Coalition, the current level of efforts for senior falls prevention, and future opportunity to expand into. This presentation is multi-faceted in that it can be used for local coalition development, general awareness opportunities, and for seeking financial support for senior fall prevention efforts. The presentation was presented on the Senior Falls Prevention Broadcast for Health Care Professionals, via telecast by Mark Brimer, Ph.D. on September 22, 2010.

Activity 3D(5): Annually, approach at least one company for financial support for senior falls prevention efforts.

Several companies were approached during 2010. However, due to the current economic conditions, no funding was available for 2010. Company sponsorship will be readdressed in 2011.

Activity 3D(6): Identify grant opportunities for senior falls prevention initiatives.

Two grants were identified and applied for by Goal Team Three and the Funding Taskforce. A Chronic Disease Self-Management grant was applied for by Michele Mulé in conjunction with the Florida Department of Elder Affairs. A second subcomponent grant from the Centers for Disease Control and Prevention for senior falls prevention program development and expansion was applied for by Sarah Hinkel-Young in conjunction with Mark Tesoro and Lee County Memorial Hospital.

Strategy 3E—100% Complete (5/5)

Activity 3E(1): Contact statewide associations and societies for physicians interested in promoting and advocating for senior falls prevention.

This activity was completed for the 2010 year and will be revisited in 2011. Mark Brimer, Ph.D. worked with Michele Mulé to create a list of associations and physicians to promote senior falls prevention. In addition, a list of Fall Prevention Awareness Day 2010 Statewide Activities was compiled and shared with all stakeholders. In 2011, the Goal Team Three Awareness Taskforce will follow-up with the AARP for future partnerships.

Activity 3E(2): Develop a senior falls prevention awareness tool for presentation to “baby boom” seniors.

Don Hughes and Lowell Gerson, Ph.D. completed this assignment.

Activity 3E(3): Develop press releases for falls prevention.

A press release was released for the Senior Falls Awareness Day Broadcast for Health Care Professionals on September 22, 2010. A copy of the press release can be found in Appendix G.

Activity 3E(4): Annually, seek a Governor’s proclamation for National Falls Prevention Awareness Day.

The Governor’s proclamation for National Falls Prevention Awareness Day was advocated for and received for September 22, 2010.

Activity 3E(5): Biannually, provide updates for injury prevention stakeholders regarding federal and state senior falls prevention legislation.

Lisa VanderWerf-Hourigan, Director of the Office of Injury Prevention sends out regular updates regarding the federal and state legislation on senior falls.

Strategy 3F—100% Complete (3/3)

Activity 3F(1): Review filed senior falls prevention related bills prior to Florida’s Legislative Session.

Michele Mulé and Mark Brimer, Ph.D. have been following the Florida Legislative Session. There were no related bills during the last session. This item will be revisited in 2011.

Activity 3F(2): Review senior falls prevention related bills that are passed during Florida’s Legislative Session and signed by the Governor. Prepare an update for injury prevention stakeholders.

There were no actions taken or bills proposed during the 2010 Florida Legislative Session. This item will be revisited in 2011.

Activity 3F(3): Review senior falls prevention related bills that are passed by the US House of Representatives and the US Senate and signed by the President. Prepare an update for injury prevention stakeholders.

Michele Mulé and Mark Brimer, Ph.D. continue to follow the federal legislative sessions.

No action items relating to senior falls were proposed during this session. Goal Team Three members were apprised of this during the November 2010 conference call. This item will be revisited in 2011.

Strategy 3G—100% Complete (3/3)

Activity 3G(1): Review work of 2004–2008 Goal Team 5, as it relates to senior falls prevention.

Patricia Quigley, Ph.D. reviewed the work of the 2004–2008 Goal Team 5 and reported on it during the September 2010 conference call.

Activity 3G(2): Identify and disseminate best practices in fall prevention programs.

Tai Chi: Moving for Better Balance was identified as a CDC evidence-based best practice for exercise programs to help prevent senior falls by Goal Team Three. Research has shown that it is effective when implemented by state programs, i.e. New York, Oregon and Nebraska.

The Office of Injury Prevention maintains a webpage for Goal Team Three Members and one for the Statewide Senior Falls Prevention Coalition in order to keep stakeholders up to date on all important and pertinent information pertaining to senior falls. These web pages can be found at <http://www.doh.state.fl.us/injury/GoalTeam3.htm> and http://www.doh.state.fl.us/injury/SF_Coalition.htm respectively.

Activity 3G(3): Disseminate any new evidence-based interventions to injury prevention stakeholders.

New evidence-based interventions were identified by the CDC and the information will be shared by Sarah Hinkel-Young to Goal Team Three in the March 8, 2011 call. The January 2011 call was postponed due to the grant application cycle to the CDC for the Senior Falls Prevention subcomponent grant.

Strategy 3H and 3I—Activities for Strategy 3H are scheduled to begin in 2011.

Strategy 3J—100% Complete (2/2)

Activity 3J(1): Review statewide senior falls data provided by Data Workgroup.

Kyla Shelton, Office of Injury Prevention Epidemiologist provided statewide senior falls data to Goal Team Three. The 2009 Injury Surveillance Fact Sheets are available on the OIP website: <http://www.doh.state.fl.us/injury/data.html>. This data will be reviewed during the upcoming conference call on March 8, 2011.

Activity 3J(2): As needed, collaborate with the Data Workgroup.

Michele Mulé and Mark Brimer, Ph.D. remained apprised of ongoing publications in the field of senior falls prevention. In addition, they have remained in constant contact with Kyla Shelton, Epidemiologist, regarding data related facts and questions.

Goal 4

Establish a collaborative effort to provide statewide direction and focus for early childhood water safety and drowning prevention in Florida.

Strategies

- 4A:** By January 2010, establish a steering committee of subject matter experts for early childhood water safety and drowning prevention. (Approximately 15–20 committee members).
- 4B:** By June 1, 2010, establish a statewide early childhood drowning prevention coalition.
- 4C:** By 2012, develop a statewide early childhood water safety and drowning prevention plan.
- 4D:** By November 2009, and quarterly thereafter, identify, review and pursue, if applicable, additional early childhood water safety and drowning prevention funding opportunities.
- 4E:** By 2010, and ongoing thereafter, increase policy and public awareness activities to reduce and prevent early childhood drowning.
- 4F:** Provide updates for injury prevention stakeholders regarding federal and state early childhood water safety and drowning prevention legislation.
- 4G:** By June 2010, and annually thereafter, review and disseminate evidence-based interventions and best practices.
- 4H:** By 2012, identify an evidence-based early childhood water safety and drowning prevention intervention project that may be replicated statewide.
- 4I:** By 2013, implement a pilot project of the identified intervention.
- 4J:** By November 2009, and annually thereafter, review early childhood water safety and drowning prevention data, disseminate, and present to injury prevention stakeholders as needed.

Members

- **Karen McCauley** (Leader)—All Children’s Hospital
- **Elizabeth White** (Leader)—Florida Department of Health
- **Kathy Baldwin**—The Gift of Swimming
- **Greg Hand**—Florida Swimming Pool Association
- **Michael Haney**—Children Medical Services
- **Marci Hummell**—Osceola County Health Department
- **Michele King**—Children’s Hospital of Florida
- **Deborah Mulligan**—Nova Southeastern University
- **Jean Shoemaker**—All Children’s Hospital
- **Doris Shorkey**—Broward County, Broward Juvenile Detention Center
- **Nichole Wilder**—Florida Department of Education
- **Towana Bonnett**—Office of Injury Prevention Team Liaison

86% of Activities Completed (19/22)

Strategy 4A—100% Complete (4/4)

Activity 4A(1–3): Activities concluded in 2009

Activity 4A(4): By January 15, 2010, identify individuals to fill gaps in early childhood water safety and drowning prevention efforts.

Individuals were identified and invited to be partners under the WaterproofFL Campaign. The WaterproofFL Campaign is an early childhood water safety and drowning prevention awareness campaign that promotes multiple layers (supervision, barriers, and emergency response) of protection to help reduce the number of drowning in children ages 1–4.

Strategy 4B—Activities postponed to 2011 due to funding

Strategy 4C—100 % Complete (1/1)

Activity 4C(1) Develop and early childhood drowning prevention awareness toolkit to be used statewide.

The Office of Injury Prevention advertised a Request for Proposals to hire a company to develop an early childhood water safety and drowning prevention awareness campaign for children ages 1–4. Ron Sachs Communications, Inc. was the successful candidate. Ron Sachs developed the WaterproofFL Campaign as an electronic and print toolkit.

The electronic toolkit can be accessed at www.WaterproofFL.com, at the OIP website (<http://www.doh.state.fl.us/injury/index.html>) and on a flash drive in the printed

toolkits. The printed toolkits includes a swim bag with an instruction letter, a survey, a WaterproofFL folder that contains WaterproofFL literature (layers of protection, fact sheet, barriers types and estimated cost), a poster, and a flash drive. The flash drive has all print materials and a 10 minute water safety video. The toolkits were printed in English and Spanish and shipped to all partners.

Strategy 4D—66% Complete in 2009 (4/6)

Activity 4D(1): Activities concluded in 2009

Activity 4D(2): Identify foundations whose mission includes water safety or early childhood drowning prevention.

A list of foundations whose missions includes water safety or early childhood drowning prevention has been drafted. This list includes the Katy Foundation as well as foundations from eCivis. The list is currently in review by the goal team for future development.

Activity 4D(3): Develop a list of contacts within companies, corporations, partnerships, and services organizations who support childhood drowning prevention.

This activity was postponed due to the Core Violence and Injury Prevention grant application that was due in the beginning of 2011.

Activity 4D(4): Develop a presentation for use in seeking financial support for early childhood drowning prevention efforts.

This activity was postponed due to the Core Violence and Injury Prevention grant application that was due in the beginning of 2011.

Activity 4D(5): Annually, approach at least one company for financial support for early childhood drowning prevention efforts.

Goal Team 4 members and local partners secured funding locally to support early childhood water safety and drowning prevention efforts. A Kohl's Department store funded a WaterproofFL bus wrap on a bus in the local public transit system in Lee County, Florida.

Activity 4D(6): Identify grant opportunities for early childhood drowning prevention initiatives.

Grant opportunities for early childhood drowning prevention initiatives were reviewed for 2010. There were no federal or state grants announced. The OIP encouraged Safe Kids Florida coalitions and chapters to use Safe Kids USA's Pool and Spa Safety Initiative in conjunction with WaterproofFL. This initiative announced a small grant opportunity for Safe Kids coalitions and chapters.

Strategy 4E—80% Complete (4/5)

Activity 4E(1): Completed in 2009

Activity 4E(2): Develop a uniform water safety and drowning prevention message.

A uniform early childhood water safety and drowning prevention message was

developed as the tagline for the WaterproofFL Campaign “Pool Safety is Everyone’s Responsibility” and the promotion of the multiple layers of protection. The message was developed in accordance with the American Association of Pediatrics recommendations for barriers, supervision, and emergency preparedness.

Activity 4E(3): Postponed until WaterproofFL Campaign kick-off in 2011.

Activity 4E(4): Biannually, provide updates to injury prevention stakeholders regarding federal and state early childhood drowning prevention legislation.

There was no federal or state early childhood drowning prevention legislation filed for 2010.

Activity 4E(5): Review OIP website to ensure the drowning prevention information posted is updated and current.

The Office of Injury Prevention’s website was reviewed and the WaterproofFL Campaign information was added. The OIP website’s general water safety and drowning prevention information was updated for 2010 and is currently being updated for 2011.

Strategy 4F—100% Complete (3/3)

Activity 4F(1): Review filed early childhood drowning prevention related bills prior to Florida’s Legislative Session.

Lisa VanderWerf-Hourigan provided updates regarding injury prevention bills to all injury prevention stakeholders prior to the 2010 Legislative Session. There were no bills filed or passed in the Florida Legislative Session that pertained to early childhood drowning.

Activity 4F(2): Review early childhood drowning prevention related bills that are passed during Florida’s Legislative Session and signed by the Governor. Prepare an update for injury prevention stakeholders.

Lisa VanderWerf-Hourigan provided updates regarding injury prevention bills to all injury prevention stakeholders prior to the 2010 Legislative Session. There were no bills filed or passed in the Florida Legislative Session that pertained to early childhood drowning.

Activity 4F(3): Review early childhood drowning prevention related bills that are passed by the U.S. House of Representatives and the U.S. Senate and signed by the President. Prepare an update for injury prevention stakeholders.

Lisa VanderWerf-Hourigan provided updates regarding injury prevention bills to all injury prevention stakeholders prior to the 2010 Legislative Session. There were no bills filed or passed in the U.S House of Representatives of the U.S. Senate that pertained to early childhood drowning.

Strategy 4G—100% Complete (1/1)

Activity 4G(1): Review the work of the 2006–2008 top 10 county health department early childhood drowning prevention campaigns.

The top 10 county health departments early childhood water safety and drowning

prevention campaigns were reviewed as part of the drowning prevention efforts inventory process for the WaterproofFL Campaign.

Strategy 4H—Activities scheduled to begin in 2011.

Strategy 4I—Activities scheduled to begin in 2013.

Strategy 4J—100% Complete (2/2)

Activity 4J(1): Review statewide early childhood drowning data provided by the Data workgroup.

In 2010 the goal team reviewed data regarding counties with the highest rates of drowning for children between the ages of 1–4 that occurred in swimming pools. This data was then incorporated in the strategic planning of the WaterproofFL campaign.

Activity 4J(2): As needed, collaborate with the Data Workgroup.

In 2010, the goal team collaborated with the Data Workgroup to assess the regional areas with the highest risk of early childhood drowning.

Goal 5

Enhance the skills, knowledge and resources of Florida's injury prevention workforce.

Strategies

- 5A:** Include a brief update during each FIPAC/goal team meeting on an injury prevention topic that is timely, current and not presently being addressed by others.
- 5B:** Develop, publicize and maintain a statewide calendar of injury prevention trainings that is timely and accurate.
- 5C:** Make the Injury Prevention 101 course available via videoconferencing by 2010.
- 5D:** Respond to the educational needs of the IP workforce based on injury patterns and trends.

Members

- **Virginia Dodd, Ph.D.** (Leader)—University of Florida
- **Karen Liller, Ph.D.** (Leader)—University of South Florida
- **Sandra Dreker**—Brain Injury Association of Florida
- **Karen Fader**—Jackson County Community Traffic Safety Team
- **Reshawndia Mitchell**—Department of Health, Duval County Health Department
- **David Summers**—St. Mary's Medical Center
- **Cheryl Urbas**—Department of Health, Environmental Health, Healthy Homes
- **Heather McHenry**—Office of Injury Prevention Liaison
- **Kyla Shelton**—Office of Injury Prevention Liaison

93% of Activities Completed (13/14)

Strategy 5A—100% Complete (6/6)

Activity 5A(1): Select a topic to provide an educational update on during each FIPAC meeting.

Underage drinking was selected for the June 2010 Florida Injury Prevention Advisory Council (FIPAC) meeting, while a legislative guide was selected as the topic for the January 2011 meeting. The legislative guide presentation would discuss the process of how a bill becomes a law, the committee process and why bills do or do not pass into law. These will be related to specific injury bills that did or did not become laws and might include the following topics: booster seats, primary seat belts, motorcycle helmets, and texting while driving.

Activity 5A(2): Identify and contact a speaker to provide the educational update.

Dr. Virginia Dodd was selected to present on underage drinking during the June 2010 FIPAC meeting. Christopher Nuland was selected to present a Legislative Guide at the October 2010 FIPAC meeting. Due to increased travel restrictions, the October meeting was not approved to be held and was tentatively rescheduled for January 2011. The January 2011 meeting was also postponed due to travel restrictions and is now tentatively scheduled for March 2011.

Activity 5A(3): Activity concluded in 2009.

Activity 5A(4): Present educational update to FIPAC.

Dr. Virginia Dodd presented on current research activities and findings relating underage drinking during the June 2010 FIPAC meeting. Christopher Nuland was selected to present a Legislative Guide at the October 2010 FIPAC meeting. Due to increased travel restrictions, the October meeting was not approved to be held and was tentatively rescheduled for January 2011. The January 2011 meeting was also postponed due to travel restrictions and is now tentatively scheduled for March 2011.

Activity 5A(5): Utilize existing evaluation tool to obtain feedback on the educational update.

Evaluation tool utilized for the June 2010 educational update on underage drinking, positive reviews were received. Due to increased travel restrictions, the October meeting was not approved to be held and tentatively rescheduled for January 2011. The January 2011 meeting was postponed due to travel restrictions and is now tentatively scheduled for March 2011.

Activity 5A(6): Conduct a survey of FIPAC members to select an educational update topic for each FIPAC meeting.

FIPAC members were asked to indicate possible speakers and topics for the educational updates through the evaluation tool utilized for the June 2010 meeting. Due to increased travel restrictions, the October meeting was not approved to be held and tentatively rescheduled for January 2011. The January 2011 meeting was postponed due to travel restrictions and is now tentatively scheduled for March 2011.

Strategy 5B—80% Complete (4/5)

Activity 5B(1): Activity completed in 2009.

Activity 5B(2): Activity completed in 2009.

Activity 5B(3): Publicize the availability of the calendar of injury prevention trainings.

The availability of the injury prevention trainings calendar was publicized at the June 2010 FIPAC meeting, as well as through monthly emails to FIPAC and quarterly reminder emails to all the OIP stakeholders.

Activity 5B(4): Send monthly reminder to FIPAC to submit events for the injury prevention calendar.

Incomplete—This activity was only completed in September–December due to vacancies within the OIP, including the Goal Team 5 liaison.

Activity 5B(5): Review the developed template in Activity 5B(3) to collect information regarding trainings to be placed on calendar and revise as needed.

Ms. Shelton surveyed the group for their opinion on how the OIP calendar emails were working and being received. To date, all feedback has been positive and the process will be continued for 2011.

Strategy 5C—100% Complete (1/1)

Activity 5C(1): A conference call is held with the Injury Prevention 101 faculty to discuss reformatting the IP 101 course.

A conference call was held with the IP 101 faculty in 2009 and it was decided that the 2010 course would be held on May 27, 2010 via satellite broadcast and webcast. Over 590 individuals participated in the 2010 course, including individuals from Illinois, Indiana, Minnesota, Missouri, New Jersey and Oklahoma. A recording of the course is available on DVD. To date, approximately 940 people from FIPAC, EMS, fire rescue, universities, county health departments, hospitals, injury survivors, nurses, and physicians have been trained in injury prevention basics as the result of this initiative. The final course consisted of four modules delivered in a 3-hour time frame. Course evaluations indicated the delivery mechanism and course content was well-accepted by attendees.

Strategy 5D—100% Complete (2/2)

Activity 5D(1): Collaborate with the Data Workgroup to determine injury patterns and trends.

During FIPAC meetings the workgroups exchange information relating to injury patterns and trends. Speakers offering information on timely topics contribute to the information exchange.

Activity 5D(2): Review the activities of Strategies 5B and 5C to determine if additional topics need to be addressed.

The IP 101 course is complete and available upon request. Through meeting evaluation forms and contact with other goal teams information needs are assessed. Identified needs can be addressed via speakers at meetings or other meeting venues presented on the OIP calendar.