Indiana Injury Prevention Advisory Council

September 17, 2015

Jessica Schultz, MPH , Injury Prevention Epidemiologist

Division of Trauma and Injury Prevention

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Purpose and Outline

- Network & Updates
  - Webcast attendees: send in updates!

- INVDRS Update
  - Rachel Kenny, INVDRS Epidemiologist

Indiana State Department of Health

Purpose and Outline

- ISDH reports
  - Injury Prevention Program Coordinator
  - PDO Grant
  - PDO Website
  - Trauma Tour Summary
  - Special Emphasis Reports
  - 2015 Fireworks report
  - Resource Guide & App
- Potential Collaborations & Open Discussions
- IPAC Updates

Injury Prevention- Member Updates

- Name
- Position
- Organization/ Association
- Updates
- Current Projects and Programs
- Upcoming events

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Email questions to: **indianatrauma@isdh.in.gov**

Indiana Violent Death Reporting System (INVDRS)

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

INVDRS

- CDC Site Visit
  - ISDH, September 1, 2015

- Midwest Injury Prevention Alliance (MIPA) NVDRS Committee

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

INVDRS

- Hired Records Consultant
  - Marion Chaloux
  - Mchaloux@isdh.in.gov

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

INVDRS
Data Collection Update

Rachel Kenny
INVDRS Epidemiologist

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Death Certificates

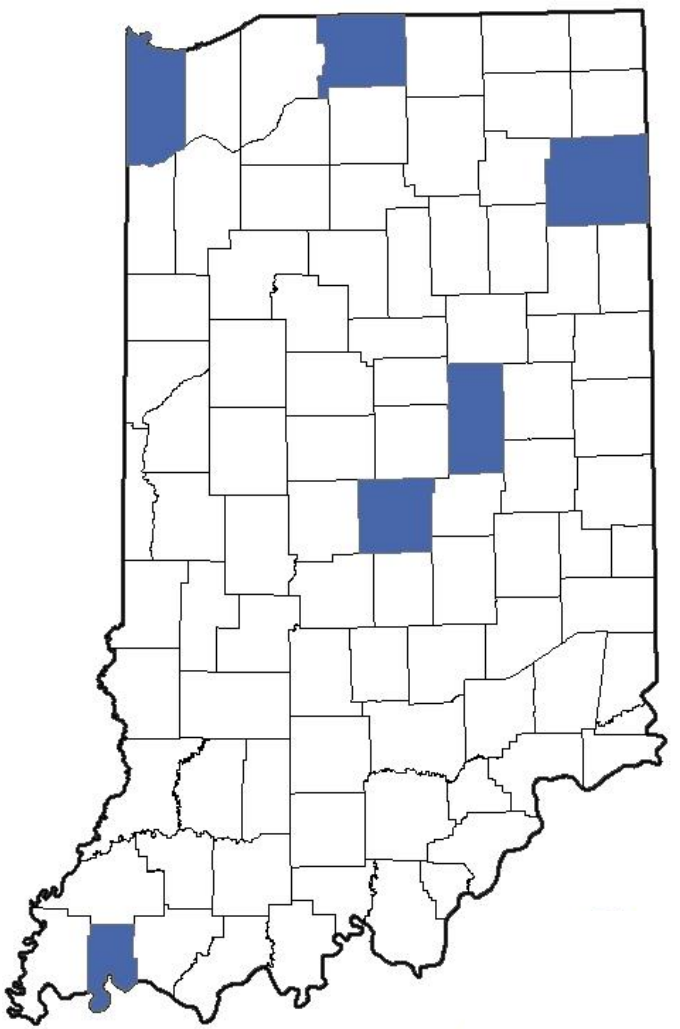
- 846 cases statewide (as of 8/28)
  - 553 Suicides (65%)
  - 197 Homicides (23%)
  - 76 Undetermined (9%)
  - 20 Accidental (2.4%)

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Death Certificates

- Pilot Counties
  - 43% of all cases (366)
  - 36% of suicides (201)
  - 74.6% of homicides (147)



*preliminary numbers

INVDRS
Indiana Violent Death Reporting System

Death Certificates

	All Pilot	Marion	Lake	St. Joseph	Allen
Total	366	147	87	49	46
Suicide	201	74	40	32	24
Homicide	147	66	46	14	16

- Vanderburgh—23 cases total
- Madison—14 cases total

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Coroner

- 7 signed Data Sharing Agreements
  - **Marion**
  - **St. Joseph**
  - LaGrange
  - Lawrence
  - Newton
  - Pike
  - Whitley
- Currently setting up meetings with coroners

INVDRS
Indiana Violent Death Reporting System

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Coroner

- Received autopsy and field deputy's report for 46 individuals from the Marion County Coroner.
  - Represent January and February Cases

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Law Enforcement

- 96 signed Date Sharing Agreements
  - 21 agencies in the pilot counties
- Made Contact with 206 law enforcement agencies
- Support from Indiana Sheriff's Association

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Indiana Violent Death Reporting System

Indiana State Department of Health

Law Enforcement

- Received our first records from the Hendricks County Sheriff's Department
  - Requested: July 7th
  - Received: July 13th
  - Abstracted July 28th

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Law Enforcement

- Requested: 54 individual records as of September 10th.

- Received: 21 records as of September 11th.

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

Next INVDRS Advisory Board Meeting

- September 29th, 1-3 pm at ISDH
- Please contact Rachel Kenny (rkenny@isdh.in.gov) if you are not on the listserv and would like to join!

INVDRS
Indiana Violent Death Reporting System

Indiana State Department of Health

INVDRS Staff

Name	Position	Phone	Email Address
Murray Lawry	Coroner Records Coordinator	317-233-7695	mlawry@isdh.in.gov
Rachel Kenny	Epidemiologist	317-233-8197	rkenny@isdh.in.gov
John O'Boyle	Law Enforcement Records Coordinator	317-233-7987	joboyle@isdh.in.gov
Marion Chaloux	Records Consultant		MChaloux@isdh.IN.gov

INVDRS
Indiana Violent Death Reporting System

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ISDH UPDATES

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Injury Prevention Program Coordinator

Welcome, Lauren Savitskas!

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Email questions to: **indianatrauma@isdh.in.gov**

Prescription Drug Overdose Prevention for States

Funding Opportunity Announcement

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Prescription Drug Overdose Prevention for States

- CDC Grant Funding Opportunity
  - CDC-RFA-CE15-1501
- Application submitted May 8th
- 3 main activities
  - Targeting main driver of epidemic: problematic prescribing
- Approved, but Unfunded

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Email questions to: **indianatrauma@isdh.in.gov**

Drug Overdose Information Website

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

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ISDH HOME

TRAUMA SYSTEM/INJURY PREVENTION

Site Index

Injury Prevention
- National and State Injury Facts
- Indiana Information
- Indiana Injury Prevention Advisory Council
- Indiana Violent Death Reporting System (INVDRS)
- Drug Overdose Information
- Injury and Violence Prevention Resources
- Motor Vehicle Safety Links
- Suicide Prevention Organizations
- Violence Prevention Resources
- Recreational and Home Safety Information
- Best Practices Archive

Indiana's Trauma System
Trauma Registry
Pre-Hospital/EMS
Trauma Centers
Trauma and Injury Prevention Division staff
What we're reading about trauma systems
Trauma and Injury Prevention Definitions
Calendar of Events
2015 Trauma Tour
2015 EMS Medical Directors' Conference
Trauma Times

TRAUMA SYSTEM/INJURY PREVENTION PROGRAM HOME

Click to subscribe

public health services to protect Indiana communities

o develop, imple ent and provide oversight of a statewide comprehensive trauma care system

atients.

event injuries in Indiana

Senate Enrolled Act (SEA) 180 required the Indiana State Department of Health, in consultation with Indiana Department of Veterans Affairs and Department of Mental Health and Addiction, to study and report findings and recommendations concerning implementation of a program for the treatment of veterans who have traumatic brain injury or posttraumatic stress disorder. The report can be reviewed here.

Trauma Registry Rule

New website:

- DATA!
- FAQ
- Common Definitions
- Common Acronyms
- Resource Section
- Additional Articles and Resources
- Data Requests

Email questions to: **indianatrauma@isdh.in.gov**

Trauma Tour Update

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Trauma Tour Update

- Visited all 10 Public Health Preparedness Districts
- Updates on Trauma System Development, Injury Prevention
- Introduced INVDRS
- Thank you to venues, vendees, & attendees!

Special Emphasis Reports

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Prescription Drug Overdose

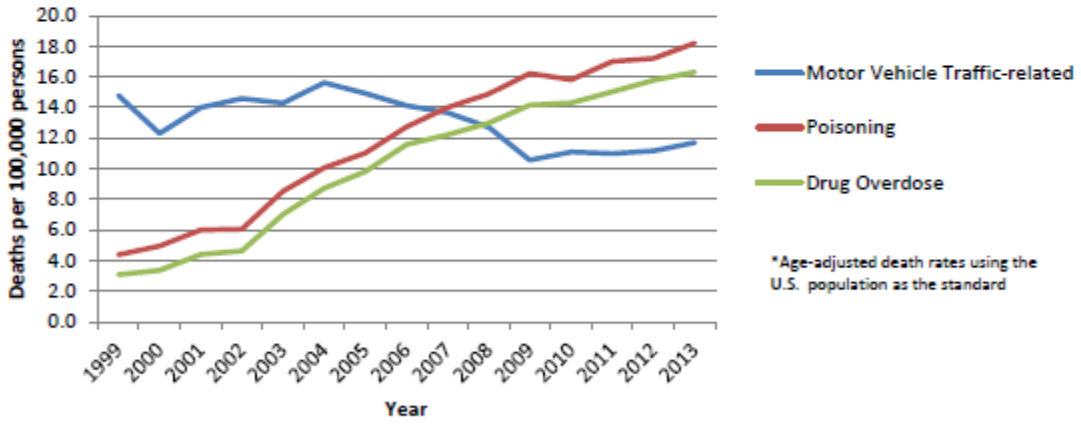
Indiana

Special Emphasis Report: Drug Overdose Deaths, 1999-2013

A Public Health Crisis Continues

Poisoning is the leading cause of injury deaths in Indiana, and drugs caused 9 out of 10 poisoning deaths. Drug poisoning deaths, also called overdoses, increased five-fold since 1999, surpassing motor vehicle traffic-related deaths in 2008 (Figure 1). In 2013, the poisoning death rate was 18.2 deaths per 100,000 persons, and the drug overdose death rate was 16.3 deaths per 100,000 persons, compared to a motor vehicle traffic-related death rate of 11.7 deaths per 100,000 persons. Nationally, overdose death rates due to opioid pain relievers have quadrupled from 1999-2010, and heroin overdoses increased by nearly 50%.[1]

Figure 1. Drug overdose death rates* compared to motor vehicle-related death rates, Indiana residents, 1999-2013



Drugs Caused 9 out of 10 Poisoning Deaths

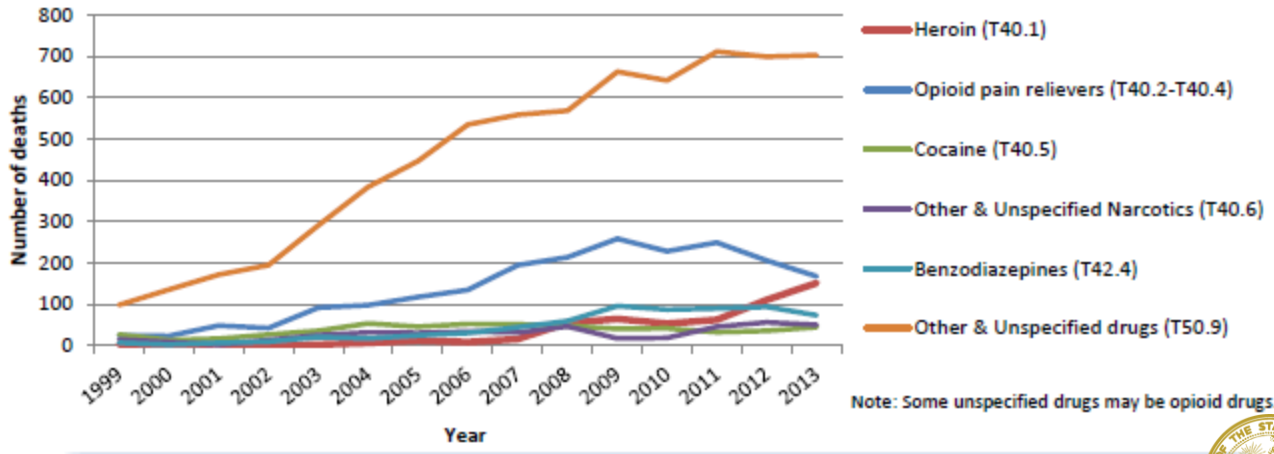
In 2013, drugs and medications –prescription drugs, illicit drugs, and over-the-counter medications, – were the underlying cause of death for 89.7% of all poisoning deaths. Of the drug overdose deaths, 78.0% were unintentional, 10.7% were suicide or intentional self harm, and 11.1% had undetermined intent. Males had rates 1.54 times higher than females and persons aged 25-34 had the highest rate of all age categories (30.9 per 100,000).

Prescription Drug Overdose

Opioid Pain Relievers & Heroin Contribute to Drug Overdose Deaths

Any drug has the potential to be misused or abused, and may be even more dangerous when used in combination with other drugs or alcohol. The three most common include painkillers, depressants, and stimulants. Opioid pain relievers, such as oxycodone or hydrocodone, contributed to 168 (16.0 percent) of the 1,049 drug overdose deaths in 2013. These results may underrepresent the burden of opioid deaths, and a death may be included in more than one drug category. The number of heroin overdoses increased 2.4 times from 2011 to 2013. This increase may be due to increased heroin supply (cheaper and easier accessibility) and widespread prescription opioid expsoure and increasing rates of opioid addiction. Heroin is an opioid and acts on the same receptors in the brain as opioid pain relievers. Approximately three out of four new heroin users report having abused prescription opioids prior to using heroin.[1]

Figure 2. Number of drug overdose deaths involving opioid pain relievers and other drugs, Indiana residents, 1999-2013



Note: Some unspecified drugs may be opioid drugs.

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Traumatic Brain Injury

Indiana

Special Emphasis Report: Traumatic Brain Injury, 2013

Understanding TBI

Traumatic brain injury (TBI) is a serious public health problem in the United States. A TBI is caused by a bump, blow, jolt or penetration to the head that disrupts the normal function of the brain. Each year, traumatic brain injuries contribute to a substantial number of deaths and permanent disability.

Figure 1: Percentage of Annual TBI-Related Deaths, Hospitalizations, and Emergency Department Visits, by External Cause, in Indiana, 2013

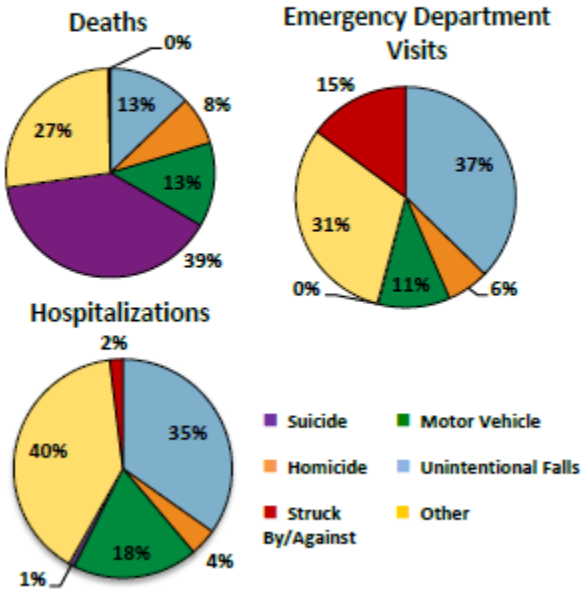
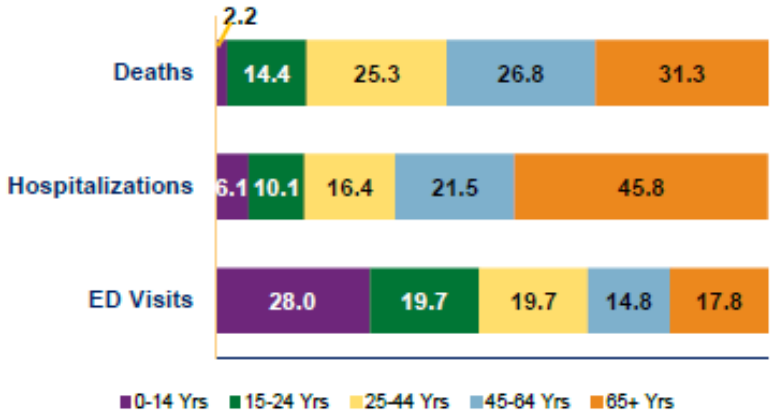


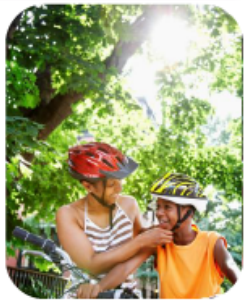
Figure 2: Percentage of Annual TBI-Related Deaths,* Hospitalizations, and Emergency Department Visits,**by Age, in Indiana, 2013**



Indiana

Special Emphasis Report: Traumatic Brain Injury, 2013

TBI by Gender



Men were more likely to sustain a traumatic brain injury than women. The magnitude of this difference was greatest among those who died. Men accounted for 72.7% (26.5 per 100,000) of deaths where TBI was reported as a cause of death on the death certificate alone or in combination with other injuries or conditions. Men accounted for 60.0% (87.0 per 100,000), of hospitalizations for TBI alone or in combination with other injuries or conditions and 50.8% (725.2 per 100,000) of emergency department visits for TBI alone or in combination with other injuries or conditions. Men were more likely to be hospitalized for motor vehicle traffic-related TBI compared to women.

TBI Prevention Strategies

There are many simple ways to reduce the chance of sustaining a TBI, which include:

1. Buckling your child in the car using a size and age-appropriate child safety seat, booster seat or seat belt.
2. Wearing a seat belt every time you drive or ride in a motor vehicle.
3. Never driving while under the influence of alcohol or drugs.
4. Wearing a helmet and making sure your children wear helmets while bicycling and playing contact sports.
5. Making living areas safer for seniors through home modifications, such as:
   - Removing tripping hazards such as throw rugs and clutter in walkways;
   - Using nonslip mats in the bathtub and on shower floors;
   - Installing grab bars next to the toilet and in the tub or shower and handrails on both sides of stairways;
6. Making living areas safer for children by installing window guards to keep young children from falling out of open windows, and using safety gates at the top and bottom of stairs when young children are around.
7. Making sure the surface on your child's playground is made of shock-absorbing material, such as hardwood mulch or sand.

CDC's National Center for Injury Prevention and Control (Injury Center) is committed to protecting people against preventable TBI by putting science into action.

- ***Heads Up*** – Injury Center campaigns with free tools for health care providers, school administrators, nurses, teachers, coaches and parents to help them recognize and respond to a TBI. www.cdc.gov/traumaticbraininjury
- **Motor Vehicle Safety** – Motor vehicle crashes are a leading cause of death, injury and TBI in the US. CDC's primary prevention focuses on child passenger safety, seat belt use and reducing impaired driving.
  www.thecommunityguide.org/mvoi www.cdc.gov/motorvehiclesafety

Indiana TBI Activities

The Indiana Trauma Registry is a repository into which statewide trauma data has been brought together to support three foundational activities: identification of the trauma population, statewide process improvement activities, and research.

Indiana Injury Prevention Advisory Council works to reduce the number and severity of preventable injuries in Indiana through leadership and advocacy. The **Indiana Statewide Trauma System Injury Prevention Plan** includes facilitating opportunities for collaborative injury prevention efforts in traumatic brain injury.

The **Spinal Cord and Brain Injury Fund** is utilized to: 1) establish and maintain a state medical surveillance registry for traumatic spinal cord and brain injuries; 2) fulfill the duties of the board; and 3) fund research related to treatment and cure of spinal cord and brain injuries; 4) fund post-acute extended treatment and services for an individual with a spinal cord injury or facilities that offer long term activity based therapy services for spinal cord injuries requiring extended post-acute care; 5) fund post-acute extended treatment and services for an individual with a brain injury or facilities that offer long term activity based therapy services for brain injuries requiring extended post-acute care and 6) develop a statewide trauma system.

Note: TBI-related cases were identified by first limiting the datasets to injury cases based on external cause of injury (deaths), primary diagnosis (hospitalizations), or both (emergency department visits). All fields were then searched for TBI diagnostic codes. Reference to any commercial entity or product or service on this page should not be construed as an endorsement by the Government of the company or its products or services.

Indiana State Department of Health
Division of Trauma and Injury Prevention
Indianatrauma.org

TBI Strategies & Activities

2015 Fireworks Report

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Fireworks Report

- 9/13/2014- 9/12/2015; collected per IC 35-47-7-7

Preliminary data:

- 181 unduplicated cases
- 2 deaths (one not reported to ISDH)
- Average age: 24.5 years
- 61 cases under age 18
- 21 cases transferred
- Report to be released by 12/31/15

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Email questions to: **indianatrauma@isdh.in.gov**

Resource Guide & App Development

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Strategic Communication Plan Summary

- Continuing to work with Dr. Maria Brann & IUPUI
- Survey for pre-launch perspective
- Will continue to monitor survey results
- Will have post-launch survey at a later date

Indiana State Department of Health

Resource Guide

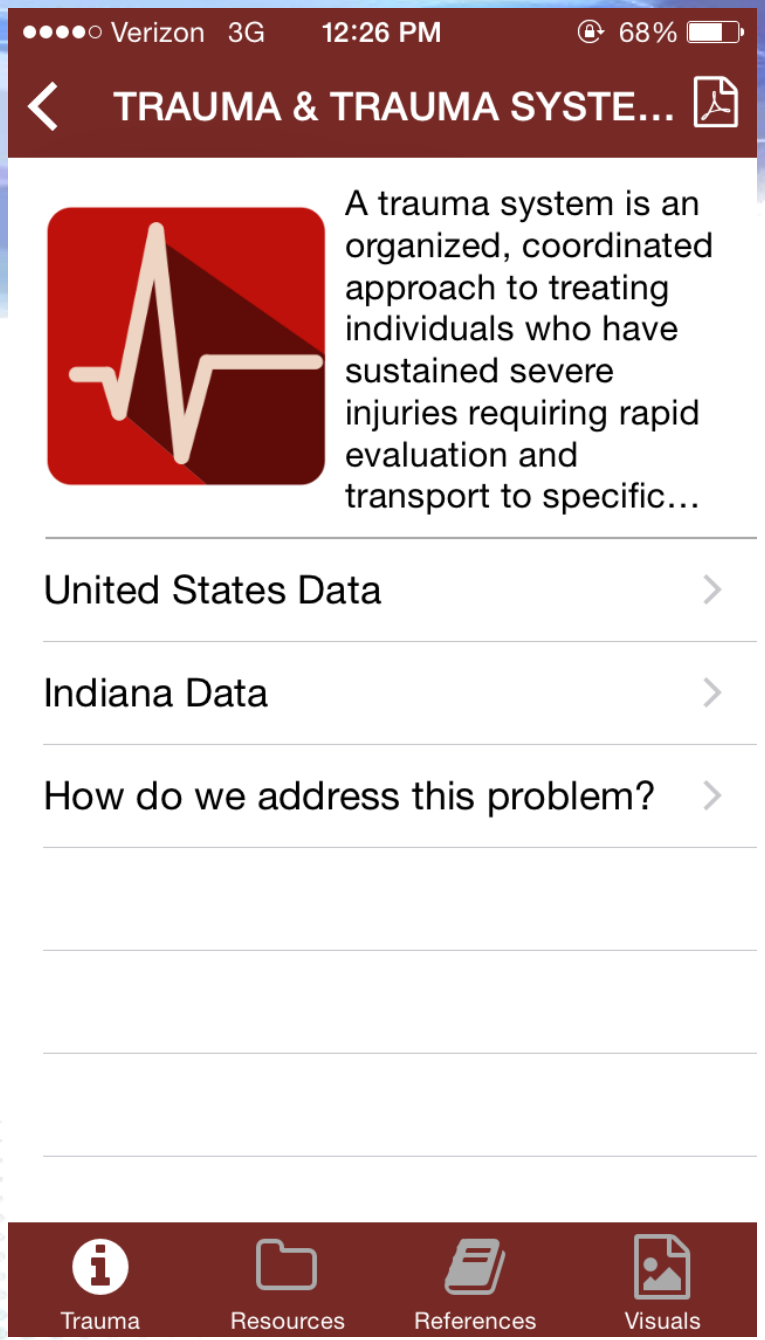
- Soon to be available on ISDH Website!
- Will notify by email when posted
- Will send out prepared text to have you forward to your contacts
- Notification to: IPAC, ED managers, DCS, Child Fatality Review teams & More

Resource Guide App

- Injury Prevention at your fingertips
- Free download for iOS & Android
  - phone & tablet capabilities
- To be available in App Store next week
  - Will send out notification
  - ISDH to do formal press release

Indiana State Department of Health

10 topics in initial launch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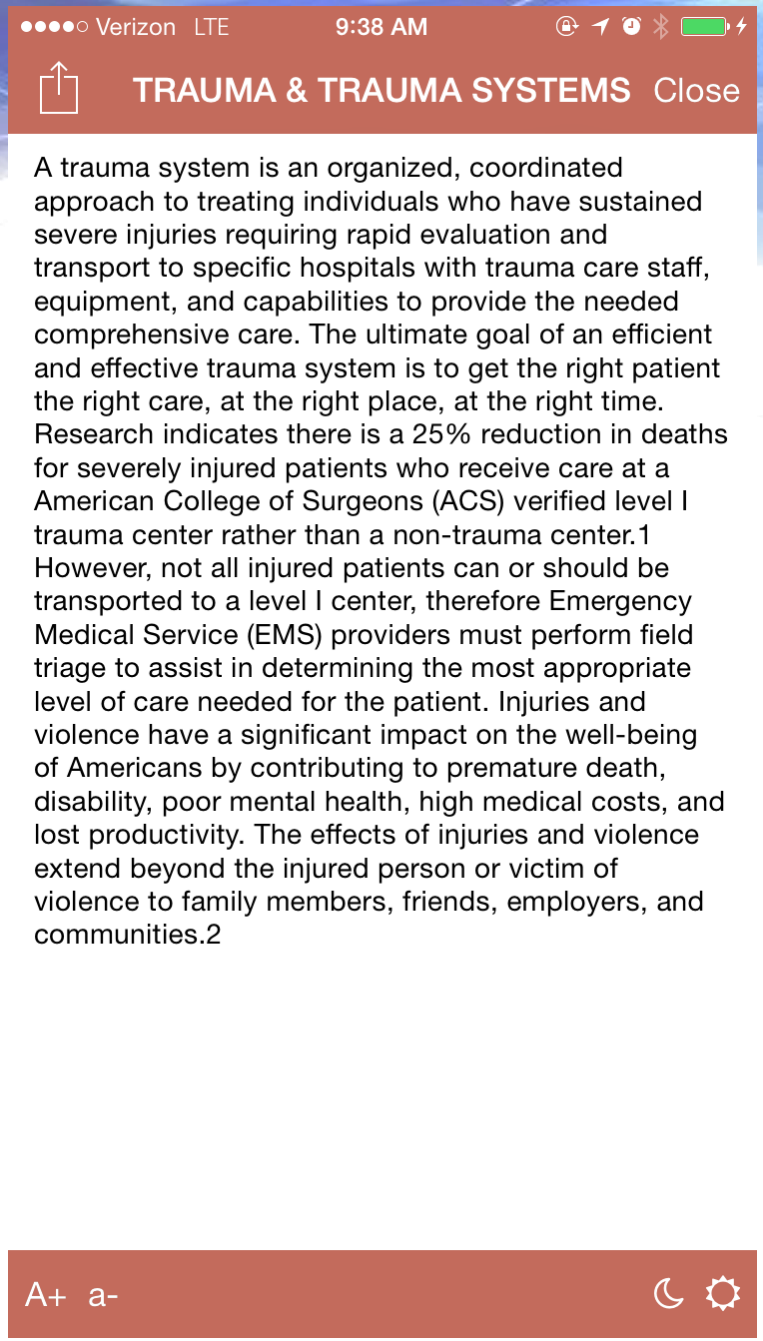
TRAUMA & TRAUMA SYSTE...
A trauma system is an organized, coordinated approach to treating individuals who have sustained severe injuries requiring rapid evaluation and transport to specific…
United States Data
Indiana Data
How do we address this problem?
Trauma
Resources
References
Visuals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TRAUMA & TRAUMA SYSTEMS Close
A trauma system is an organized, coordinated approach to treating individuals who have sustained severe injuries requiring rapid evaluation and transport to specific hospitals with trauma care staff, equipment, and capabilities to provide the needed comprehensive care. The ultimate goal of an efficient and effective trauma system is to get the right patient the right care, at the right place, at the right time. Research indicates there is a 25% reduction in deaths for severely injured patients who receive care at a American College of Surgeons (ACS) verified level I trauma center rather than a non-trauma center.1 However, not all injured patients can or should be transported to a level I center, therefore Emergency Medical Service (EMS) providers must perform field triage to assist in determining the most appropriate level of care needed for the patient. Injuries and violence have a significant impact on the well-being of Americans by contributing to premature death, disability, poor mental health, high medical costs, and lost productivity. The effects of injuries and violence extend beyond the injured person or victim of violence to family members, friends, employers, and communities.2
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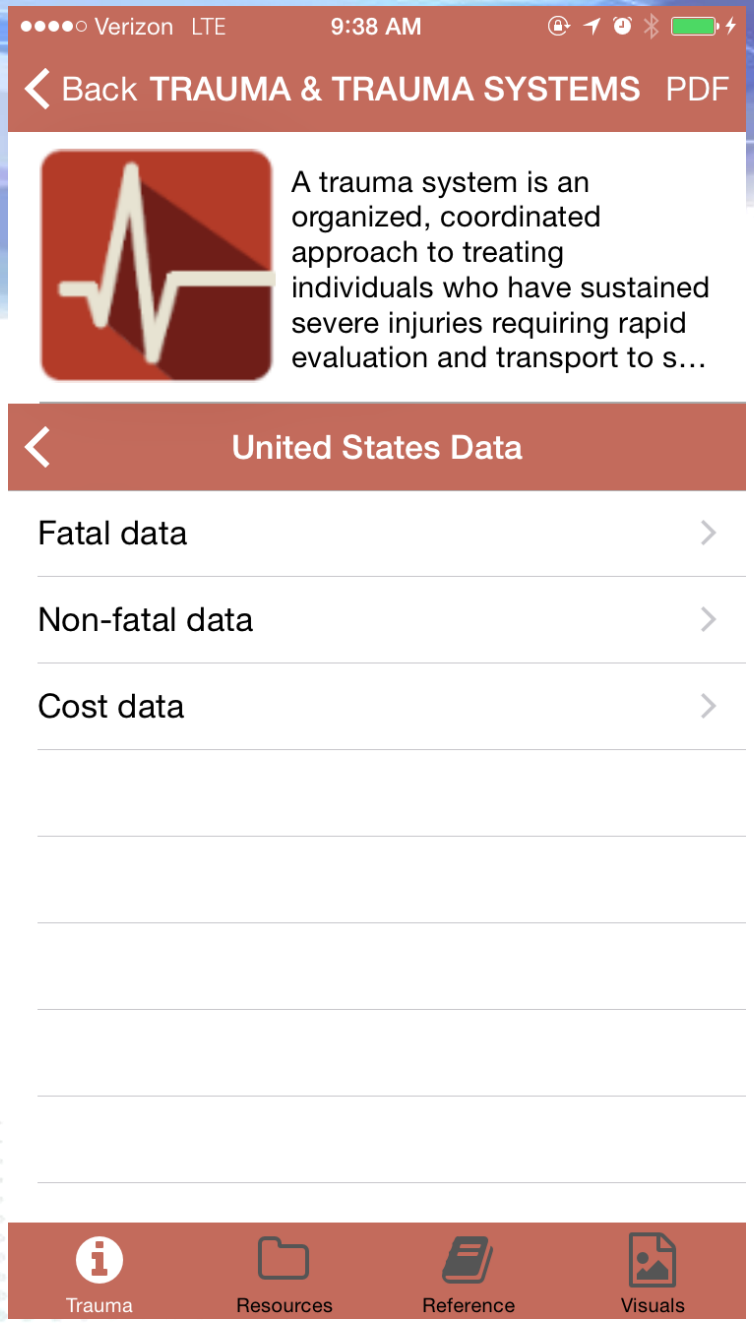
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Fatal data
Non-fatal data
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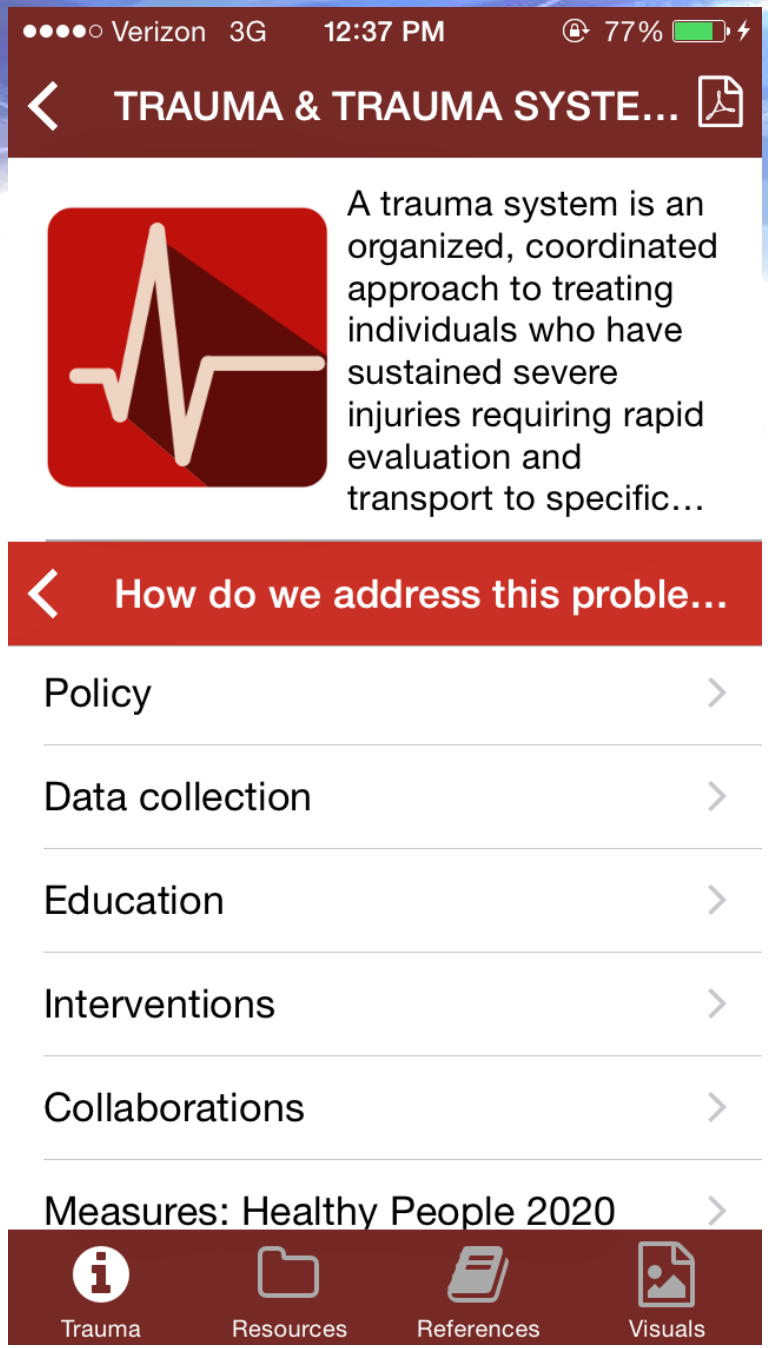
Trauma
Resources
Reference
Visuals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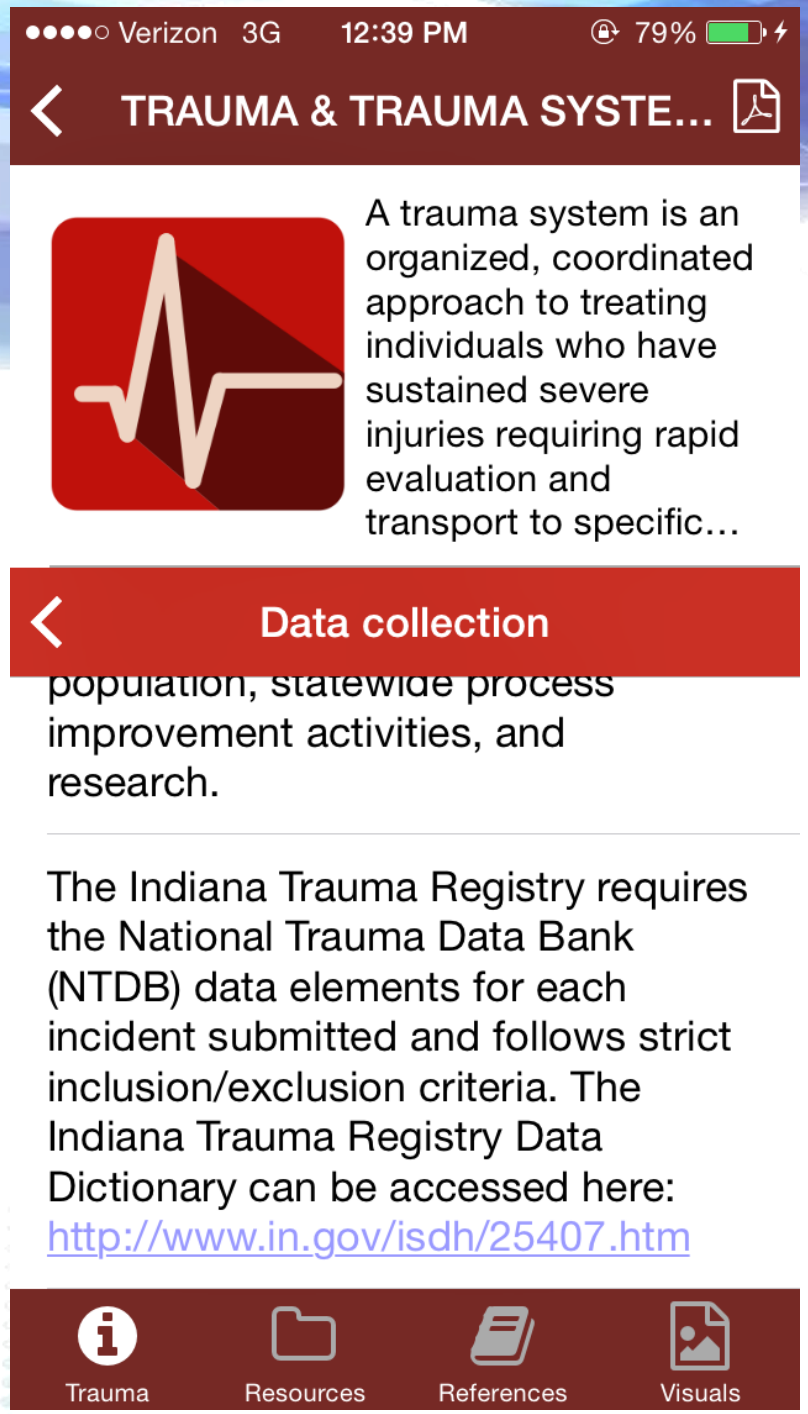
TRAUMA & TRAUMA SYSTE…
A trauma system is an organized, coordinated approach to treating individuals who have sustained severe injuries requiring rapid evaluation and transport to specific…
How do we address this proble…
Policy
Data collection
Education
Interventions
Collaborations
Measures: Healthy People 2020
Trauma
Resources
References
Visuals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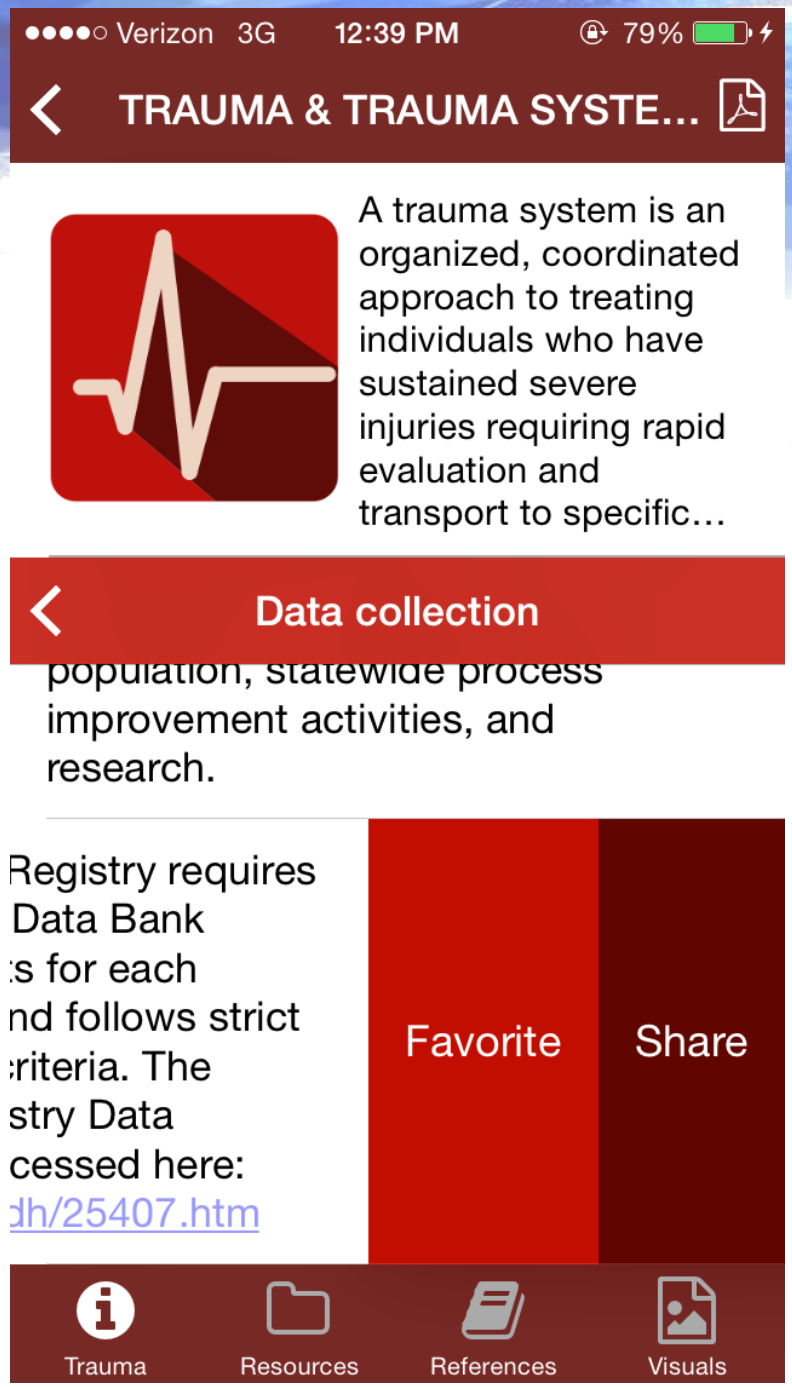
A trauma system is an organized, coordinated approach to treating individuals who have sustained severe injuries requiring rapid evaluation and transport to specific…
Data collection
population, statewide process improvement activities, and research.
The Indiana Trauma Registry requires the National Trauma Data Bank (NTDB) data elements for each incident submitted and follows strict inclusion/exclusion criteria. The Indiana Trauma Registry Data Dictionary can be accessed here: http://www.in.gov/isdh/25407.htm
Trauma
Resources
References
Visuals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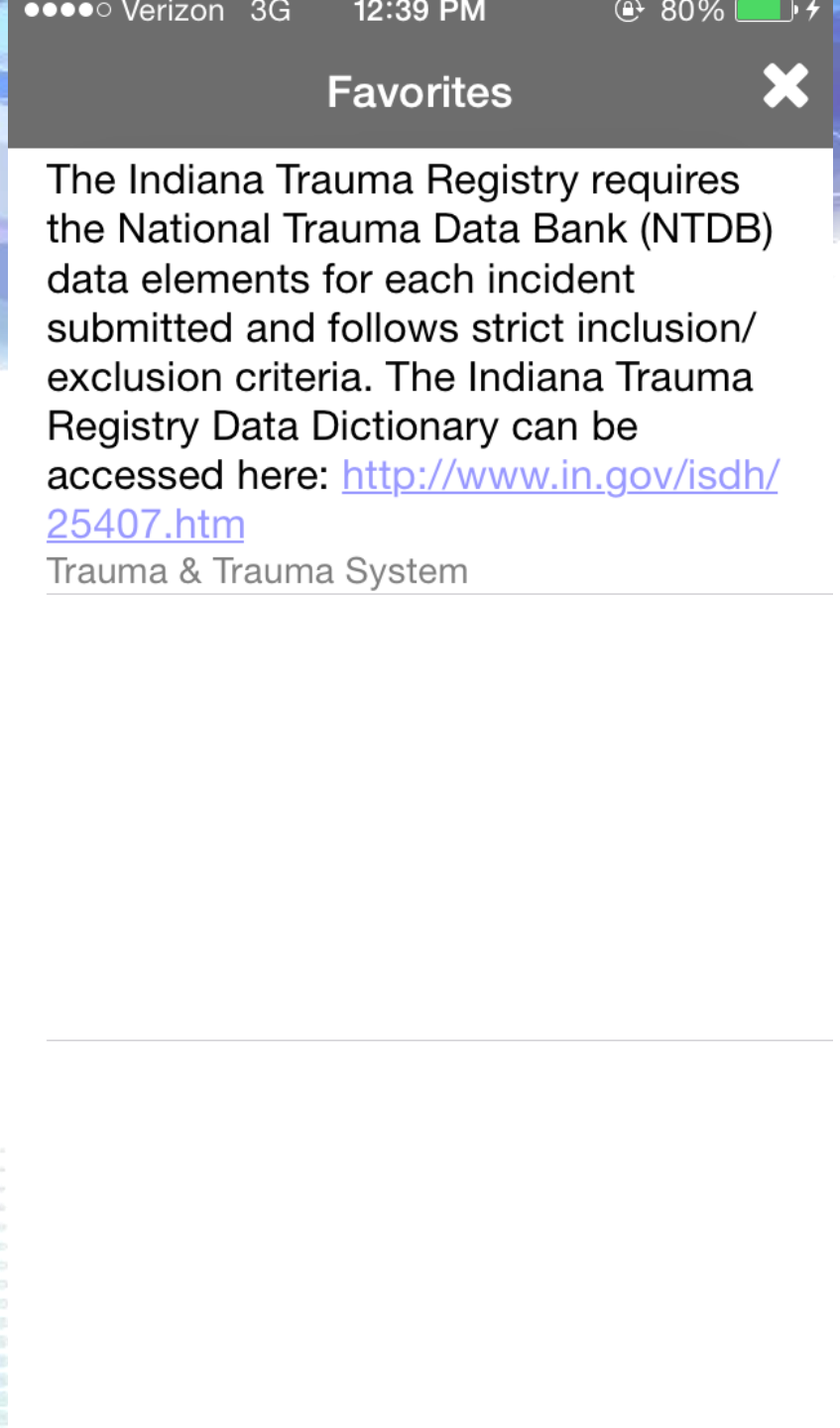
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Favorites
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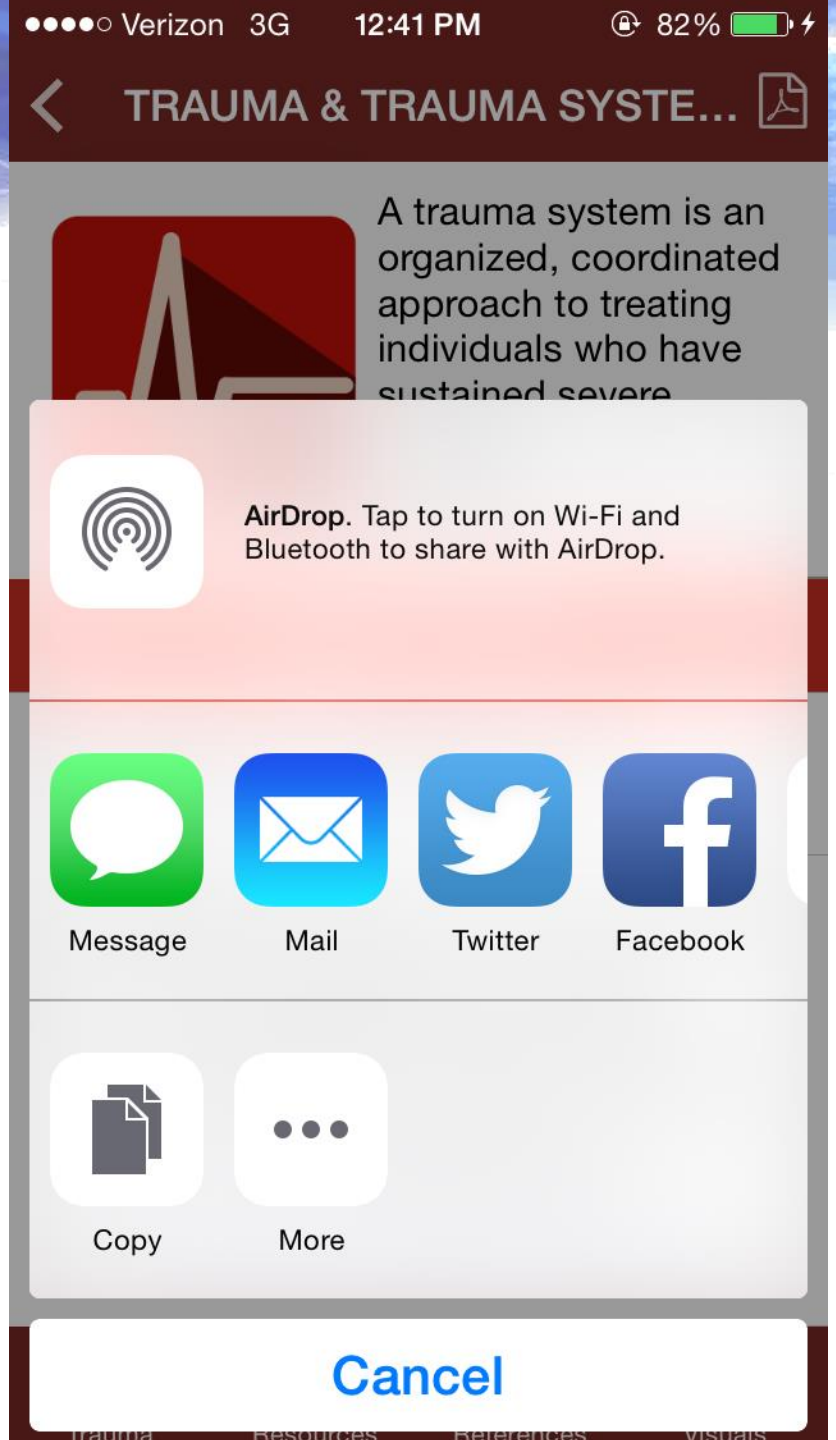
Trauma & Trauma System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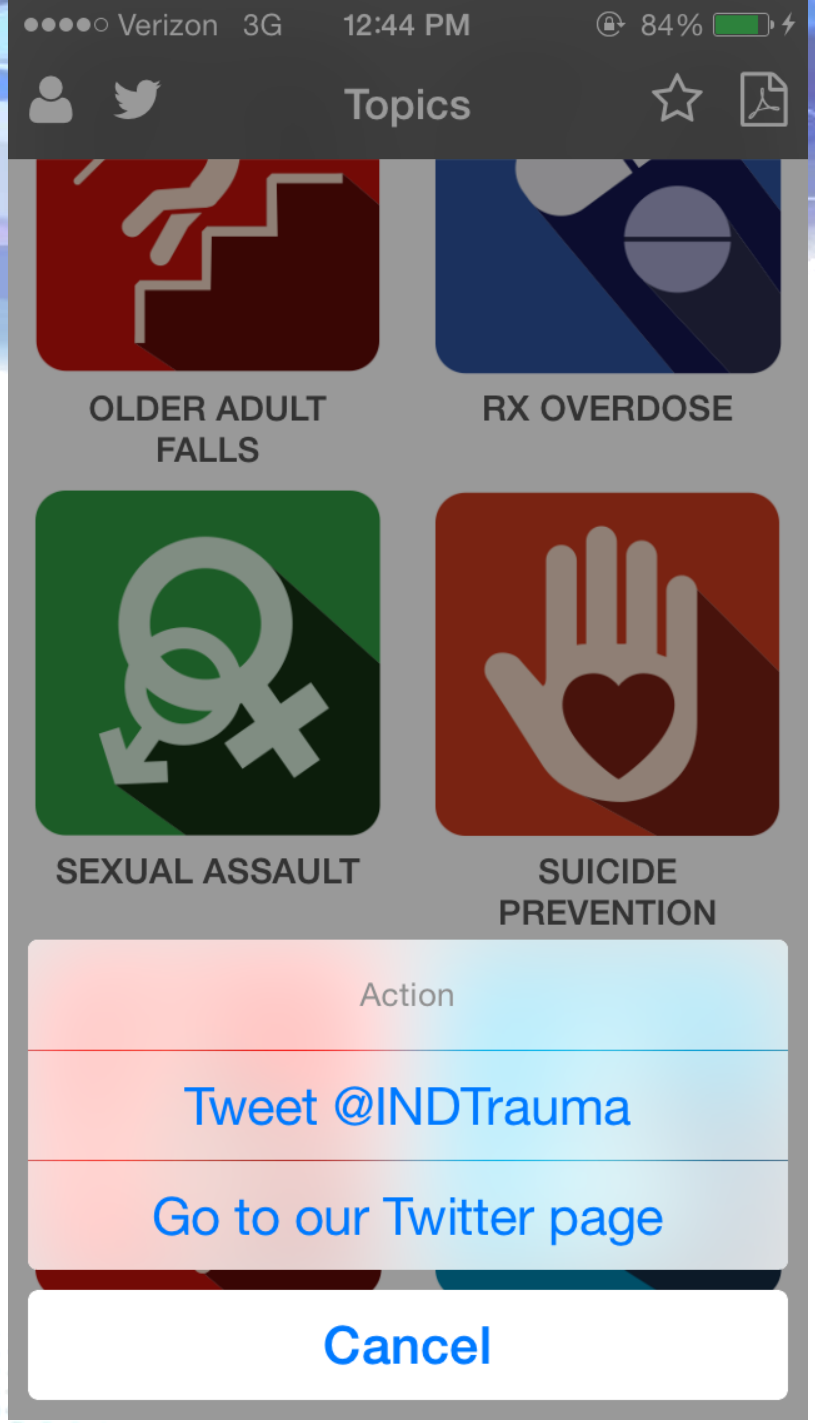
TRAUMA & TRAUMA SYSTE...
A trauma system is an organized, coordinated approach to treating individuals who have
AirDrop. Tap to turn on Wi-Fi and Bluetooth to share with AirDrop.
Message
Mail
Twitter
Facebook
Copy
More
Cancel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Topics
OLDER ADULT FALLS
RX OVERDOSE
SEXUAL ASSAULT
SUICIDE PREVENTION
Action
Tweet @INDTrauma
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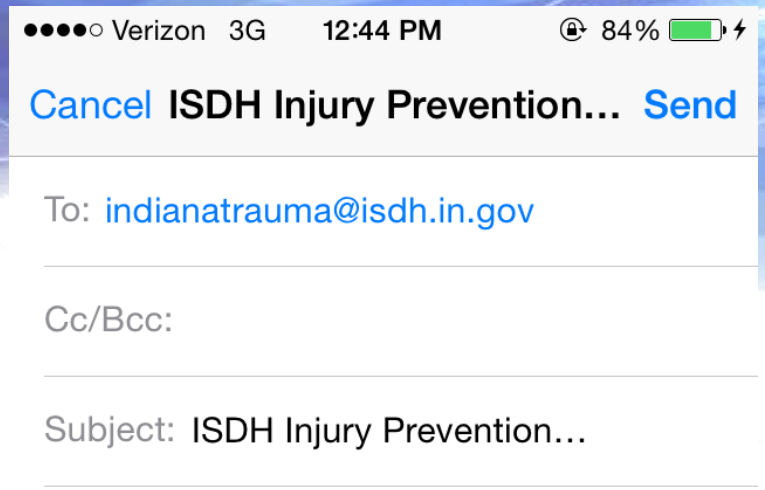
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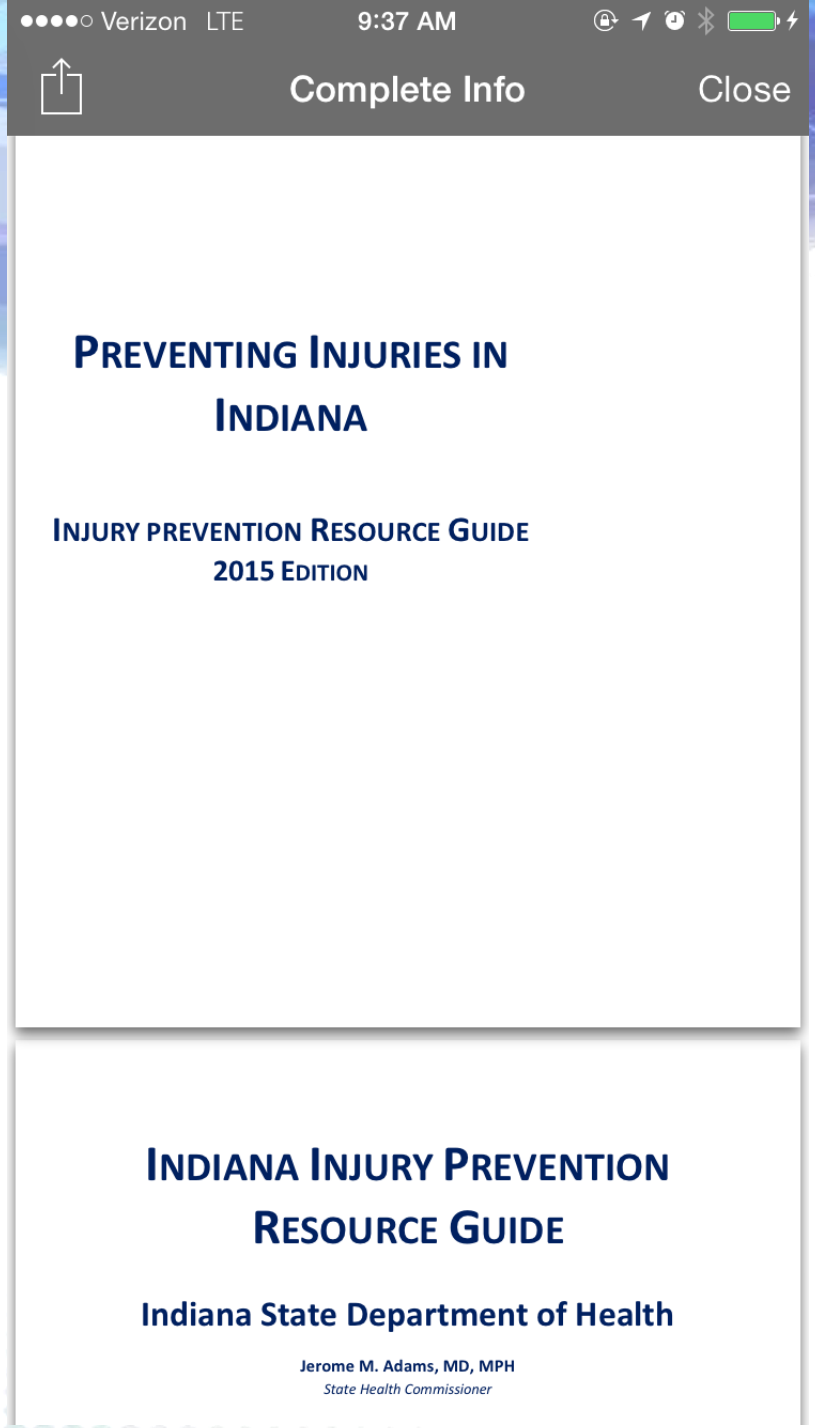
ISDH Injury Prevention…
Send
To: indianatrauma@isdh.in.gov
Cc/Bcc:
Subject: ISDH Injury Prevention…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Complete Info
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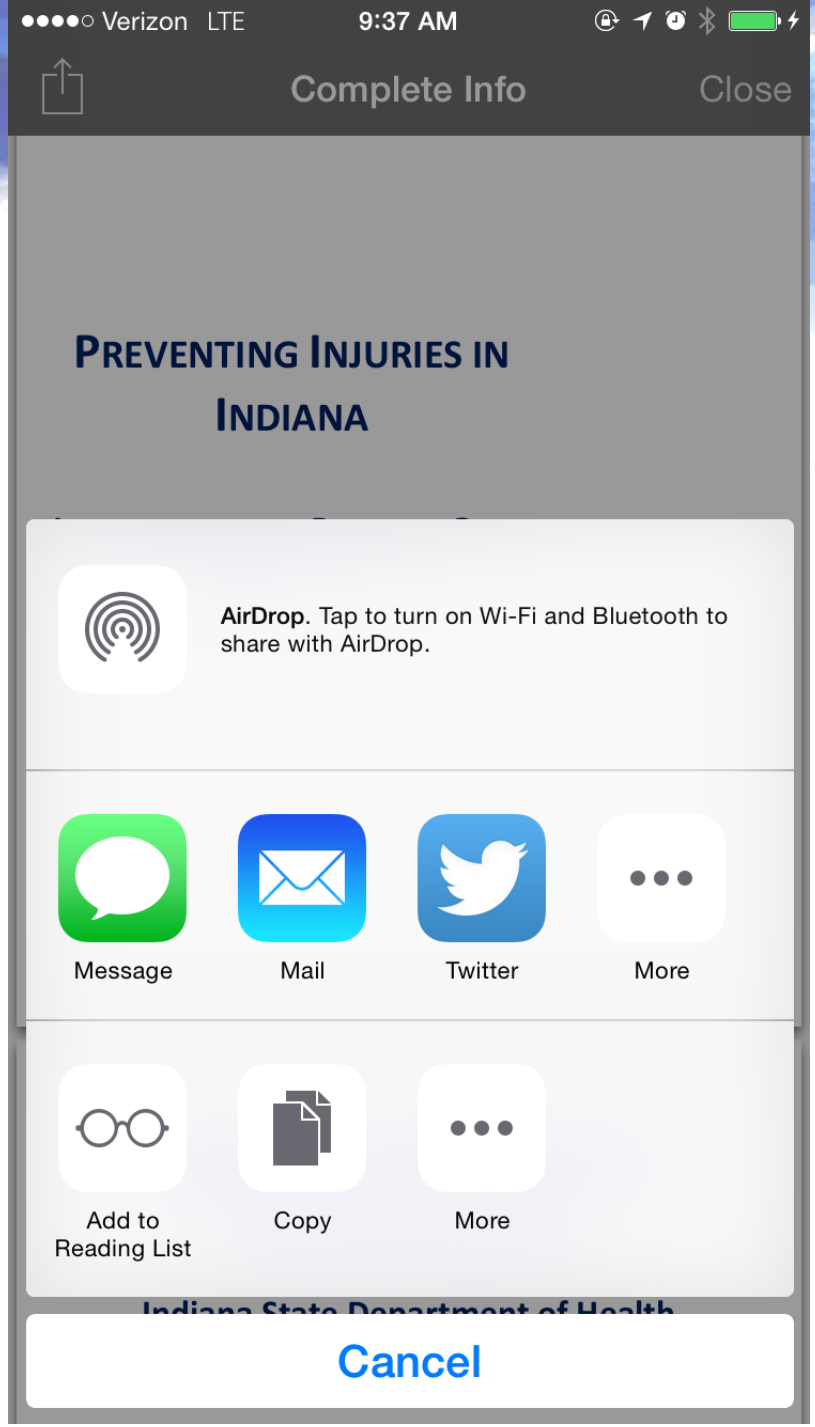
PREVENTING INJURIES IN INDIANA
INJURY PREVENTION RESOURCE GUIDE
2015 EDITION
INDIANA INJURY PREVENTION RESOURCE GUIDE
Indiana State Department of Health
Jerome M. Adams, MD, MPH
State Health Commissioner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PREVENTING INJURIES IN INDIANA
AirDrop. Tap to turn on Wi-Fi and Bluetooth to share with AirDrop.
Message
Mail
Twitter
More
Add to Reading List
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More
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POTENTIAL COLLABORATIONS & OPEN DISCUSSION

Email questions to: **indianatrauma@isdh.in.gov**

IPAC UPDATES

Email questions to: **indianatrauma@isdh.in.gov**

2016 Conference Planning Subcommittee

- Proposed date: May 2016
- Day long conference
- Venue TBD
- Will reach out to previous subcommittee members
  - Contact Jessica if you would like to assist in planning

Indiana State Department of Health

Next Meetings

- Thursday, December 10, 2015: 1 p.m.-3 p.m. EST
  - Rice Auditorium at ISDH

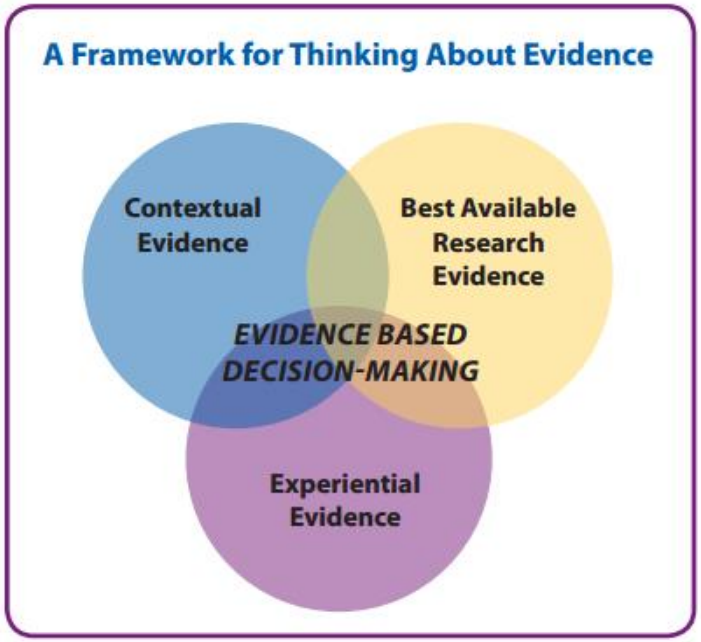
- New 2016 Dates: 3rd Friday of the month
  - **10 a.m.-12 p.m. EST in Rice Auditorium**
  - March 18
  - July 15
  - September 16
  - November 18

Indiana State Department of Health

Email questions to: **indianatrauma@isdh.in.gov**

Next Meeting: December 10

- Sally Thigpen, MPA, Health Scientist, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention
- Understanding Evidence & Evaluation Project in the Division of Violence Prevention



INJURY RESEARCH WORKGROUP & HOSPITAL-BASED VIOLENCE PREVENTION

Presentation moved to Spring 2016

Jennifer Walthall, MD, MPH

Deputy Health Commissioner & Director of Health Outcomes

Email questions to: **indianatrauma@isdh.in.gov**

Invite New Members to IPAC

Please forward my contact information to colleagues interested in violence & injury prevention!

Indiana State Department of Health

UPCOMING INJURY PREVENTION EVENTS AND ACTIVITIES

Email questions to: **indianatrauma@isdh.in.gov**

September 2015

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Infant Mortality Month Healthy Aging Month National TBI Awareness Month	National Preparedness Month National Recovery Month	1 Drive Sober or Get Pulled Over (8/19-9/7)	2 Drive Sober or Get Pulled Over (8/19-9/7)	3 Drive Sober or Get Pulled Over (8/19-9/7)	4 Drive Sober or Get Pulled Over (8/19-9/7)	5 Drive Sober or Get Pulled Over (8/19-9/7)
6 Drive Sober or Get Pulled Over (8/19-9/7)	7 Labor Day National Suicide Prevention Week	8 National Suicide Prevention Week	9 National Suicide Prevention Week	10 World Suicide Prevention Day National Suicide Prevention Week	11 National Suicide Prevention Week	12 National Suicide Prevention Week
13 Child Passenger Safety Week	14 Child Passenger Safety Week	15 Child Passenger Safety Week	16 Child Passenger Safety Week	17 IPAC Child Passenger Safety Week	18 Child Passenger Safety Week	19 Child Passenger Safety Week
20 National Farm Safety & Health Week	21 National Farm Safety & Health Week	22 National Farm Safety & Health Week	23 Falls Prevention Awareness Day National Farm Safety & Health Week	24	25	26
27	28	29 INVDRS Advisory Board meeting	30			

October 2015

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Domestic Violence Awareness Month National Bullying Prevention Month	Children's Health Month SIDS Awareness Month	Eye Injury Prevention Month		1	2	3
4 Fire Prevention Week	5 Fire Prevention Week	6 Fire Prevention Week	7 Fire Prevention Week International Walk to School Day	8 Fire Prevention Week	9 Fire Prevention Week	10 Fire Prevention Week
11 Emergency Nurses Week	12 Columbus Day Emergency Nurses Week	13 Emergency Nurses Week	14 Emergency Nurses Week	15 Emergency Nurses Week	16 Emergency Nurses Week	17 Emergency Nurses Week
18	19 National Teen Driver Safety Week	20 National Teen Driver Safety Week	21 National Teen Driver Safety Week	22 National Teen Driver Safety Week	23 National Teen Driver Safety Week	24 National Teen Driver Safety Week
25 National Teen Driver Safety Week	26	27	28	29	30	31 Halloween Safety (impaired driving & pedestrian safety)

November 2015

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3 General Election Day	4	5	6	7
8	9	10	11 Veteran's Day	12	13	14
15	16	17	18	19	20 ISTCC ITN	21 International Survivors of Suicide Loss Day
22	23	24	25	26 Thanksgiving Day	27 Lincoln's Birthday Thanksgiving Holiday Travel	28 Pre-Holiday Season Impaired Driving Prevention (11/28-12/15)
29 Pre-Holiday Season Impaired Driving Prevention (11/28-12/15)	30 Pre-Holiday Season Impaired Driving Prevention (11/28-12/15)					

Prescription Drug Take Back

Friday, September 25th
11:00 am - 1:00 pm

Government Center North 100 N. Senate Ave. Indianapolis, IN 46204

Dispose of your expired or unused Rx medications safely.

Indiana State Police will have a collection box in Indiana Government Center North lobby at the public door entrances where Capitol Police Officers are normally staffed. This will be the designated collection area on Friday, September 25th from 11:00 am to 1:00 pm.

For other take back locations visit:

BitterPill.IN.gov

The first 60 people to arrive will recieve a Colts promo DVD!

INDIANA STATE POLICE

INDIANA PRESCRIPTION DRUG ABUSE PREVENTION TASK FORCE

Proud Partner of the Indianapolis Colts

U.S. Department of Justice Drug Enforcement Administration Office of Diversion Control

Saturday, September 26:
10 a.m. – 2 p.m.

https://www.deadiversion.usdoj.gov/NTBI/ntbi-pub.pub?_flowExecutionKey=_cE217368D-116D-AC30-C314-AF94D28E9BEA_kFDAA1159-4D6E-1B80-6EF9-3952695921BA

Midwest Injury Prevention Alliance

Innovation in Injury

Cutting edge approaches to reducing injury

Sunday, November 8, 2015
8:00 a.m. – 4:00 p.m.

Monday, November 9, 2015
7:30 a.m. – 12:00 p.m.

Featured topics:

- Prescription drug overdose
- Older adult falls
- Emerging childhood hazards
- Policy change
- Mortality reviews as a catalyst for prevention
- Hospital based violence prevention

Target audience: Injury professionals from Illinois, Indiana, Minnesota, Michigan, Ohio and Wisconsin working in a variety of settings, including:

- State and local government
- Health care organizations
- Academic institutions
- Non-profit organizations
- Community-based organizations
- Mortality review, including VDRS, CDR and FIMR

Midwest Injury Prevention Alliance

Innovation in Injury

Cutting edge approaches to reducing injury

Location details: The Madison Concourse Hotel and Governor's Club (1 W. Dayton Street, Madison, WI 53703)

Hotel accommodations: The Madison Concourse Hotel and Governor's Club
Phone number: (800) 356-8293
Group code: Children's Health Alliance of Wisconsin
Room rate: $70. Reservations must be made by Oct. 5, 2015 to receive this rate
Registration cost: $25

About MIPA: The mission of MIPA is to facilitate development of a coordinated approach for unintentional and intentional injury prevention and control in the region. MIPA promotes the development and sharing of injury prevention planning, evaluation, education and policy strategies, training, research, and other initiatives among members of the MIPA network.

For additional information contact Abby Collier (ajcollier@chw.org or (414) 337-4566) or visit http://www.midwestinjury.com/

Email questions to: **indianatrauma@isdh.in.gov**

Dates to Save

- University of Michigan Injury Center Sports Concussion Summit – September 24 in Ann Arbor, MI
- National Walking Summit |Every Body Walk – October 28-30, 2015
- University of Michigan Injury Center Prescription Drug Overdose Summit – December 1 in Ann Arbor, MI
- Transforming Injury and Violence Prevention: Innovations in Policy, Practice, and Partnerships – November 13 in Seattle, WA
- National Prevention Network Conference – November 17-19 in Seattle, WA

Contact

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Injury Prevention Epidemiologist
Division of Trauma and Injury Prevention
Indiana State Department of Health

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Phone: 317-233-7716

Indiana State Department of Health