

Office of Injury Prevention

# 2004 Florida Injury Prevention Action Plan





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This action plan outlines activities that start in 2004, and may continue through subsequent years.

**GOAL 1: Establish a sustainable infrastructure to provide leadership and to coordinate, monitor, and evaluate strategic plan implementation.**

**Strategy 1A: Designate the Office of Injury Prevention (OIP) within the Florida Department of Health (DOH) as the lead office with responsibility for statewide injury prevention leadership, collaboration and coordination.**

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1A1: Draft a letter for the Secretary of Health's signature to state agency heads (e.g., transportation/highway safety, agriculture, education) asking for their support for the plan, designation of an agency representative and partnership in implementation.	DOH Office of Injury Prevention (OIP)	Secretary of Health	State agency representatives	Completion of draft letter	May be accomplished with current funding
1A2: Send the letter with the plan.	DOH Executive Staff	DOH (OIP)	DOH (OIP)	Distribution of letter; number of support letters obtained; number of representatives designated	May be accomplished with current funding

## Strategy 1B: Designate an injury prevention coordinator among existing staff for each DOH Division and for each County Health Department (CHD) or group of health departments to work with local community partners.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1B1: Make an injury prevention presentation at a CHD Directors' quarterly meeting.	DOH (OIP)	OIP manager or designee	CHD Directors	Completion of presentation(s)	May be accomplished with current funding
1B2: Draft letter for Secretary of Health's signature requesting that CHD and Division Directors designate an injury prevention contact person to work with OIP on plan implementation.	DOH (OIP)	OIP manager or designee	N/A	Letter sent by Secretary of Health	May be accomplished with current funding
1B3: Obtain the names of contact persons from CHD Directors and Division Directors.	DOH (OIP)	OIP manager or designee	CHD Directors and Division Directors	Designation of contact persons	May be accomplished with current funding
1B4: Collaborate with designated CHD and Division injury prevention contact persons on plan implementation.	DOH (OIP)	OIP manager or designee	CHD and Division-designated injury prevention contact persons	Assignment of plan implementation activities to CHD and Division-designated injury prevention contact persons	May require additional funding
1B5: Design and implement a system of two-way communications within DOH; start with dissemination of strategic plan and injury data.	DOH (OIP)	OIP manager or designee	CHD and Division-designated injury prevention contact persons; DOH information technology	Establishment of communications system; dissemination of strategic plan and injury data	May require additional funding

## Strategy 1C: Establish an Injury Prevention Advisory Council with officers to create an advisory infrastructure for coordination of injury prevention.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1C1: Submit a request to the Secretary of Health for approval to appoint an Injury Prevention Advisory Council to begin implementing the strategic plan.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Approval of an Injury prevention Advisory Council	May be accomplished with current funding
1C2: Recommend categories and scope of membership for the Injury Prevention Advisory Council (e.g., representing geographic areas, diverse populations, and needed knowledge/skills).	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Establishment of membership categories for the Council	May be accomplished with current funding
1C3: Solicit nominations for Injury Prevention Advisory Council membership.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Submission of nominations	May be accomplished with current funding

1C4: Submit a request to the Secretary of Health with recommendations for appointment of an Injury Prevention Advisory Council to begin implementing the strategic plan.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Approval of an Injury Prevention Advisory Council	May be accomplished with current funding
1C5: Notify appointees.	DOH (OIP)	OIP manager or designee	DOH Executive Staff	Formalization of Council	May be accomplished with current funding

### Strategy 1D: Establish, when needed, subcommittees of the Injury Prevention Advisory Council for coordinating, monitoring, and evaluating the goals of the strategic plan.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1D1: Specify tasks for Injury Prevention Advisory Council subcommittees.	Injury Prevention Advisory Council	Injury Prevention Advisory Council chairperson	Injury prevention stakeholders	Creation of subcommittees and specification of tasks	May require additional funding

### Strategy 1E: Design, when needed, evaluation and reporting mechanisms for each goal.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1E1: Develop a template for the reporting of statewide injury prevention activities and results to the Injury Prevention Advisory Council.	Injury Prevention Advisory Council	Injury Prevention Advisory Council chairperson	None	Development of the template	May require additional funding

### Strategy 1F: Inventory Florida's injury prevention workforce.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
1F1: Develop a data collection tool.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Completion of data collection tool	Contingent upon additional funding
1F2: Develop a distribution list for the data collection tool.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Completion of distribution list	Contingent upon additional funding
1F3: Collect workforce data.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Completion of data collection	Contingent upon additional funding
1F4: Design a method for maintaining current, complete workforce data.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Completion of methodology design	Contingent upon additional funding
1F5: Develop a mechanism for internet access to workforce data.	DOH (OIP)	OIP manager or designee	Injury prevention stakeholders	Number of hits on web site	Contingent upon additional funding

Strategies 1G through 1K will begin in 2005.

**GOAL 2: Increase public and private funding for injury prevention.**

**Implementation of strategy 2A will begin in 2005.**

**Strategy 2B: Develop partnerships with foundation(s) to assist in seeking and managing funds to enhance injury prevention activities throughout Florida.**

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
2B1: Explore the feasibility of establishing an Injury Prevention Committee (IPC) within the Florida Public Health Foundation (FPHF) to seek funding opportunities and act as a management resource for administration and distribution of funds for injury prevention activities throughout Florida.	FPHF	FPHF Executive Director	Florida Emergency Medicine Foundation (FEMF), DOH	Results reported	May require additional funding
2B2: Appointments for the IPC will be sought from public and private injury prevention partner entities throughout Florida in collaboration with the Goal 2 subcommittee, the OIP, the Injury Prevention Advisory Council, and the FEMF.	FPHF	FPHF Executive Director	OIP, Injury Prevention Advisory Council/Goal 2 subcommittee, FEMF	Appointments made	May require additional funding

**Implementation of strategy 2C will begin in 2005.**

**GOAL 3: Build the capacity of communities to reduce and prevent injuries to high-risk groups and effectively address injury prevention priorities.**

**Implementation of strategies will begin in 2005.**

**GOAL 4: Increase state-of-the-art knowledge and skills in the injury prevention workforce.**

**Implementation of strategies will begin in 2005.**

**GOAL 5: Increase the use of evidence-based injury prevention interventions statewide.**

**Implementation of strategies will begin between 2005 and 2007**

**GOAL 6: Increase the quality and availability of statewide and community-specific data for planning, surveillance, and evaluation.**

**Strategy 6A: Partner to develop a centralized medical examiner data reporting system.**

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
6A1: Acquire data dictionaries from individual medical examiners that maintain electronic databases.	DOH (OIP)	Injury prevention epidemiologist	Florida Medical Examiner Commission (FMEC), DOH Office of Planning, Analysis and Evaluation	Completion of assessment	Contingent upon additional funding
6A2: Develop a survey tool for evaluating existing medical examiner databases and data management practices for the 24 individual medical examiners.	DOH (OIP)	Injury prevention epidemiologist	FMEC, DOH Office of Planning, Analysis and Evaluation	Completion of survey tool	Contingent upon additional funding
6A3: Conduct the survey.	DOH (OIP)	Injury prevention epidemiologist	FMEC	Completion of survey	Contingent upon additional funding
6A4: Compile, analyze and summarize survey results.	DOH (OIP)	Injury prevention epidemiologist	FMEC	Completion of survey compilation, analysis, and summarization	May require additional funding
6A5: Assess models used in other states for collecting and reporting medical examiner death data.	DOH (OIP)	Injury prevention epidemiologist	FMEC	Completion of assessment	May require additional funding
6A6: Develop recommendations for a minimum data set for a pooled medical examiner registry.	DOH (OIP)	Injury prevention epidemiologist	FMEC	Development of recommendations	May require additional funding
6A7: Assess the implementation status of an electronic death certificate in Florida and its potential to facilitate the development of medical examiner surveillance.	DOH (OIP)	Injury prevention epidemiologist	FMEC, DOH Office of Planning, Analysis and Evaluation	Completion of assessment	Contingent upon additional funding
6A8: Format injury fatality data acquired annually from vital statistics as recommended by the Centers for Disease Control and Prevention (CDC) and disseminate to county health departments and local programs upon request.	DOH (OIP)	Injury prevention epidemiologist	N/A	Completion of data acquisition, formatting and dissemination	May require additional funding
6A9: Publish a statewide and county-level profile of injury fatality trends based on vital statistics death data for the time period 1999-2002 (ICD10).	DOH (OIP)	Injury prevention epidemiologist	N/A	Publication of profile	Contingent upon additional funding

**Implementation of strategy 6B will begin in 2005.**

## Strategy 6C: Partner to improve the quality of external cause of injury coding (E-coding) identified from hospital discharge data.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
6C1: Send a letter to Agency for Health Care Administration (AHCA) recommending/requesting the provision of dedicated fields for E-codes that are separate from fields for diagnosis codes.	DOH (OIP)	Injury prevention epidemiologist	N/A	Sending of letter	May be accomplished with current funding
6C2: Follow up with AHCA on the effectiveness of its existing E-code edit designed to flag records not E-coded and resubmit them to the hospital for recoding.	DOH (OIP)	Injury prevention epidemiologist	N/A	Determination of effectiveness of E-code edit	May require additional funding
6C3: Research incentives for hospitals to send their coders to standardized training to improve the quality of E-coding.	DOH (OIP)	Injury prevention epidemiologist	Florida Hospital Association (FHA)	Completion of research on incentives	Contingent upon additional funding
6C4: Determine the feasibility of conducting regional coding workshops to reeducate coders on E-coding principles.	DOH (OIP)	Injury prevention epidemiologist	FHA, medical records coders	Completion of feasibility determination	Contingent upon additional funding
6C5: Format hospital injury data acquired annually from AHCA as recommended by the CDC and disseminate to county health departments and local programs upon request.	DOH (OIP)	Injury prevention epidemiologist	N/A	Completion of data acquisition, formatting and dissemination	May require additional funding
6C6: Evaluate the completeness and sensitivity of the DOH Trauma Registry for reporting population-based data on serious hospitalized injury.	DOH (OIP)	Injury prevention epidemiologist	DOH Trauma Registry	Completion of evaluation	May require additional funding

Implementation of strategy 6D will begin in 2005.

## Strategy 6E: Advocate for the enhancement of additional injury-related questions on statewide behavioral surveillance surveys.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
6E1: Research the existing process with the DOH Bureau of Epidemiology for including more injury-related questions on Florida's Behavioral Risk Factor Surveillance System (BRFSS).	DOH (OIP)	Injury prevention epidemiologist	N/A	Addition of an injury module to the next administration of the BRFSS in Florida	Contingent upon additional funding
6E2: Identify a partner at the Department of Education (DOE) to evaluate the current content and quality of injury-related questions on the Youth Risk Behavior Surveillance System (YRBSS).	DOH (OIP)	Injury prevention epidemiologist	DOE	Completion of evaluation	Contingent upon additional funding

**Implementation of strategy 6F will begin in 2005.**

## Strategy 6G: Identify methods to determine the impact of injuries on high-risk groups and communities (e.g., injury outcomes, years of life lost, costs of health care and rehabilitation, burden of injury) with existing data sources.

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
6G1: Design a population-based surveillance system that is stratified by severity level and includes key circumstantial evidence.	DOH, AHCA, vital statistics Florida Department of Law Enforcement (FDLE), DOE	Injury prevention epidemiologist	Florida colleges and universities and injury prevention stakeholders	Completion of system design	Contingent upon additional funding

**GOAL 7: Build capacity and resources statewide for evaluation of injury prevention initiatives and interventions.**

**Implementation of all related strategies will begin between 2005 and 2006.**

**GOAL 8: Strengthen advocacy and public policy to reduce and prevent injuries.**

**Strategy 8A: Seek enabling legislation to establish a permanent injury prevention advisory council within DOH.**

ACTIVITY	LEAD ORGANIZATION	CONTACT PERSON	PARTNERS	MEASURE(S) OF SUCCESS	FUNDING IMPLICATIONS
8A1: Identify legislative analysts to review current rule authority and draft language.	DOH (OIP)	Legislative analyst(s)	Injury prevention stakeholders to assist in identifying potential bill sponsors	Drafting of the bill to establish the advisory council	May require additional funding

**Implementation of strategies 8B through 8E will begin in 2005.**