

International Safe Community (ISC) Annual Report (1 January – 31 December) 2009

Demographics

Name of your ISC: Dallas County, Texas

Country: USA

Submission date of this annual report: 20 January 2010

Name, position and email contact details of person completing this annual report:

Shelli Stephens Stidham, Director

Injury Prevention Center of Greater Dallas

slstid@parknet.pmh.org

Criteria 1 – Partnerships

1: Over the past 12 months have there been any significant changes to your ISC community coalition/network/group?

Yes No X

If yes, please provide details of any key partnerships or stakeholders that have left and new ones that have come on board.

2: Please provide details of your current coalition membership list. Include name, email address and position/organisation for each coalition member.

Steering Committee

Ron Anderson, M.D. Parkland Health & Hospital System

A. Compton Broders, M.D. Emergency Medicine Consultants

Raul Catetano, M.D. University of Texas School of Public Health,

Jennifer Coleman Baylor Health Care System

Dot Howard Methodist Dallas Medical Center

Jorie Klein, R.N. Parkland Health & Hospital System

Joseph Minei, M.D. Parkland Health & Hospital System

Paul Pepe, M.D. University of Texas Southwestern Medical Center

Claudia Romo Children's Medical Center of Dallas

Karen Cavazos Children's Medical Center of Dallas

David Tessmer Texas Health Resources

Task Forces/Coalitions/Work Groups

Dallas Area Pedestrian Safety Coalition (existing)

Family Violence Prevention Council (existing)

Child Abuse Prevention Coalition (existing)

Domestic Violence Awareness Coalition (existing)

Citizens for Traffic Safety of Greater Dallas (existing)

Dallas Area Senior Falls Prevention Coalition (new)

Child Passenger Safety Work Group (new)

3a: How often has your community coalition met during the past 12 months? Attach any relevant meeting agenda, minutes, annual report and any other relevant documents that demonstrate the operation of your intersectoral leadership group over the past year.

See attached documents.

3b: Over the past 12 months have there been any changes to the way your ISC is funded?

Yes No X

If yes, please provide details:

Criteria 2 – Sustainable programs

4: Over the past 12 months have there been any changes to your working groups/priority areas?

Yes No X

If yes, please provide details (e.g. high profile incident, policy, political, personnel or funding changes and did this change result in improvements in reach, collaboration, sustainability, outcomes, etc):

5: Please list at least three success stories from your program over the past 12 months? Provide details (e.g. what was the nature of the success, did it advance partnerships/relationships, ability to attract funds and what outcomes were achieved):

Operation Installation began in 1999 as a collaborative effort between the IPC, American Red Cross Chapter of Dallas, and Dallas Fire-Rescue Department to reduce deaths and injuries from house fires. The program uses injury data to identify high-risk areas for house fire injuries. Each month, fire fighters and volunteers install smoke detectors and/or batteries in these high-risk neighborhoods in Dallas. In 2009, *Operation Installation* installed 5,194 smoke alarms. Since 1999, the project has installed more than 16,600 smoke alarms and protected over 32,000 people in the highest risk neighborhoods. There has been a 60% decrease in house fire injuries and deaths in these neighborhoods since Operation Installation was implemented, and a 40% decrease in the average number of house fire deaths for all of the city of Dallas.

The IPC continued to conduct weekly child passenger safety fitting stations in high-risk areas of Dallas. In 2009, the IPC checked 781 car seats (91% were installed incorrectly), and provided 699 car seats for families in need. Additionally, the IPC conducted the national standardized child passenger safety technician certification course in July to train technicians. During the 81st Legislative Session, Texas legislators passed SB 61, which amended the existing statute regarding child passenger safety seats. The bill requires that any child younger than 8 years of age be restrained in an approved child passenger safety seat unless the child is at least 4 feet, 9 inches in height. The booster seat law is one of the strongest in the country. In 2009, child restraint use among children 0 through 4 years of age in Dallas jumped from 75% in 2008 to 92% in 2009.

In 2009, the IPC celebrated its 15th anniversary with an event held on September 15, 2009 to honor the hundreds of partner hospitals, agencies, organizations and individuals whose contributions have assisted the IPC in making Dallas a safer community. Pictured from left to right: Isabel Colunga, Ron J. Anderson (President and CEO of PHHS), Shelli Stephens Stidham (IPC Director), Latisha Walker, Allen Bolton (IPC Director 1995-1999), Marissa Rodriguez, Greg Istre, Jessica Trudeau, Martha Stowe (IPC Director 1999-2007), Mary McCoy, Carrie Nie, Amy Bailey, Kris Herwig.

Criteria 3 – High risk groups & environments

6: Over the past 12 months, please specify what high risk groups/environments has your ISC focused on and details of outcomes achieved?

Occupant Safety for children 8-12 years of age in West Dallas

With continued funding from the Texas Department of Transportation, the Tween Occupant Safety Project sustained activities to increase properly restrained youth ages 8 to 12 in West Dallas through a culturally-competent, community-integrated program. Focus groups of parents, youth, primary care providers and community stakeholders were utilized to identify: opinions on tween occupant safety, recommended intervention components, and an awareness campaign to encourage community stakeholders to discuss tween occupant safety. Based on the focus group results, a training curriculum, awareness materials and fact sheets were developed. In 2009:

The number of participating community stakeholders in West Dallas invested in Tween occupant safety tripled in 2009.

Community stakeholders recommended developing an awareness campaign with posters that depicted children riding correctly in the back seat. The IPC worked with Parkland's Corporate Communications Department to develop a series of posters that received the Gold Quill award from the International Association of Business Communicators.

The Lake West YMCA hosted a Tween buckle up event. Over 100 children participated and received

new school back packs and school supplies.

Sydney Lanier Elementary School developed a safety committee to address tween occupant safety with their students

Santa Clara Academy School developed a Tween occupant and booster safety week to implement with their students in January 2010.

Child Passenger Safety for high-risk populations

In order to promote the use of age-appropriate, correctly installed child safety seats, the IPC continued to conduct weekly child passenger safety fitting stations in high-risk areas of Dallas. At fitting stations, parents/guardians are able to obtain information and hands-on training on installing child passenger safety seats correctly. If a child safety seat has been recalled or is no longer appropriate for the child's age and weight, then a child safety seat is provided and installed by the IPC. See question 5 above for information about results.

Tailored Injury Prevention Program for children 0-4 years of age in West Dallas

With funding from the Texas Department of State Health Services, implemented a pediatric unintentional injury prevention anticipatory guidance project in collaboration with deharo-Saldivar Community Oriented Primary Care Clinic in West Dallas. The project entails the use of Safe n' Sound, a computer based assessment in English and Spanish that identifies the top two, age-specific unintentional injury risks to children under age 5. During the child's well-child visit, the healthcare provider provides anticipatory guidance counseling to encourage adoption of behaviors to reduce the risk of unintentional injury. IPC staff conduct post-intervention phone surveys three weeks following the intervention and send risk-specific materials two months following the office visit. Results in 2009:

312 – enrolled participants

210 – follow up phone surveys completed

45% of participants reported making at least one behavior change

34% of participants reported making only behavior change

11% of participants reported making two behavior changes

Burn Injury Prevention for high –risk populations

The IPC continued its partnership with the Grand Prairie Texas Home Instruction for Parents of Preschool Youngsters (HIPPPY) to implement a residential fire and scald burn prevention project. In 2009:

11 HIPPPY educators received training on residential fires, scald burns, smoke alarm placement and testing, and decreasing hot water temperature for the household.

156 families were visited by HIPPPY educators.

84 (54%) of families had no smoke alarm.

Of these, 19 (23%) later installed a working smoke alarm at the post visit.

43 families had excessively high hot water temperatures (>120).

17 (39%) of these families had safe hot water temperatures after the post visit.

For information about additional residential fire injury prevention efforts, see the information about Operation Installation in question 5 above.

Criteria 4– Injury data

7: Over the past 12 months, have you analyzed any injury/crime data?

Yes X No

If yes, where was this data sourced from and outline how this has changed your ISC priorities:

Dallas County Child Death Review Team

During 2008, the CDRT noticed a pattern of child deaths related to bed sharing. Bed sharing in conjunction with infants sleeping on their stomachs or sleeping outside of a crib has been shown to have an association with unexplained infant deaths. Previous child sleep surveys have found varying levels of bed sharing. In an attempt to quantify the prevalence of bed sharing among infants less than one year of age in Dallas County and factors associated with infant bed sharing, the IPC began a population-based,

self administered survey of parents regarding their infant's sleep pattern. Parents completed a self administered survey regarding their infant's (< 1 year) sleep pattern. Surveys were conducted in waiting rooms at a sample of public and private pediatric practices. Surveys asked for demographics, hours of bed sharing in the previous 24-hours, and prevalence of other sleep practices. Over half (56.6%) of infants were Hispanic. Mean age: Infant= 4.1 months; Mother= 28 years. Bed sharing occurred among 44% of infants, for an average of 4.5 hours. The majority of bed sharing was with a parent. Other findings: prone placement (4.7%), pacifier use (33%), crib in home (81.2%) and fan presence (60%). Bed sharing was more common among breast fed infants (OR =2.4; 95% CL 1.3, 4.4) and premature infants (OR= 2.38; 95% CL 1.2, 4.8). Families without a crib were more likely to bed share (OR= 2.5; 95% CL 1.2, 5.2) and bed share for more hours (6.6 hours vs. 3.8 hours). Infant bed sharing is common in Dallas. Families without a crib had a higher prevalence of bed sharing. Local data offers the potential to quantify bed sharing risk and measure efficacy of community interventions.

Criteria 5– Evaluation

8: Please list up to three examples of evaluations of local community safety programs that have been undertaken. Provide a brief summary of the outcomes and how evaluation findings have been incorporated into your ongoing ISC planning. Include copies of any relevant reports. Please indicate if no evaluations have been undertaken during the past 12 months.

See information above.

Criteria 6– Networks

9: Over the past 12 months, have members of your ISC participated in:

- a) International Network meetings Yes No
- b) National Network meetings Yes No
- c) Local Network meetings Yes No

If yes, please provide a brief outline of what networks your ISC have participated in. Remember to list any contributions your ISC has made to the promotion of safe communities beyond your local community.

During 2008-2009, IPC Director Shelli Stephens Stidham served as President of the State and Territorial Injury Prevention Directors Association (STIPDA) [USA]. During that time, she facilitated the 2008 and 2009 Joint Annual Meetings of STIPDA and the CDC Core State Injury Grantees. She also participated in numerous meetings with the Centers for Disease Control and Prevention, as well as with the Affiliate Safe Community Support Center at the University of North Carolina Injury Prevention Research Center.

Additionally, she participated on WHO Safe Community site review visits to Madison/Dane County, Wisconsin, USA, and Shawnee, Oklahoma, USA.

Below are publications and national, state and local presentations made by IPC staff during 2009.

Publications

Songer T, **Stephens Stidham S**, Peek-Asa C, Bou-Sada I, Hunter W, Lindermer K, Runyan CW. Core Competencies for Injury and Violence Prevention. *American Journal of Public Health*, April 2009; 99 (4);

600-606.

Runyan CW, **Stephens-Stidham S**, Core Competencies for Injury and Violence Prevention. *Injury Prevention*, 2009; 15:141.

Scientific Presentations

Bailey A, Nie C, Istre GR. "Population-based Survey of Infant Bed Sharing." 2009 Joint Annual Meeting of State and Territorial Injury Prevention Directors Association and the CDC Core State Injury Grantees, National Harbor, Maryland, February 2009 (poster).

Nie C, Bailey A, Istre GR. "Population-based Survey of Infant Bed Sharing." 2009 National Injury and Violence Prevention Research Conference, Atlanta, Georgia, March 2009 (poster).

Other Oral Presentations

"Research and Practice Collaboration" presented by Shelli Stephens Stidham (IPC), Carol Runyan (University of North Carolina), John Lundell (University of Iowa), and Susan Hardman (New York

Department of Health) for the 2009 National Injury & Violence Research Conference From Discovery to Practice: Innovative Translational Approaches to Injury Prevention and Care. Atlanta, Georgia, March 5-6, 2009.

"Educating Parents on Tween Occupant Safety" presented by Marissa Rodriguez and Jessica Trudeau for West Dallas Community Organizations, 2009.

"Child Passenger Safety and other Child Safety Issues" Presented by Amy Bailey, Kris Herwig, and Marissa Rodriguez at Pinkston LG High School, April 2009.

"Senior Pedestrian Injury Prevention" Presented by Marissa Rodriguez at the Senior Source Senior Companion Program Meeting, April 2009.

"Injury Prevention for Seniors: a Residential Fire Prevention Program" presented by Marissa Rodriguez and Jessica Trudeau at the Senior Source Senior Companion Program Meeting, August 2009.

"Dallas County Child Death Review Bedsharing Presentation" Presented by Carrie Nie and Amy Bailey at Child Fatality Review Regional Workshop in Fort Worth, August 2009.

"Safety of Our Children as Passengers: Protecting Our Children's Future" Presented by Kris Herwig and Marissa Rodriguez at Mi Escuelita school, October 2009.

"Using the Safe Communities Approach to Prevent Injuries and Deaths" presented by Shelli Stephens Stidham for the American Medical Writers Association Conference. Dallas, Texas, October 23, 2009.

"Dallas County Child Death Review Bedsharing Presentation" Presented by Amy Bailey at Texas Department of Family and Protective Services Meeting, October 2009.

Final comments:

10: Over the past 12 months, what have been some of the biggest challenges to your ISC and what steps have you taken to address these?

The economic problems in the USA have continued to provide challenges to the IPC. In 2009, two state grants that provided operational funds for the IPC expired. As a result, Parkland Health & Hospital System (the lead funding source for the IPC) agreed to increase funds for the IPC, so that activities could be sustained until additional funding can be obtained. The IPC is also developing a business case plan in 2010, which will be used to identify and secure additional funding.

11: Over the past 12 months, what have been some of the biggest opportunities for your ISC and what steps have you taken to sustain them?

Through continued involvement with Dallas area coalitions and task forces, the IPC learned about potential collaborative opportunities, such as the partnership with the Grand Prairie Texas Home Instruction for Parents of Preschool Youngsters (HIPPO) to implement a residential fire and scald burn prevention project. Additionally, the IPC received funding from State Farm Insurance to expand and enhance the Tween Occupant Safety Project in 2010.

12: Finally, are there any other comments you would like to make about either your ISC or the wider ISC network (e.g. Include any comments about how you see the ISC Network better serving the members of the network).

*Thank you for your time and effort to improve community safety. Email in word format by **1 February** to the*

Certifying Centre who assessed your ISC application/reapplication:

Don't forget to attach any relevant supporting documents.

Agenda

Injury Prevention Center of Greater Dallas Steering Committee Meeting

April 22, 2009

I. Welcome and Introductions Dr. Ron Anderson

II. Review of Injury Prevention Center Shelli Stephens

Stidham

a. Current activities

b. Current funding

III. Future Plans Shelli Stephens

Stidham/IPC Staff

a. Safe Communities Re-certification in 2012

b. Establishment of Advisory Board

c. Data Needs

d. Program Priorities

IV. Discussion Steering Committee

V. Adjourn

MINUTES

Members Present:

Dr. Ron J. Anderson, *Parkland Health & Hospital System*

Angela L. Biddle, RN, BSN, *Baylor Health Care System*

Dr. A. Compton Broders, *Texas Health Resources*

Dot Howard, *Methodist Dallas Medical Center*

Jorie Klein, *Parkland Health & Hospital System*

David Krause, *Parkland Foundation*

Claudia Romo, *Children's Medical Center*

Jody Springer, *Parkland Health & Hospital System*

Amy Hampton for David Tesmer, *Texas Health Resources*

IPC Staff: Shelli Stephens Stidham, Director; Carrie Nie, Associate Director; Greg Istre, M.D., Research Director; Mary McCoy, Data Analyst; Jessica Trudeau, Senior Community Development Specialist; Isabel Colunga, Community Development Assistant; Kris Herwig, Health Educator; Marissa Rodriguez, Health Educator; Amy McSpadden Bailey, Child Death Review Coordinator; David Beveridge, Administrative Assistant.

Guests: Janet Harrison, *Parkland Foundation*; Tameka Cass, *Parkland Foundation*

Welcome and Introductions

Dr. Ron Anderson welcomed those in attendance and asked those present to introduce themselves and their affiliation.

Review of Injury Prevention Center

Shelli Stephens Stidham provided an overview of the Injury Prevention Center, including current activities and how the current activities relate to the World Health Organization's (WHO) Safe Communities criteria (see attached handout). Additionally, the overview included information about the IPC's current funding status. Dr. Compton Broders suggested that the IPC use data to show the number of people who didn't die as a result of the prevention activities. He also recommended that the IPC pursue trying to obtain an endowment for specific IPC projects or programs. Dr. Anderson and David Krause said that they had discussed trying to get an endowment for IPC in the past. Ms. Stephens Stidham said that the IPC is currently preparing materials for the Parkland Foundation to assist in fundraising efforts. Dr. Broders said that he would like for the IPC funding chart to show an increase in donations by 2010.

Future Plans

Ms. Stephens Stidham said that during the next two years, the IPC will be preparing for WHO Safe Communities re-certification, which will be due in 2012. In preparation for re-certification,

she said that the IPC will be looking to enhance data collection because the first step in understanding any health problem is to investigate it. She said injury prevention programs need accurate, consistent data to track both old and new health problems. She said the IPC will be looking closely at data indicating an increase in poisoning deaths among adults and bed-sharing deaths among infants. She reported that the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention (CDC) has prioritized senior falls prevention, childhood injury prevention, and child maltreatment prevention, which may have implications for future federal funding.

Additionally, the IPC recommends that the Steering Committee be kept intact to oversee the IPC, and that a broader-based Safe Communities Advisory Committee is established to advise on collaborative Safe Communities activities.

Discussion

The Steering Committee discussed potential injury and violence prevention projects the IPC could implement and evaluate during the next two years, as well as possible additions to the expanded Safe Communities Advisory Committee.

Additionally, Dr. Anderson said he would like to see increased collaboration with school-based clinics and community-oriented primary care clinics in implementing injury prevention strategies. Jorie Klein said that Parkland Trauma Services receives numerous requests regarding bullying prevention programs. She suggested that IPC explore potential collaborative projects with schools on bullying prevention.

Adjourn

The meeting adjourned at 1:30 p.m.