OPPORTUNITIES FOR PARTNERSHIPS BETWEEN OSHS AND CVIPPP PROGRAMS
Core VIPP Program Elements

- Priority Focus Areas
  - Falls among older adults
  - Child maltreatment
  - Prescription drug overdoses
  - Sports concussions
  - Motor vehicle injuries
  - Traumatic brain injuries

- Injury Control Planning Group
Data Analysis
- Injury indicator report
  - ED data
  - Inpatient hospitalization data
  - Mortality data

Informing Policies and Interventions
- SMART objectives- Specific, Measurable, Achievable, Realistic, Timely
Enhancing CVIPP infrastructure
- Building local capacity for injury prevention
- Media and communication strategies to disseminate VIPP information

State VIPP plan

Evaluation
- Collect and analyze data to evaluate effectiveness of intervention programs and policy strategies
Partnership Opportunities

- **Priority focus areas**
  - Falls among older working adults
  - Prescription drug overdoses at work
  - Professional athlete concussions
  - Occupational motor vehicle collisions
  - Work-related TBI

- **ICPG**
  - Occupational injury prevention workgroup
Data Analysis
- Ready to use data sets
- Research collaborations

Enhancing CVIPP infrastructure
- Safe Communities
  - NSC partnership - businesses
  - Community Injury Profiles
    - Community Occupational Injury Profiles
- Share media and communication strategies
  - IBIS - mortality data
**Table of Contents**

- Executive Summary .......................................................... iv
- Data Sources and Methods .................................................. v

**Leading Causes of Injury by Age Group**

- Fatalities ................................................................................ 1
- Hospitalizations ..................................................................... 2
- Emergency Department Visits ................................................. 3

**Injury Indicators**

- All causes of injury ............................................................... 4
- Unintentional Falls ................................................................ 6
- Unintentional Fire-related Injuries ............................................ 8
- Firearm-Related Injuries ......................................................... 10
- Homicide and Assault ............................................................. 12
- Motor Vehicle Traffic Crashes ............................................... 14
- Poisoning ............................................................................... 16
- Suicide and Self-Injury ............................................................ 18
### Table 1: Work-related hospitalizations (expected payer source Workers' Compensation)
Kentucky residents treated in Kentucky acute care hospitals, 2009-2011

<table>
<thead>
<tr>
<th>County of residence</th>
<th>Number of hospitalizations, 2009-2011</th>
<th>Total charges billed to WC, 2009-2011</th>
<th>Average annual rate of work-related hospitalizations per 100,000 employed residents, 2009-2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adair</td>
<td>*</td>
<td>$638,145</td>
<td>*</td>
</tr>
<tr>
<td>Allen</td>
<td>20</td>
<td>$750,117</td>
<td>162</td>
</tr>
<tr>
<td>Anderson</td>
<td>*</td>
<td>$919,089</td>
<td>*</td>
</tr>
<tr>
<td>Ballard</td>
<td>23</td>
<td>$534,881</td>
<td>295</td>
</tr>
<tr>
<td>Barren</td>
<td>37</td>
<td>$1,198,381</td>
<td>77</td>
</tr>
<tr>
<td>Bath</td>
<td>*</td>
<td>$325,276</td>
<td>*</td>
</tr>
<tr>
<td>Bell</td>
<td>28</td>
<td>$879,125</td>
<td>103</td>
</tr>
<tr>
<td>Boone</td>
<td>69</td>
<td>$2,413,812</td>
<td>32</td>
</tr>
<tr>
<td>Bourbon</td>
<td>*</td>
<td>$645,219</td>
<td>*</td>
</tr>
<tr>
<td>Boyd</td>
<td>35</td>
<td>$1,011,506</td>
<td>43</td>
</tr>
<tr>
<td>Boyle</td>
<td>25</td>
<td>$759,623</td>
<td>60</td>
</tr>
<tr>
<td>Bracken</td>
<td>.</td>
<td>.</td>
<td>.</td>
</tr>
<tr>
<td>Breathitt</td>
<td>23</td>
<td>$622,220</td>
<td>241</td>
</tr>
<tr>
<td>Breckinridge</td>
<td>*</td>
<td>$697,889</td>
<td>*</td>
</tr>
<tr>
<td>Bullitt</td>
<td>70</td>
<td>$2,630,210</td>
<td>137</td>
</tr>
<tr>
<td>Butler</td>
<td>*</td>
<td>$488,101</td>
<td>*</td>
</tr>
<tr>
<td>Caldwell</td>
<td>*</td>
<td>$553,767</td>
<td>*</td>
</tr>
<tr>
<td>Calloway</td>
<td>*</td>
<td>$515,679</td>
<td>*</td>
</tr>
<tr>
<td>Campbell</td>
<td>51</td>
<td>$1,021,656</td>
<td>62</td>
</tr>
<tr>
<td>Caldwell</td>
<td>.</td>
<td>.</td>
<td>.</td>
</tr>
</tbody>
</table>
State VIPP plan
- Occupational injury prevention section
  SMART objectives

Evaluation
- Model for use in occupational injury prevention
- Include occupational injury prevention as an endpoint
Commonwealth of Kentucky

Violence and Injury Prevention Plan

2013

KIPRC
KENTUCKY INJURY PREVENTION AND RESEARCH CENTER

UK
Kentucky Public Health

KSPAN

Occupational Injuries

Background
In 2011, there were 105 occupational fatalities with an accompanying fatality rate of 5.6 fatalities per 100,000 workers, 37.5% above the US rate of 3.5/100,000, and 31% greater than the 2010 Kentucky rate of 3.9/100,000. Motor vehicle collisions were the leading cause of worker deaths.

Worker Deaths by Cause, Kentucky 2011.

The highest number of occupational fatalities occurred in the agriculture, transportation and administrative and waste industries.

Worker Deaths by Industry, Kentucky 2011.

Distal SMART Objective:
- Reduce the worker fatality rate by 37.5% from 5.6 in 2011 to 3.5/100,000 by the year 2016

Proximal Objectives:
- Increase the number of KIPRC injury prevention toolkits for the trucking industry from 0 in 2012 to 1 by 2013
- Increase the number of KIPRC roadside assistance toolkits from 0 in 2012 to 1 by 2013
- Increase the number of KIPRC construction-industry toolkits from 0 in 2012 to 1 by 2014
- Increase the number of new small trucking company safety and health training sessions provided by the Kentucky Motor Transport Association from 0 in 2012 to 50 by the year 2015
- Increase the number of Kentucky employers with certified drug-free workplace programs from 60 in 2012 to 66 by the year 2015

Strategies:
- Develop employer toolkits for the trucking, roadside assistance, and construction industries consisting of FACE digital stories, worker fatality reports, and hazard alerts
- Develop a social media presence for the KIPRC worker injury prevention programs
- Produce peer-reviewed articles pertaining to transportation and construction industry injury prevention
- Inform manufacturers of needed new and revised engineering designs
Questions?