

# Indiana Violent Death Reporting System (INVDRS) Advisory Board Meeting November 18, 2016

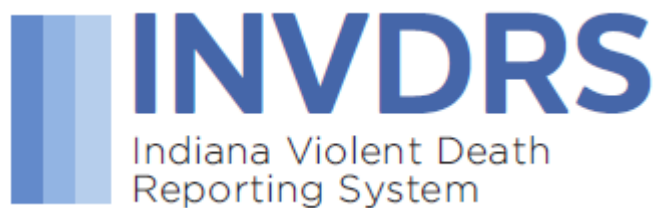
**Rachel Kenny, MPH, *INVDRS***  
*Epidemiologist*

Division of Trauma and Injury Prevention



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Department of Health

**INVDRS@isdh.in.gov**



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# Agenda

- Introductions
- INVDRS Needs Assessment Survey Results
- Prescription Drug Overdose Grant
- Data Collection Updates
- Data Presentation



# Introductions

# INVDRS Advisory Board Needs Assessment Survey

- 11 Questions in total
- Questions asked in two parts
  - Multiple choice responses (6)
  - Free response (5)



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# Survey Results Part I

- Meeting Attendance
- Remote Attendance
- Barriers to Meeting
- Future Meeting Preferences

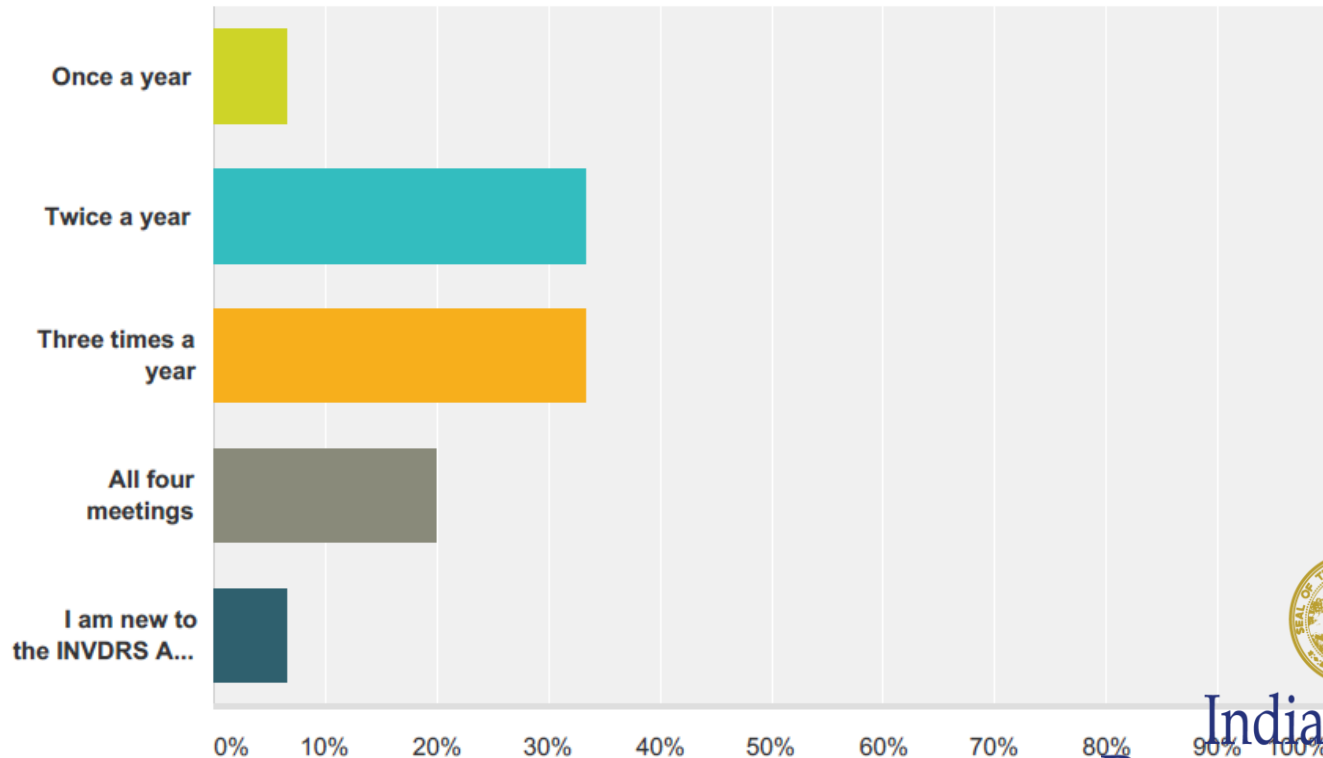


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# Meeting Attendance

Q1 How often do you attend INVDRS AB meetings

Answered: 15 Skipped: 0

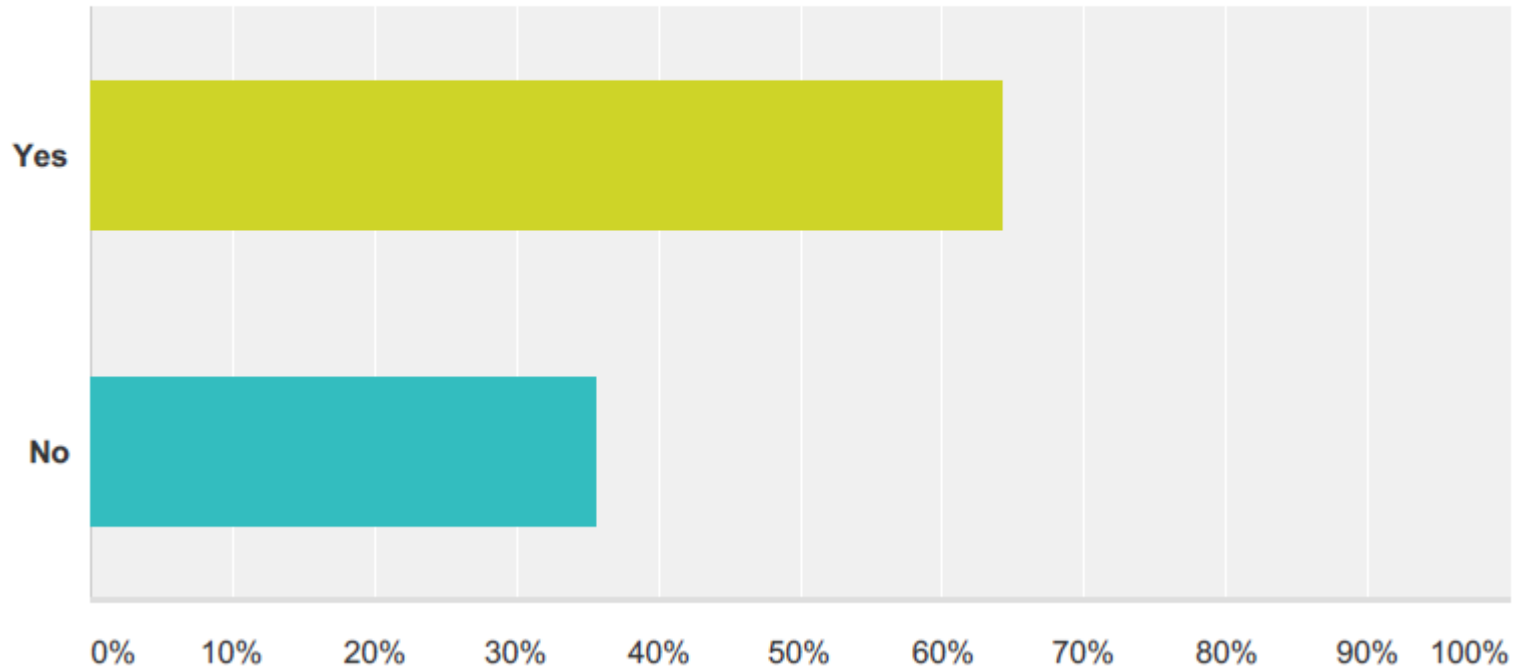


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# Remote Attendance

## Q2 Do you attend meetings in-person

Answered: 14 Skipped: 1



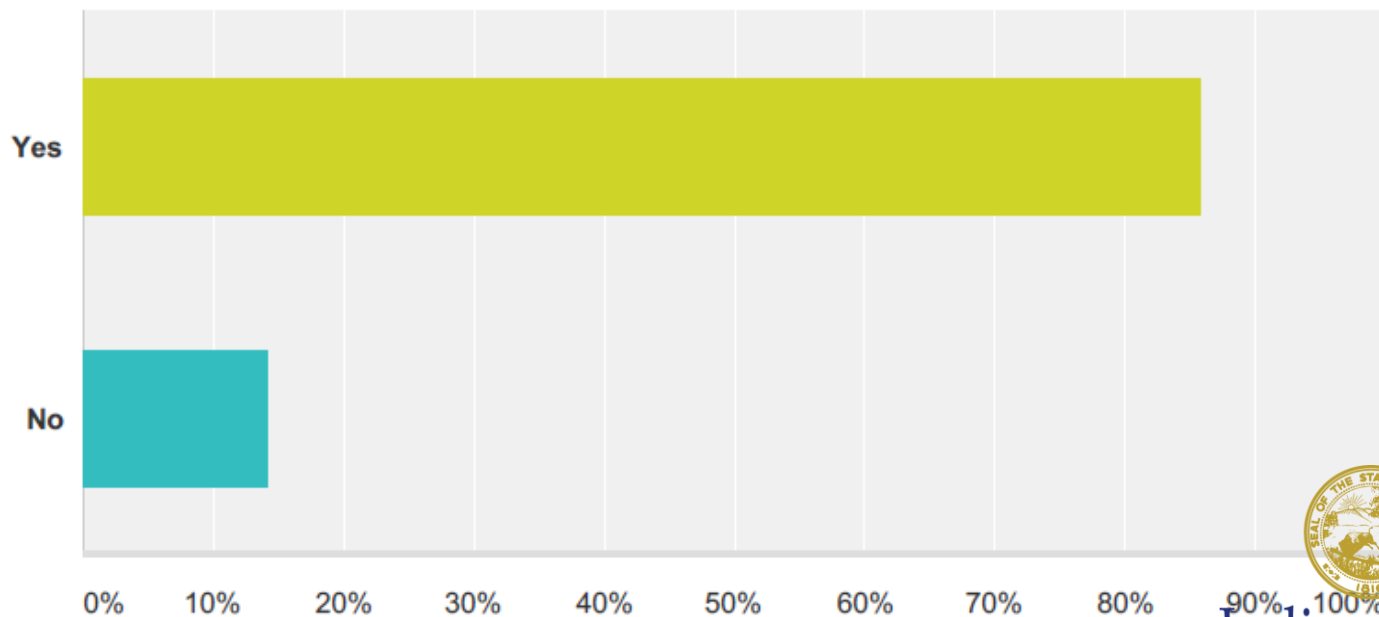
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# Remote Attendance

Q3 Have you utilized the call-in or webcast options for meetings?

Answered: 14 Skipped: 1

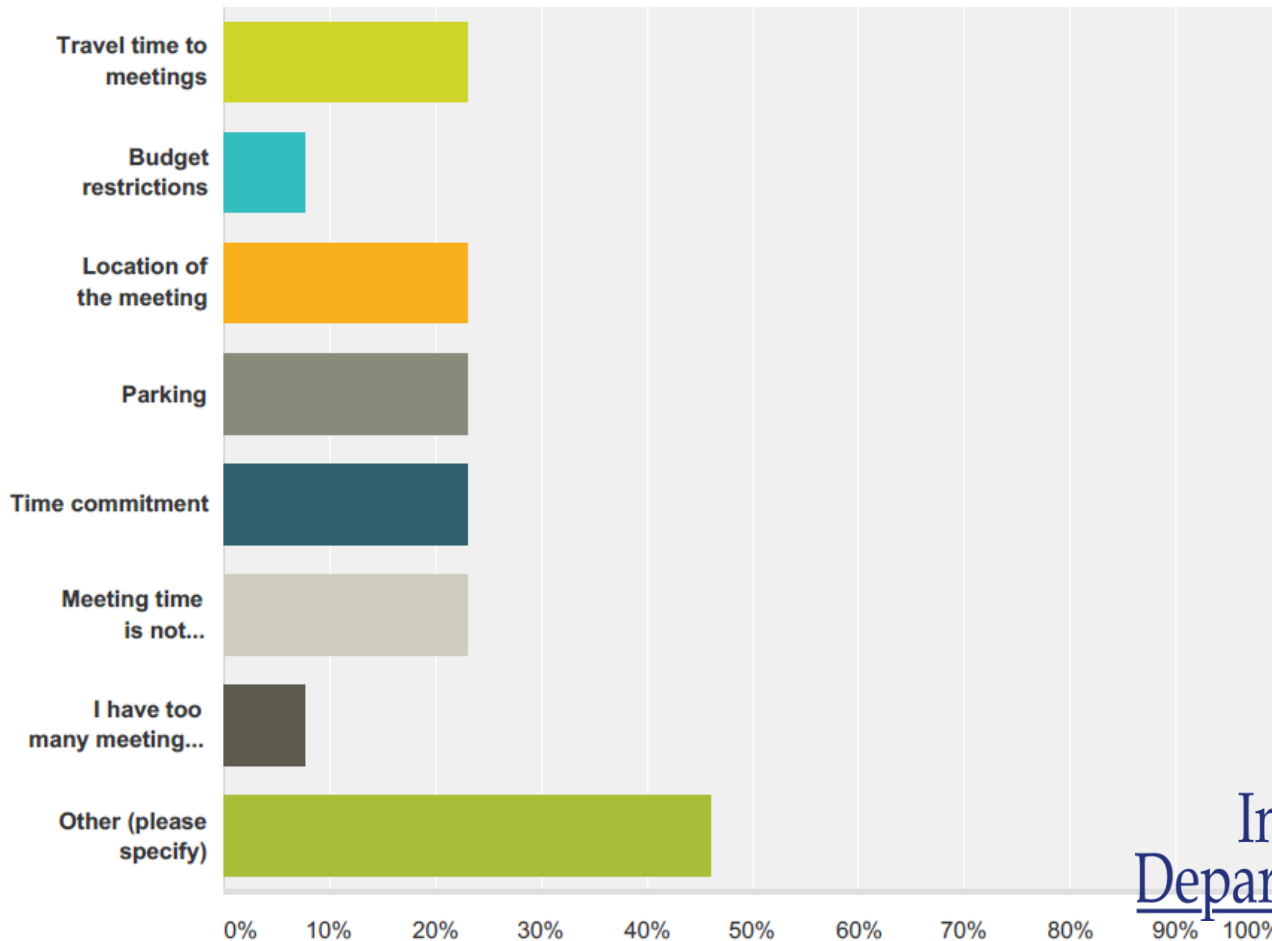


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# Barriers to Meeting

## Q4 What deters you from attending the INVDRS AB meetings?

Answered: 13 Skipped: 2

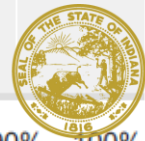
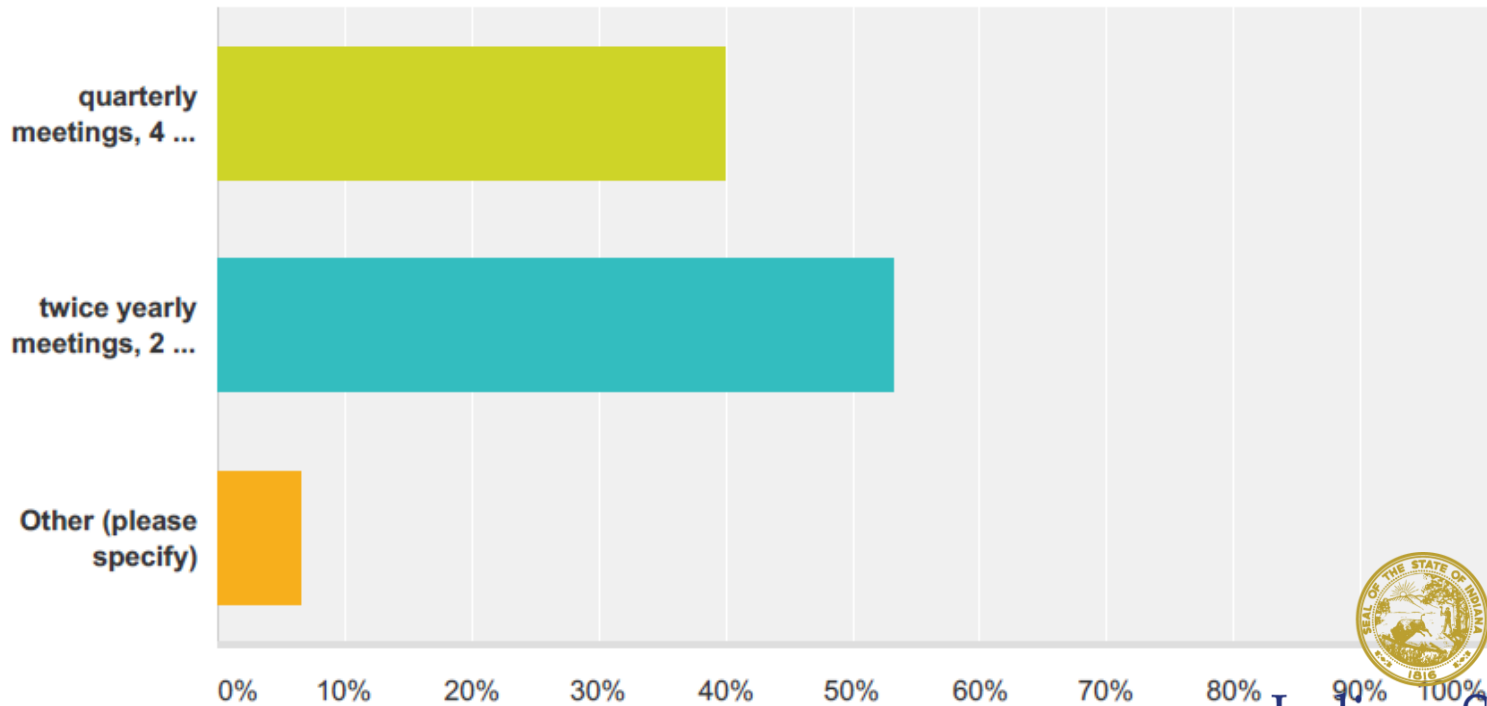


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# Future Meeting Preferences

Q5 For the 2017 INVDRS AB meetings, would you rather attend:

Answered: 15 Skipped: 0

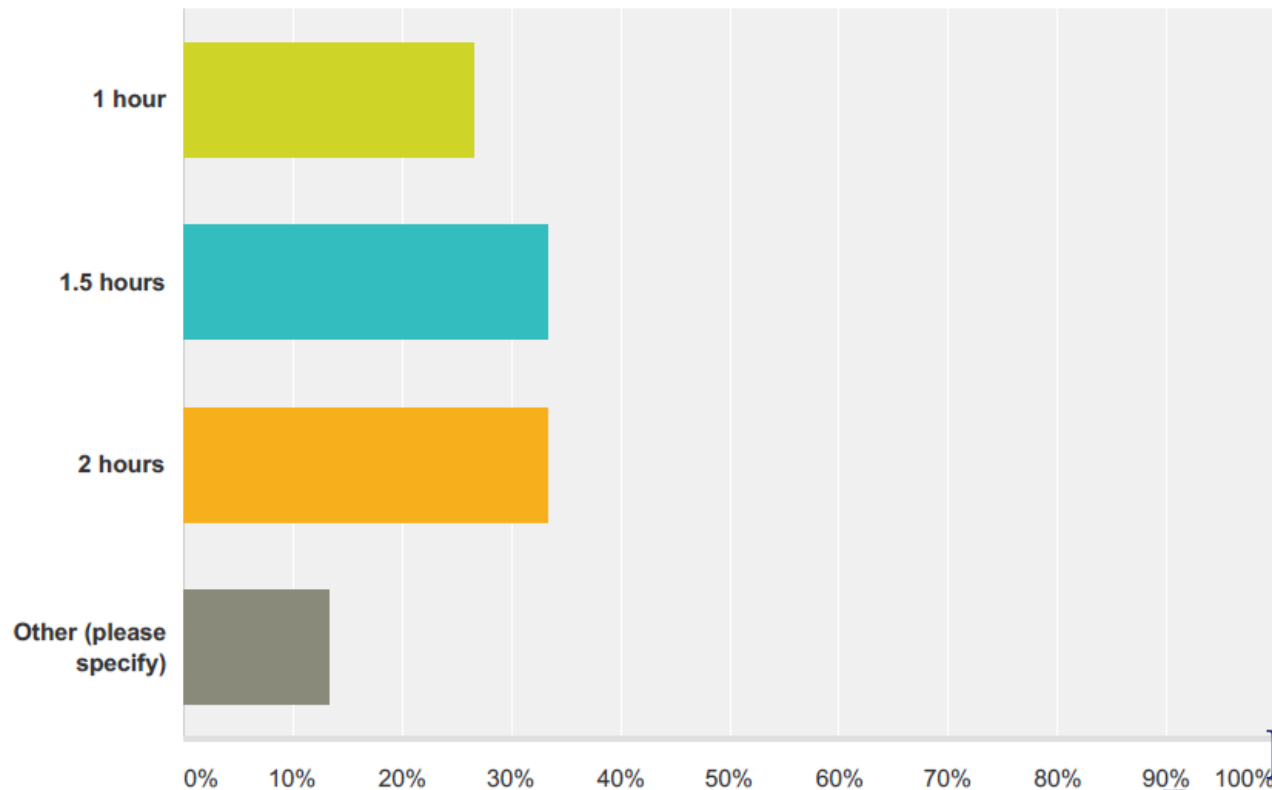


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# Future Meeting Preferences

Q6 How long should an INVDRS AB meeting last?

Answered: 15 Skipped: 0



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# 2017 meeting dates

- **1 p.m.-3 p.m. EST in Rice Auditorium**
  - March 17<sup>th</sup> (collaboration)
  - September 15<sup>th</sup> (data heavy)



# Survey Results Part II

- What do you hope to gain from INVDRS AB Meetings?
- What would you like to see at meetings?
- What would you like to learn from guest speakers?
- Who Would you Recommend Speak?
- What Would you change about the INVDRS AB Meetings?



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# What do you hope to gain from INVDRS AB meetings?

- Updates on progress (56 % of responses)
  - What colleagues are working on, DC data
- Data: access, analysis, and sharing (33% of responses)



# What do you hope to gain from INVDRS AB meetings?

- Specific project input
- Standard definitions
- Numerating types of interpersonal violence involved in fatalities
- Knowledge that impacts change
- Clarification of roles



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# What would you like to see at meetings?

- Statistics
- Data collected and analysis results
- Best use of compiled information
- Positive impact of data collection



# What would you like to see at meetings?

- Updates on project progress
- Specific input on project dynamics
- Information on collaboration between grants on similar risk factors that result in violent death



# What would you like to learn from guest speakers?

- The work they do
  - Relevance of information
  - What impact they identified
  - How information will improve patient outcomes
  - Sources of information and data



# What would you like to learn from guest speakers?

- Relevant new and helpful processes
  - Advanced applicable services
- How data can be applied
  - Usefulness of data for programmatic planning/assessment
- INVDRS use in real world application
  - Possible new partnerships with INVDRS



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# Who Would you Recommend Speak?

- Staff: Presenting statistics
- Point people: on effort of INVDRS statewide mandate
- INVDRS data users
- Representatives from other states



# What Would you change about the INVDRS AB Meetings?

- More collaboration and input
  - More time for discussion on activities performed by AB members and sharing of methods
- Time management
- Meeting location
- Less frequent meetings



# What Would you change about the INVDRS AB Meetings?

- Longer meeting time
- Combine with another meeting
- Unsure
- Nothing, the meetings are good the way they are



# Questions and Discussion

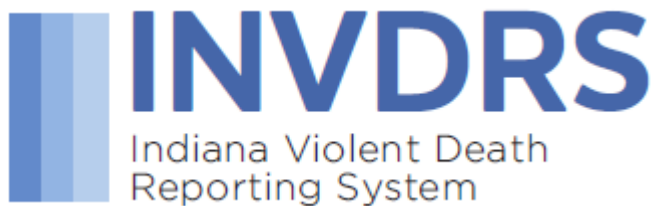
- Potential future topics?



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# CDC Updates

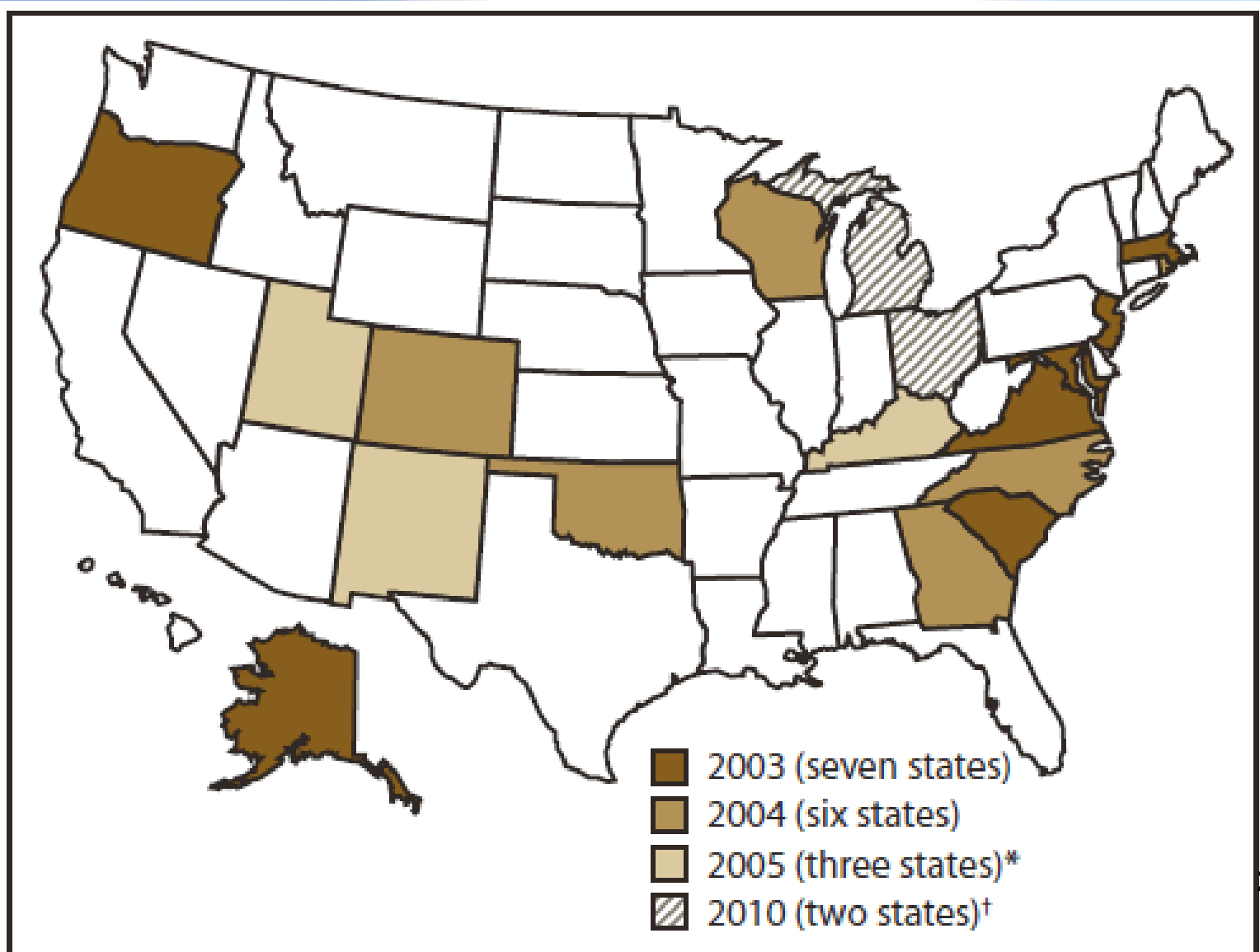


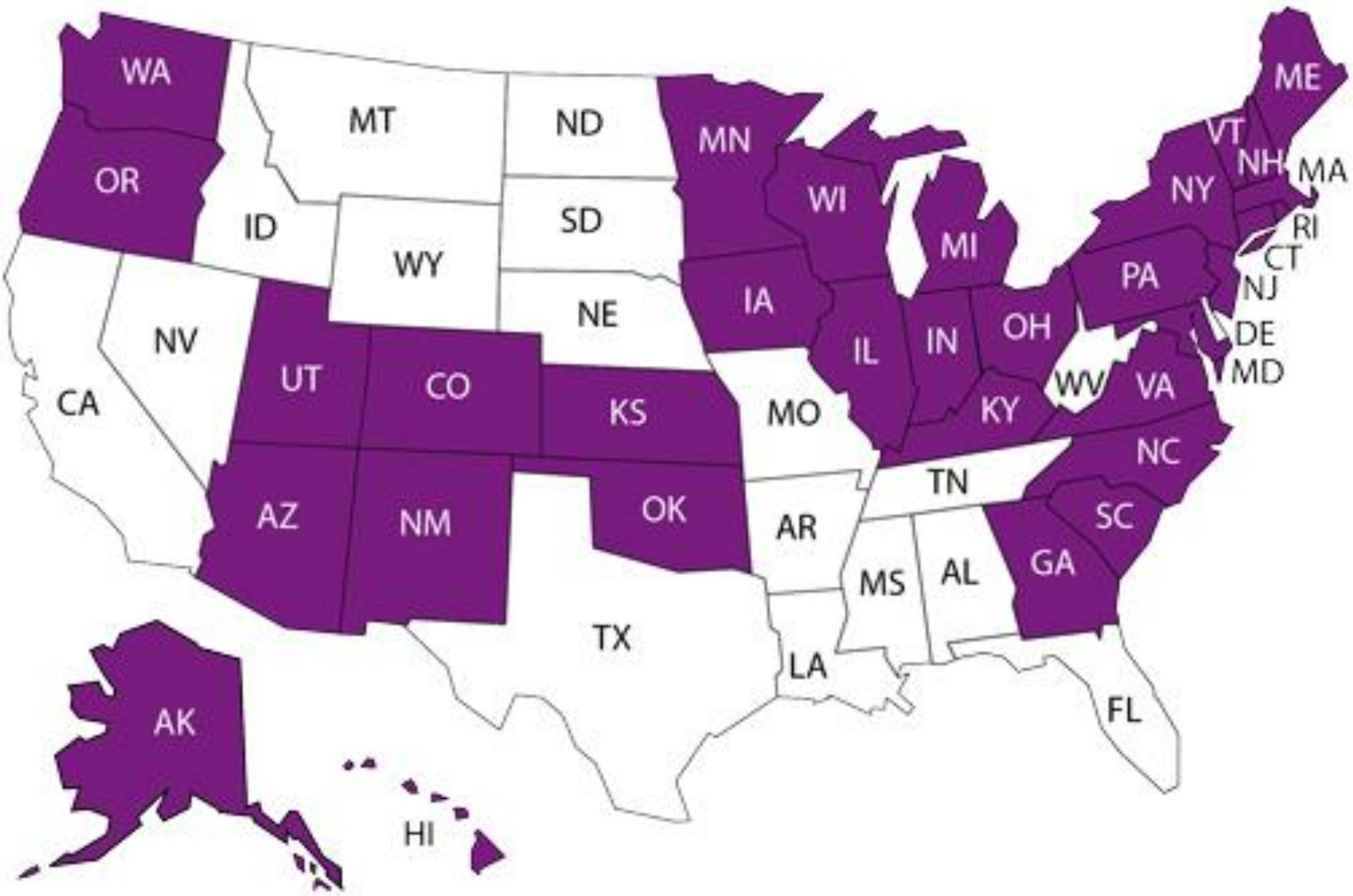
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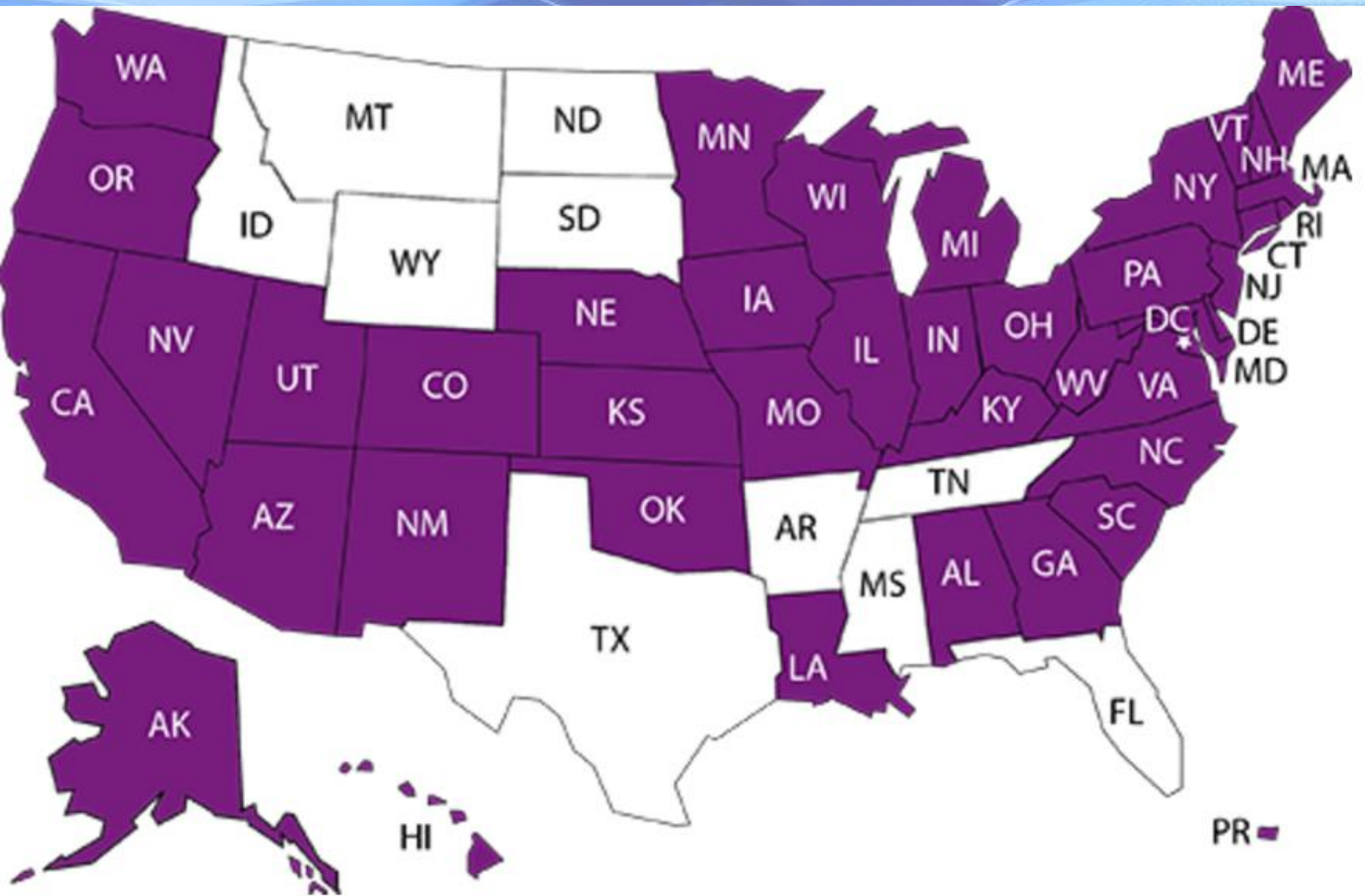
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Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# Previously Funded States










Midwest  
Injury  
Prevention  
Alliance

# 2016 Summit

- Health Equity & Injury Prevention: The Missing Thread
- Thursday, December 1 & Friday, December 2  
<https://mipa2016.eventbrite.com>
- Country Springs Hotel, Pewaukee, WI

 **INVDRS**  
Indiana Violent Death  
Reporting System



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Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)



Midwest  
Injury  
Prevention  
Alliance

# 2016 Summit

Day 1: Thursday, December 1, 2016	
1:00pm – 5:30pm	
12:00pm – 1:00pm	Registration and networking
1:00 pm - 1:15 pm	Welcome: Jennifer Martin
1:15 pm – 2:30 pm	Keynote: Jim Mercy
2:30 pm – 2:45 pm	Break
2:45 pm – 4:00 pm	<b>Breakout sessions (Block1)</b>
	Policy
	Prescription drug overdose and Narcan Interdisciplinary approach to crash prevention including engineering prospective
	Gun violence
4:00 pm – 4:15 pm	Break
4:15 pm – 5:30 pm	Keynote: Mighty Fine
5:30 pm – 7:00 pm	Reception and poster session



Midwest  
Injury  
Prevention  
Alliance

# 2016 Summit

Day 2: Friday, December 2, 2016	
7:30 am – 2:00 pm	
7:30 am - 8:30 am	Breakfast and committee meetings
	Committees: Child injury, communications, data, membership, older adult falls, policy, prescription drug overdose and VDRS
8:30 am - 8:45 am	Break
8:45 am - 10:15 am	<b>Breakout sessions (Block 2)</b>
	Social media/engaging partners
	Engaging and retaining programs
	Safe sleep
	Cure violence
10:15 am - 10:30 am	Break
10:30 am - 11:45 am	<b>Breakout sessions (Block 3)</b>
	Community engaged research
	Furniture tip-overs
	Data driven advocacy
	NVDRS
12:00 pm - 2:00 pm	Lunch and Keynote: Anita Mandley

Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# Prescription Drug Overdose: Prevention for States Grant

**Kayley Dotson, MPH, Prescription Drug Overdose Epidemiologist**

Division of Trauma and Injury Prevention

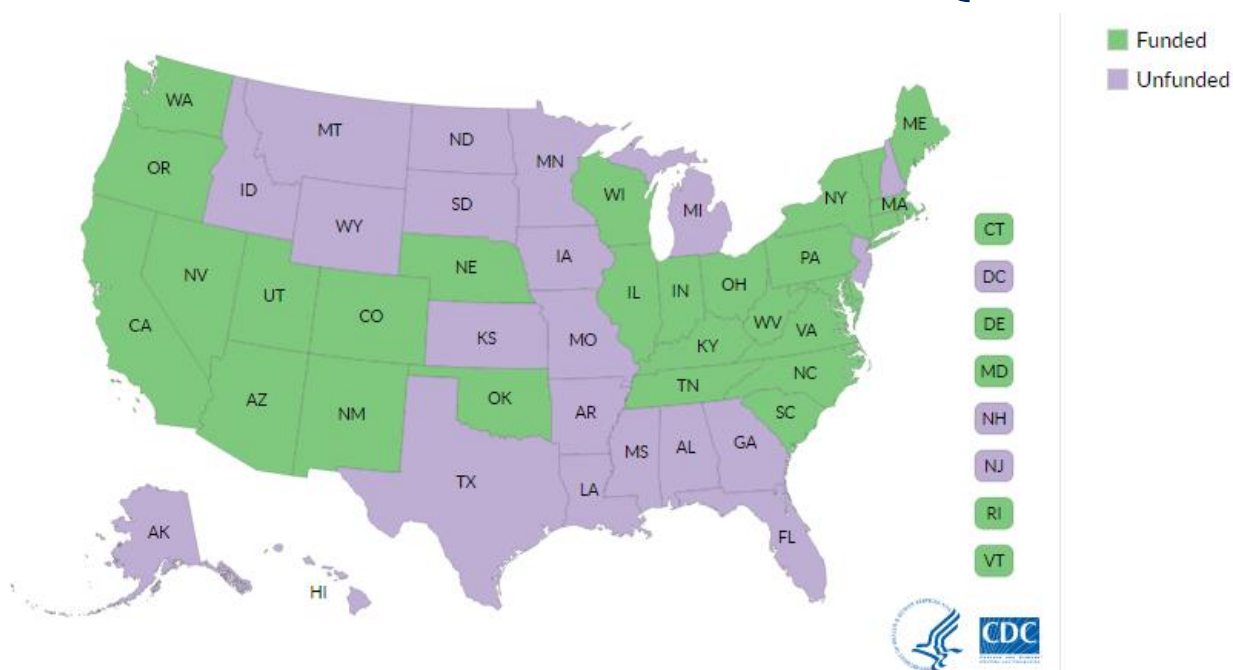


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# Overview

- Initial application: September 2015
  - Awarded but not funded (16 states funded)
- Awarded March 2016 (13 additional states)



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# Overview

- Total of 29 Prevention for States awardees
- Awards range between \$750,000 and \$1 million to advance prevention efforts
- Funded through 2019
- States were funded based upon high burden and readiness to act



# Overview

Since 1999, sales of prescription opioids in the U.S. have **quadrupled**.



# Overview

- 4 Key Strategies
  - Maximizing PDMPs
  - Community or Insurer/Health Systems Interventions
  - Policy Evaluations
  - Rapid Response Project



# Overview

- Impact

- “The Prevention for States program includes evaluation of awarded states’ program activities to monitor performance, demonstrate effectiveness, and capture success stories. Results and project successes will determine the impact of this program and inform future state and national efforts in preventing prescription drug overdoses”





**PRESCRIPTION DRUG OVERDOSE  
PREVENTION FOR STATES PROGRAM  
SUPPLEMENT APPLICATION**

# PFS Supplemental

- **FUNDED!**
- Duration: 3 years
- FOA Released 5/26/2016
- Application due 6/27/2016
- Received 9/1/2016





# **INDIANA STATE DEPARTMENT OF HEALTH GRANT SPECIFICS**



# Prescription Drug Overdose: Prevention for States

- Targeting main driver of epidemic - problematic prescribing
- Focus is on primary prevention
- To prevent prescription drug overuse, misuse, abuse, and overdose



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# Prescription Drug Overdose Prevention for States

ISDH Selected 3 of the 4 Strategies:

1. Enhance and maximize prescription drug monitoring program (INSPECT)
2. Implement community interventions in high-need areas
3. Evaluate impact of policy changes



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# 1. Enhance and Maximize PDMP

- Moving toward universal registration and use
- Make PDMP easier to use and access
- Expand and improve PDMP reporting
- Use PDMP data to better understand the nature of the prescription drug epidemic
- Make PDMP data more timely



## 2. Implement Community Interventions

- Indiana State Department of Health (ISDH)
- Providing technical assistance to high-burden communities
- Enhancing use of evidence-based opioid prescribing guidelines



# 3. Evaluate Impact of Policy Changes

- Partnered with IU Fairbanks School of Public Health
- Evaluating policy interventions to better understand what works to prevent prescription drug overdoses



# Strategy 2: Community Intervention

- 1) Resources to 18 priority counties to build regional PDO prevention infrastructure
- 2) Establish a train-the-trainer programs for naloxone & PDO prevention education
- 3) Resources to coroners to improve toxicology testing and reporting for improve surveillance

# 18 Priority Counties

- |              |                |                 |
|--------------|----------------|-----------------|
| 1) Blackford | 8) LaPorte     | 15) Sullivan    |
| 2) Clark     | 9) Lawrence    | 16) Tipton      |
| 3) Crawford  | 10) Marion     | 17) Vanderburgh |
| 4) Delaware  | 11) Montgomery | 18) Washington  |
| 5) Grant     | 12) Morgan     |                 |
| 6) Howard    | 13) Pulaski    |                 |
| 7) Jennings  | 14) Starke     |                 |



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# What Defines “Priority”?

- Created systematic point system to rank the following:
  - Rate of opioid deaths (2010-2014)
  - Rate of all drug poisoning deaths (2010-2014)
  - Rate of non-fatal opioid related emergency department visits (2009-2013)
  - Community Need



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# INVDRS and PfS

- PfS utilizing INVDRS
- Gain better understand drug overdoses
- Utilize coroner reports, law enforcement records, and death certificates when available



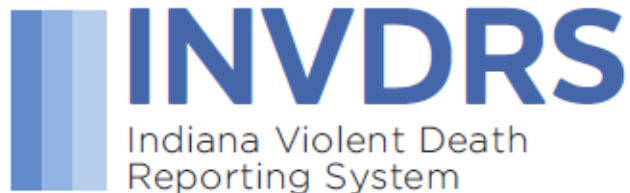
# INVDRS Poisoning Module

- Method of drug exposure and ingestion
- Prescription versus illicit drug use
- Presence of drug paraphernalia
- Current or past substance abuse treatment

# INVDRS Poisoning Module

- **Administration of Naloxone**
- **Presence of bystanders** at the time of the incident

The OD module also provides a narrative regarding patient history with Prescription Morphine, giving the data set depth and comprehensive details surrounding the injury. This information can be used to help shape primary and secondary prevention tactics, and community outreach and education regarding drug abuse.



# INVDRS PDO DATA

JANUARY 2016 – OCTOBER 2016  
YEAR 1



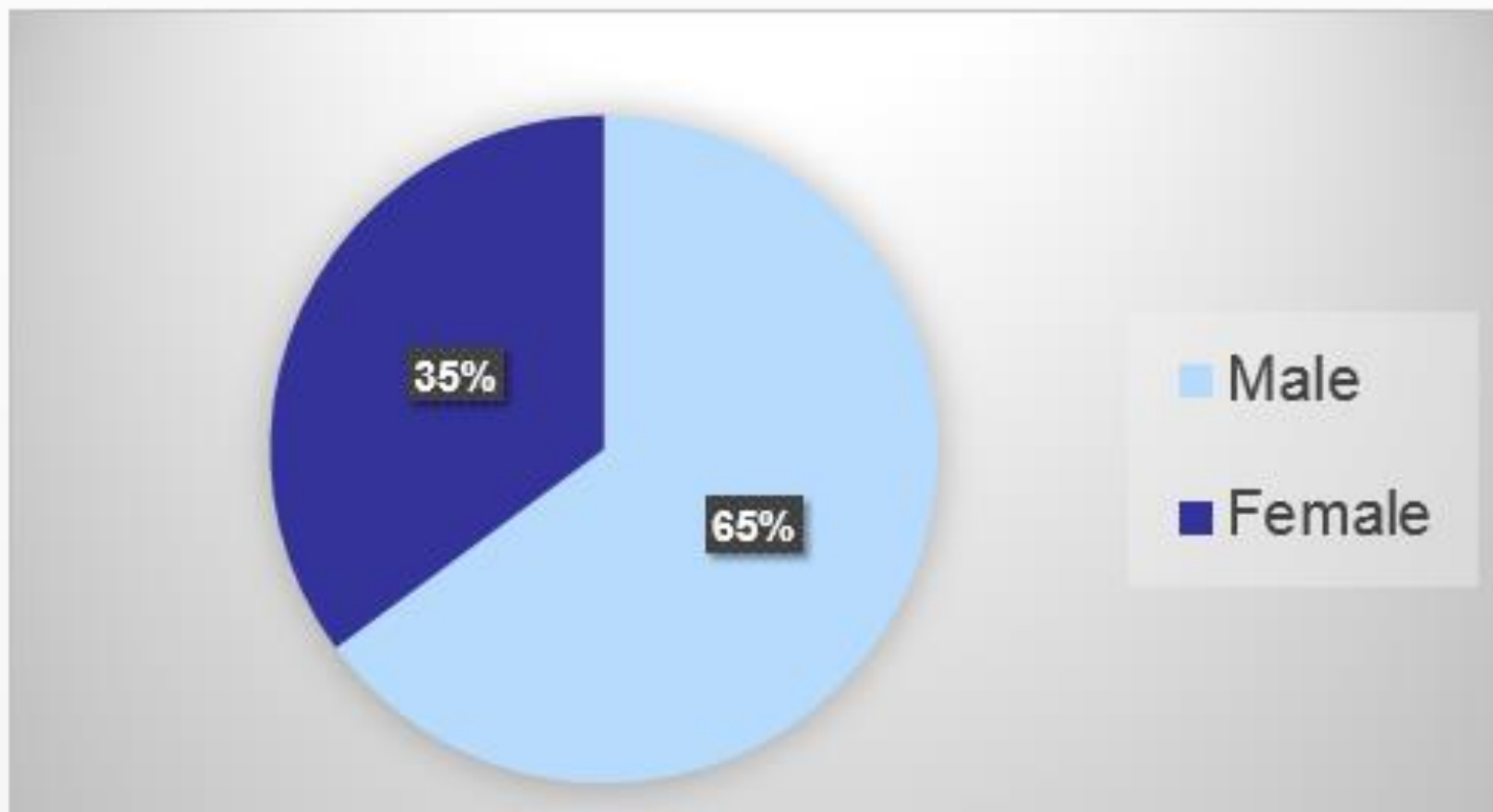
**\*Note that all 2016 INVDRS PDO data is preliminary**

# 2016 PDO DATA

- 899 PDO deaths in the CDC system
  - Underlying cause of death and/or contributing cause of death 1 through 9
  - Number may be low due to the high number of cases that have situational circumstances
- 24% of INVDRS cases are PDO related

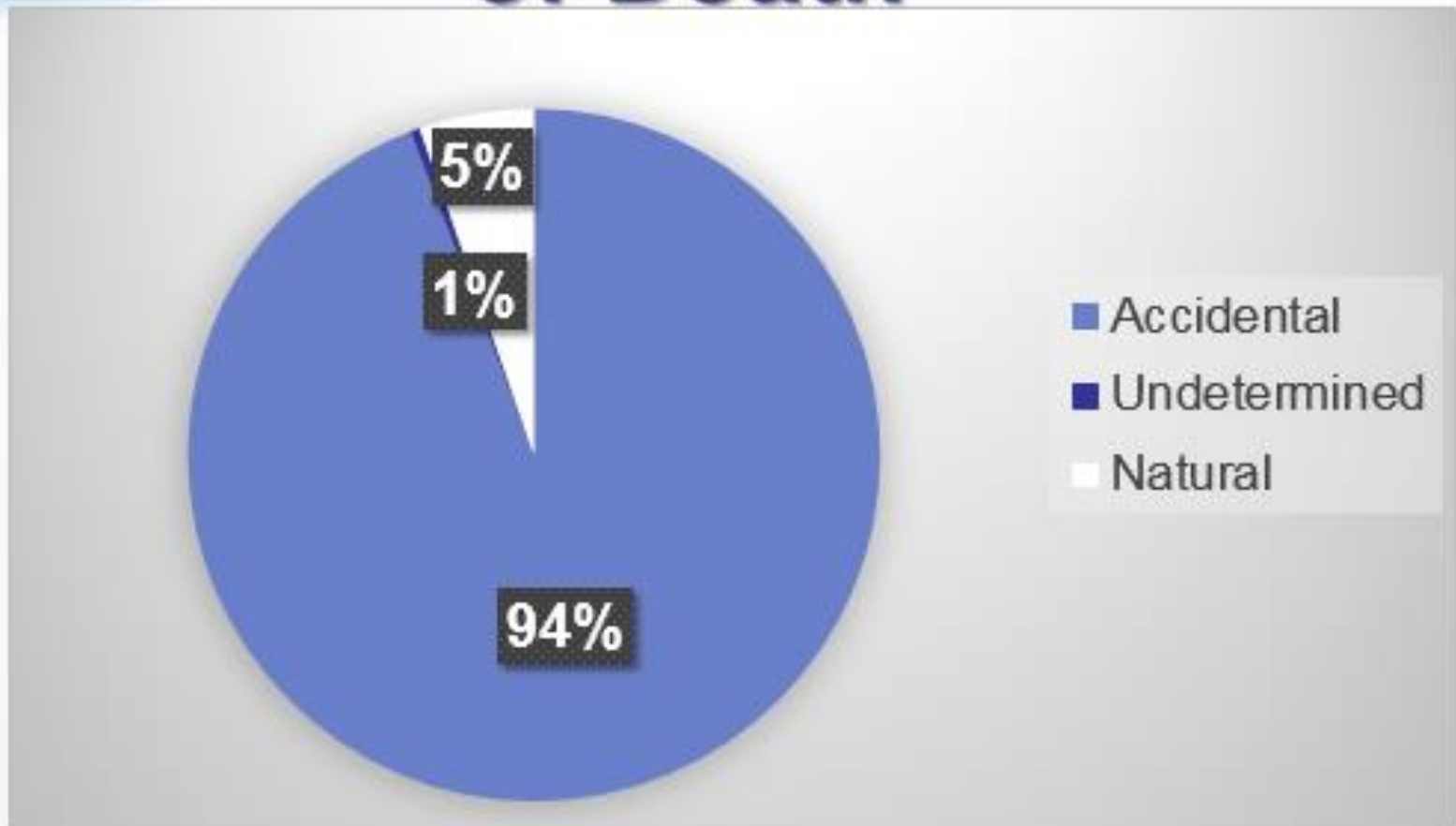
**\*Note that all 2016 INVDRS PDO data is preliminary**

# 2016 PDO Data by Gender



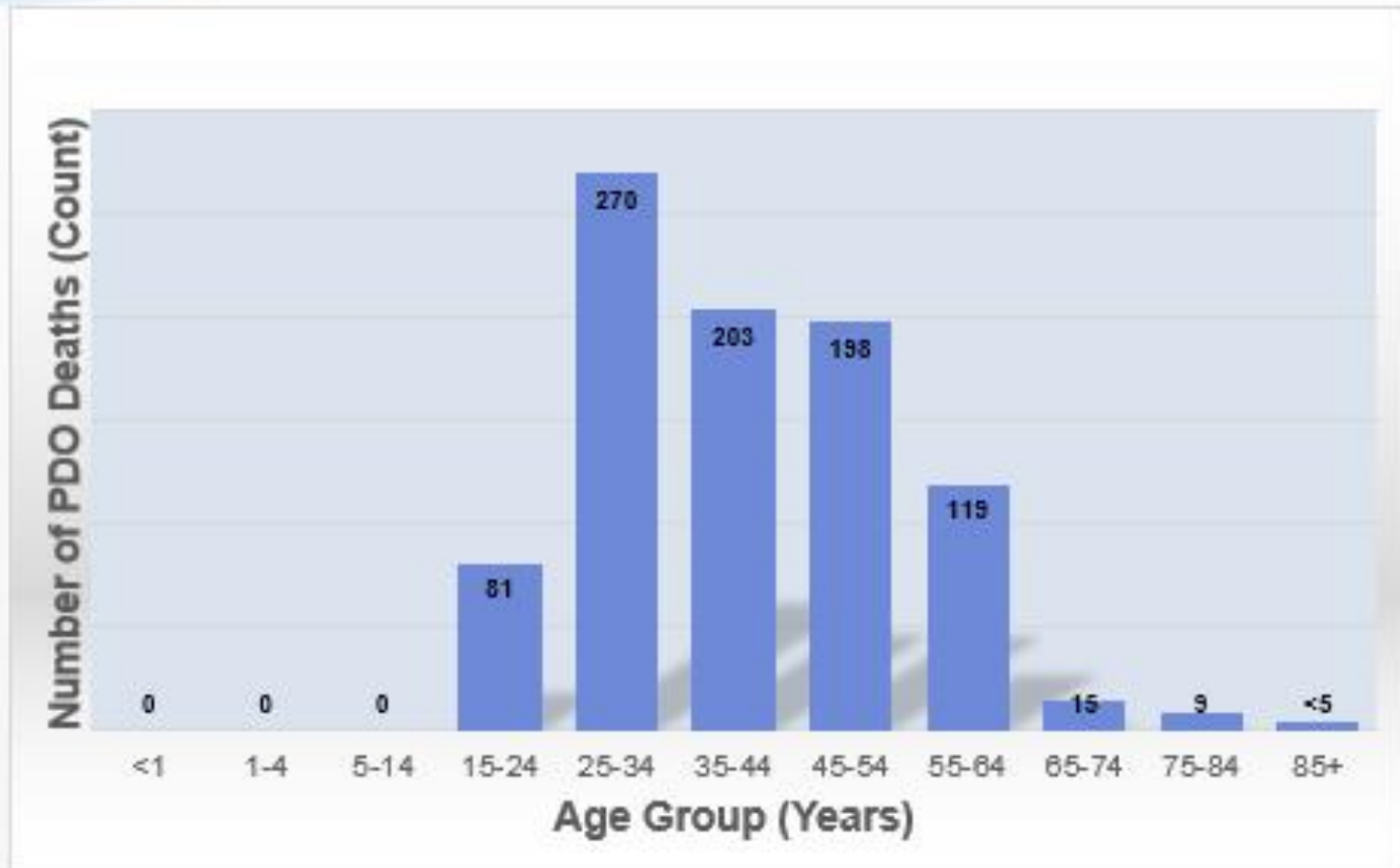
**\*Note that all 2016 INVDRS PDO data is preliminary**

# 2016 PDO Data by Manner of Death



**\*Note that all 2016 INVDRS PDO data is preliminary**

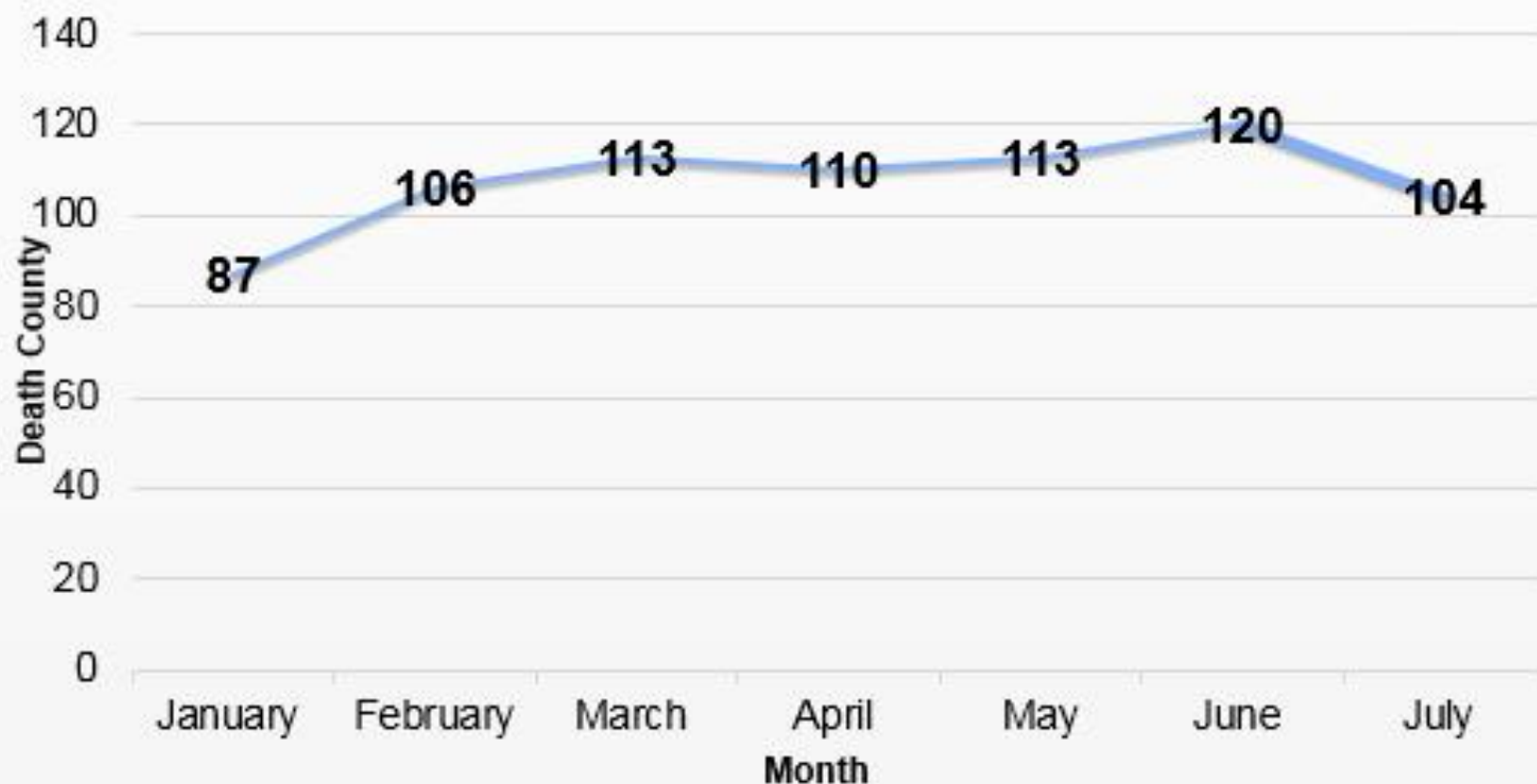
# 2016 PDO Data by Age



**\*Note that all 2016 INVDRS PDO data is preliminary**



# 2016 PDO Death Count by Month



**\*Note that all 2016 INVDRS PDO data is preliminary**

# Indiana Drug Poisoning Stats

- All Drug Poisoning Death Rate 2011-2014
  - 15.85 per 100,000
- Non-Fatal Emergency Department Visits Due to Opioid Overdose Rate 2010-2014
  - 31.98 persons per 100,000
- Available at <http://www.in.gov/isdh/26689.htm>

# Staff Contacts

- Names of all PDO PFS staff
  - Kayley Dotson, MPH, PDO Epidemiologist
    - [kdotson@isdh.in.gov](mailto:kdotson@isdh.in.gov)
  - Bonnie Barnard, PDO Community Outreach Coordinator
    - [bbarnard@isdh.in.gov](mailto:bbarnard@isdh.in.gov)
  - Annie Hayden, MLS, PDO Records Abstractor
    - [anhayden@isdh.in.gov](mailto:anhayden@isdh.in.gov)



# Staff Contacts

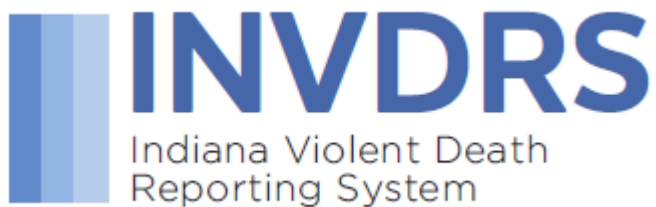
- Names of all PDO PFS staff
  - Lauren Savitskas, MPH, PDO Community Outreach Coordinator
    - [lsavitskas@isdh.in.gov](mailto:lsavitskas@isdh.in.gov)
- Staff to come January 2017:
  - PDO Project Manager
  - PDO Community Outreach Coordinator
  - PDO Records Abstractor





**QUESTIONS?**

# Data Provider Update



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Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# CDC Certificate of Confidentiality

## CONFIDENTIALITY CERTIFICATE

Issued to

Employees of

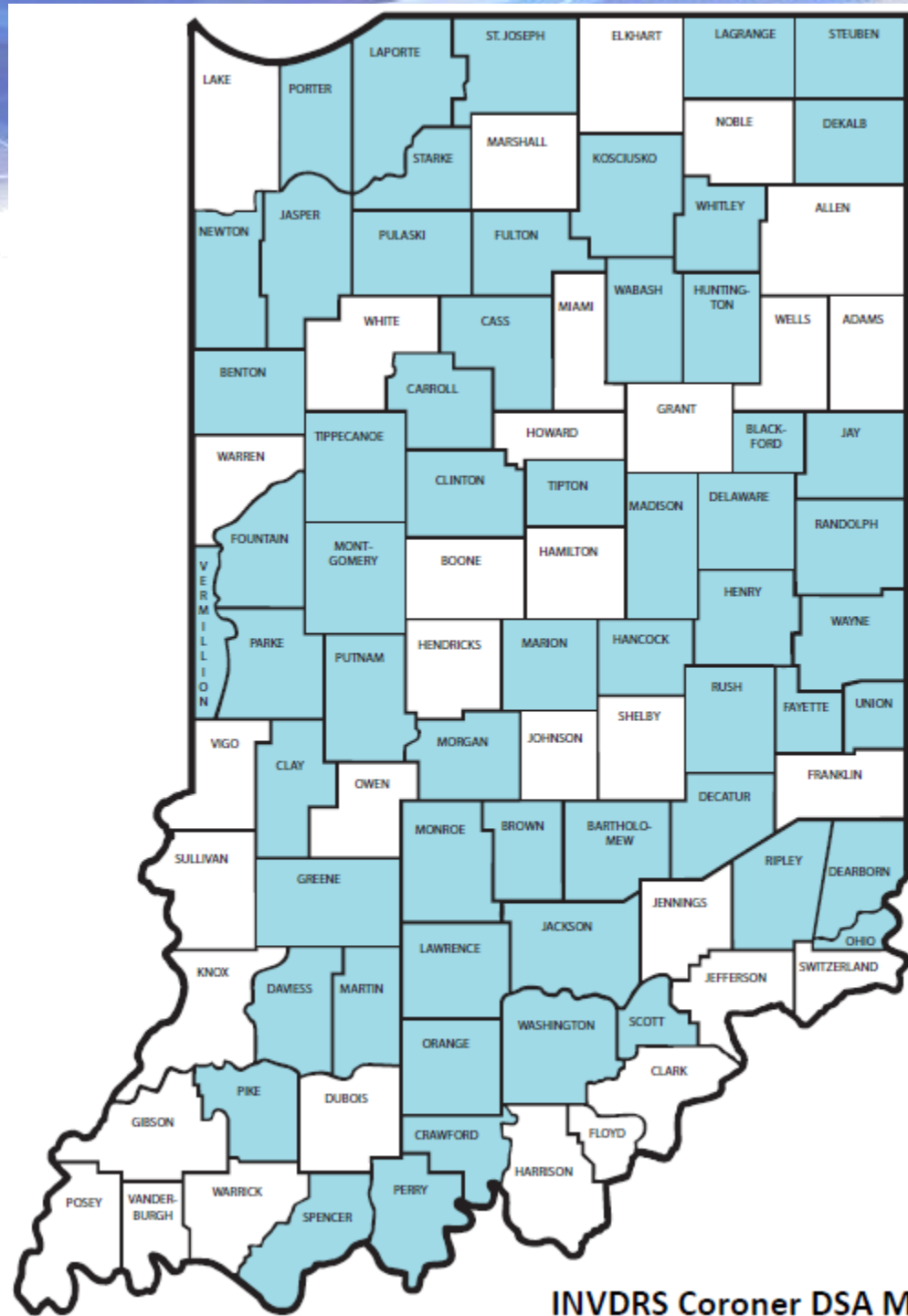
Indiana State Department of Health and Other Participants

conducting research known as

INDIANA VIOLENT DEATH REPORTING SYSTEM (INDVRS)

# Coroners

- 59 signed data sharing agreements





# Connections?

- Boone
- Dubois
- Floyd
- Hendricks
- Jefferson
- Jennings
- Knox
- Owen
- Posey
- Shelby
- Sullivan
- Switzerland
- Vigo
- Warrick

**Please contact: [Mlawry@isdh.in.gov](mailto:Mlawry@isdh.in.gov)**

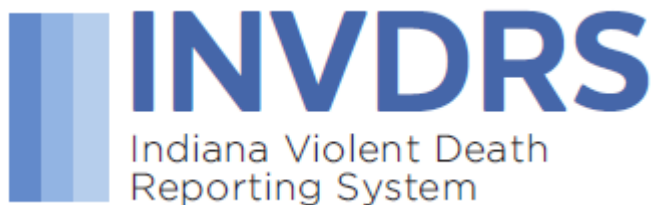
# Law Enforcement SUCSESSES

Currently there are 341 LEA's that are Participating

Indiana State Department of Health Joined the Indiana Sheriff's Association (ISA) and the Indiana Association of Chiefs of Police (IACP)

Received Endorsement from the Executive Director of the ISA

ISDH Commissioner Dr. Adams Wrote an Endorsement Letter



Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# Law Enforcement CHALLENGES

Law Enforcement Agency (LEA) Has Few Violent Deaths

LEA Don't Want to Provide Information on Firearm-related Deaths for Fear it May Affect Their Firearm Rights

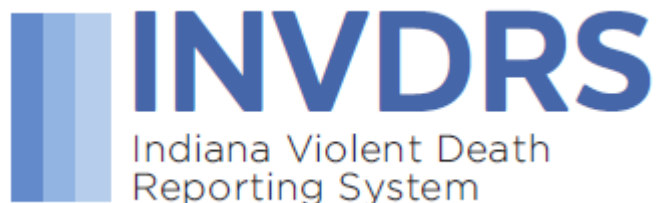
Too Much of a Burden on Staff

LEA Doesn't Want to Lose Integrity of The Investigation

The Prosecutor's Office Doesn't Want LEA to Participate

LEA Doesn't Reply to Requests to Participate in the INVDRS

Indiana APRA Laws Prevent LEA from Participating



Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# IMPD

From 5/28/15 to 12/22/15 – Email Contact with IMPD Point of Contact (POC)  
17 Total Email Contacts During this Period

12/28/15 – In-Person Meeting with IMPD POC

From 2/5/16 – 4/19/16 – Email Contact with IMPD POC  
7 Total Email Contact During this Period

5/2/16 – In-Person Meeting with IMPD POC

Meeting included ISDH Trauma & Injury Prevention Director Katie Hokanson, ISDH Law Enforcement Records Coordinator John O’Boyle and 3 IMPD Personnel

From 5/12/16 to 10/19/16 – Email Contact with IMPD POC  
8 Total Email Contacts During this Period

10/25/16 – Email Contact with Chief Troy Riggs and his Assistant Lea Gurnell  
NO REPLY RECEIVED

# **PERCEIVED PROBLEMS WITH GETTING IMPD TO PARTICIPATE**

**POC is Too Busy**

**Inability to Schedule a Face-to-Face with  
Chief Riggs**

**Took Office on January 1, 2016**

**Each Day IMPD doesn't Participate the  
Number of Police Reports Grows**

**Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)**



# Data Abstraction

# Data Abstraction

- Streamlining our records collection and abstraction processes.
- Developing an action plan for 2016 data year when the case load will almost double due to the inclusion of accidental overdose cases.

# Case Completion

- 259 of the 772 Pilot County 2015 cases are complete!
  - This means we have received and abstracted the law enforcement report and coroner report



# Case Completion

- 39 of the 772 Pilot County 2015 cases with no supplemental data source.
  - Majority are homicides which may still be open cases.

# Data Availability and Deadlines

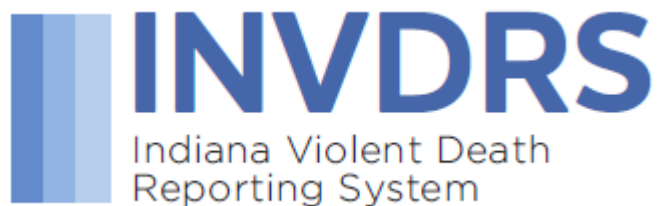
Data Year	Death Certificate Data	Complete INVDRS Data-CDC Deadline
2015	Sept. 2016 (prelim), January 2017 (final)	June 2017
2016	Sept. 2017 (prelim), January 2018 (final)	June 2018
<b>Etc.</b>		

# Upcoming Data Reports

- **Suicides in Indiana Report—Early 2017**
  - Data years 2011-2015 (mortality), 2011-2014 (morbidity)
- **2015 INVDRS Preliminary Data Brief**
  - Early 2017
  - Majority data from the death certificate
  - Focus on Pilot Counties
  - May be a supplement to the Suicides in Indiana Report

# Data Update

**\*All data is preliminary\***



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# Data Year—2015

**\*All data is preliminary\***

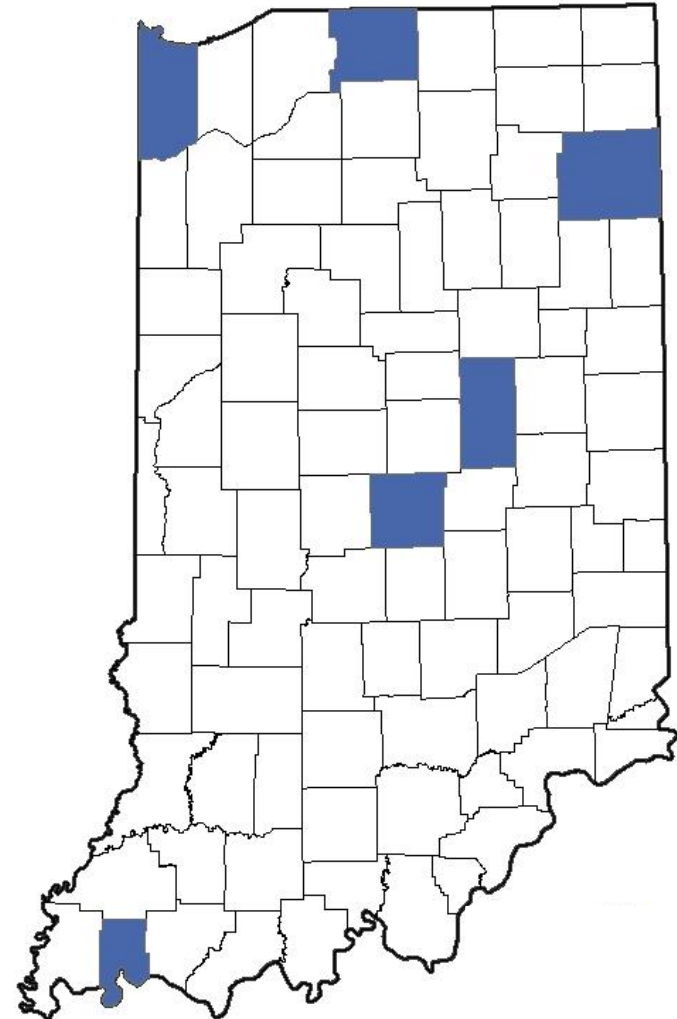
# Death Certificates-2015

- 1580 cases statewide (as of October 2016)
  - 971 Suicides (61%)
  - 401 Homicides (25%)
  - 181 Undetermined (12%)
  - 24 Accidental or Natural (2%)

\*preliminary  
numbers

# Death Certificates

- Pilot Counties
  - 49% of all cases (772)
  - 41% of all suicides (400)
  - 78% of all homicides (313)



\*preliminary  
numbers

# Death Certificates

	All Pilot	Marion	Lake	Allen	St. Joseph	Vanderburgh	Madison
<b>Total</b>	772	359	151	103	77	51	30
<b>Suicide</b>	401	161	69	61	45	40	25
<b>Homicide</b>	313	168	77	35	22	10	*

Counts for other manners of death not shown



**\*preliminary numbers**



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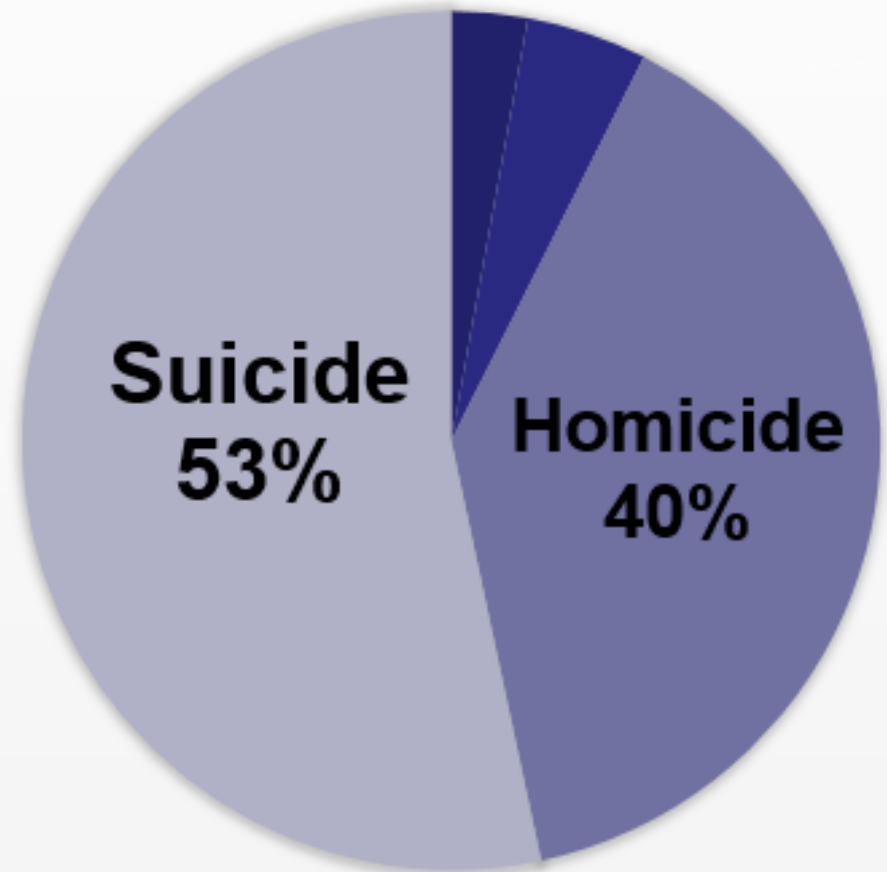
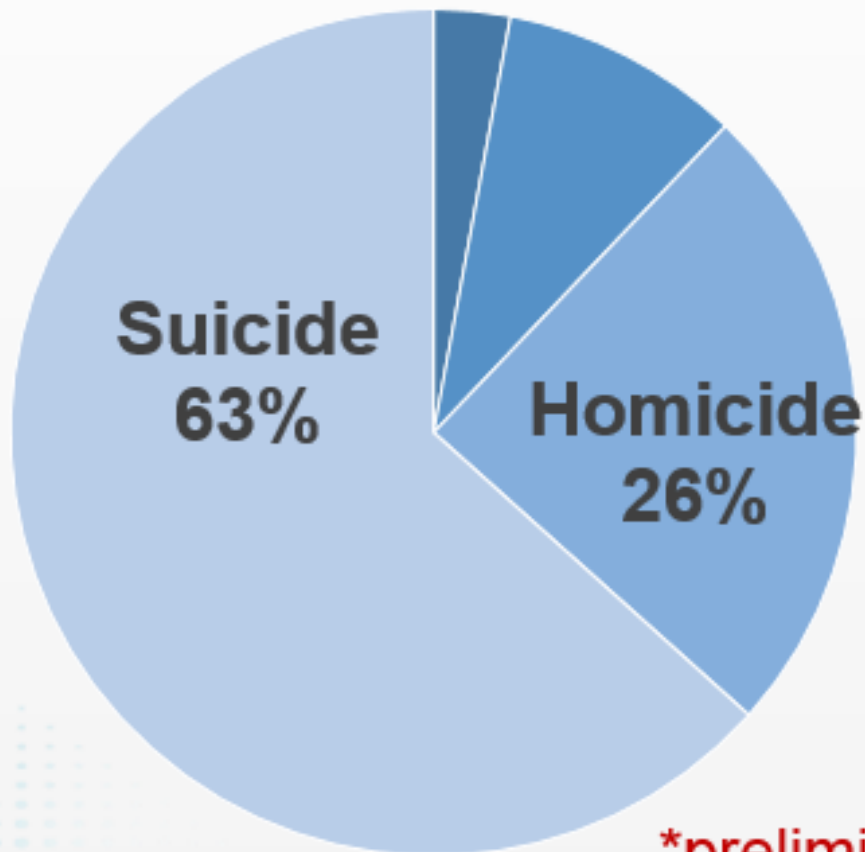
# **Violent Death County Rank by Death Count-2015**

- |                   |                   |
|-------------------|-------------------|
| 1. Marion—359     | 8. Johnson—38     |
| 2. Lake—151       | 9. Elkhart—35     |
| 3. Allen—103      | 10. Hamilton—32   |
| 4. St. Joseph—77  | 11. Tippecanoe—32 |
| 5. Vanderburgh—51 | 12. Porter—30     |
| 6. Howard—45      | 13. Madison—30    |
| 7. Vigo—41        | 14. Delaware—27   |

# Death Manner

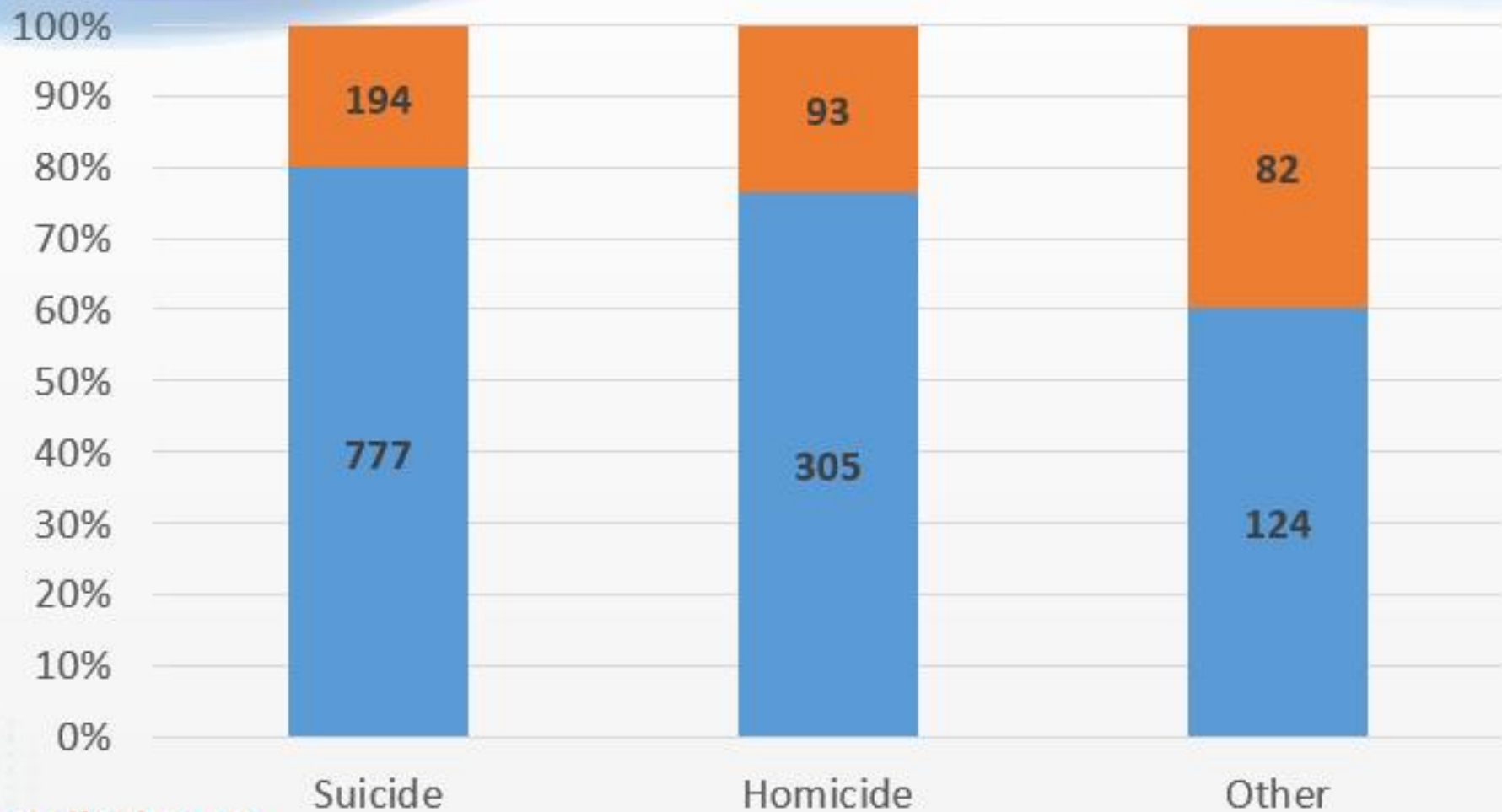
## Statewide

## Pilot Counties



**\*preliminary numbers**

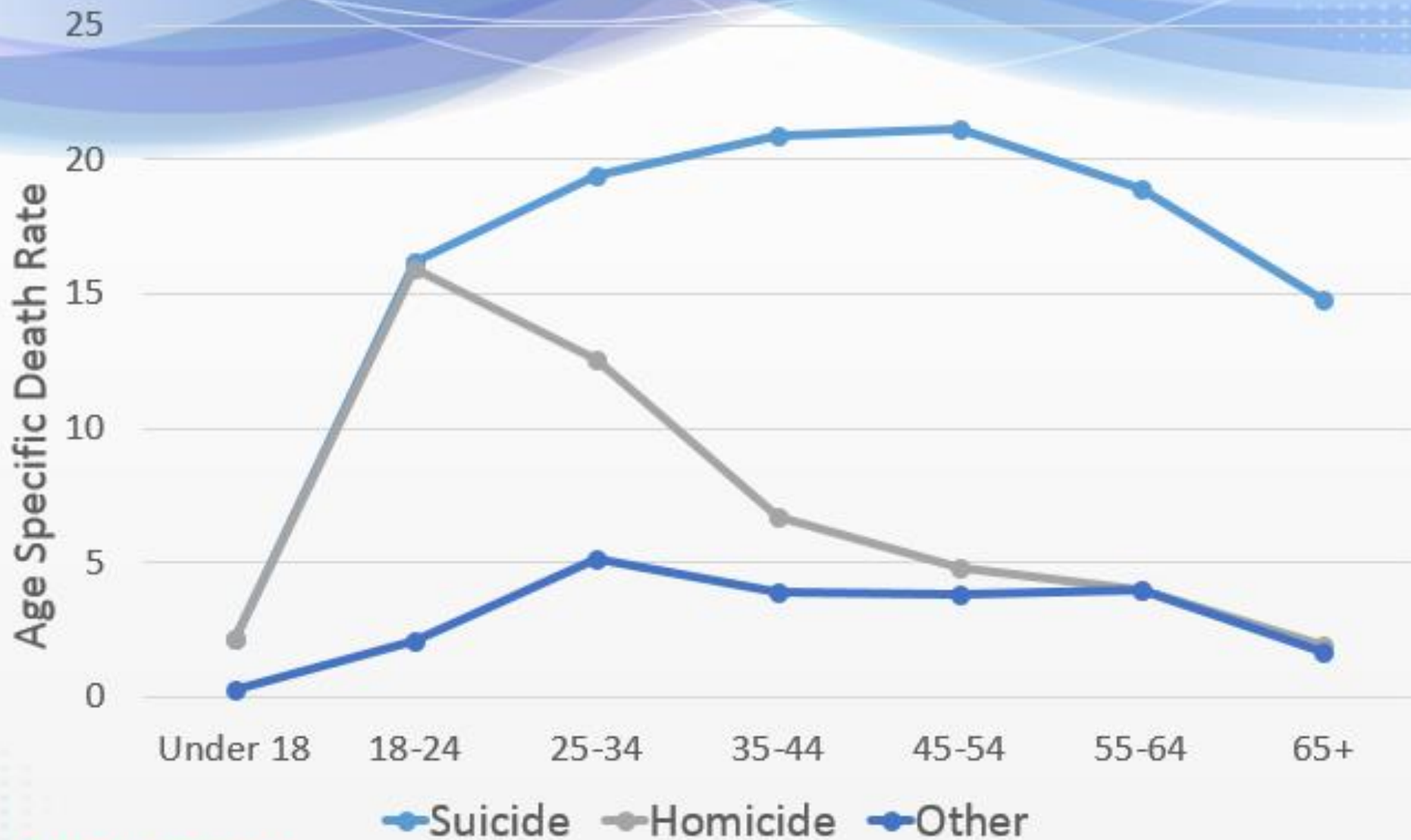
# Percentage of Cases by Manner and Sex



**\*preliminary numbers**

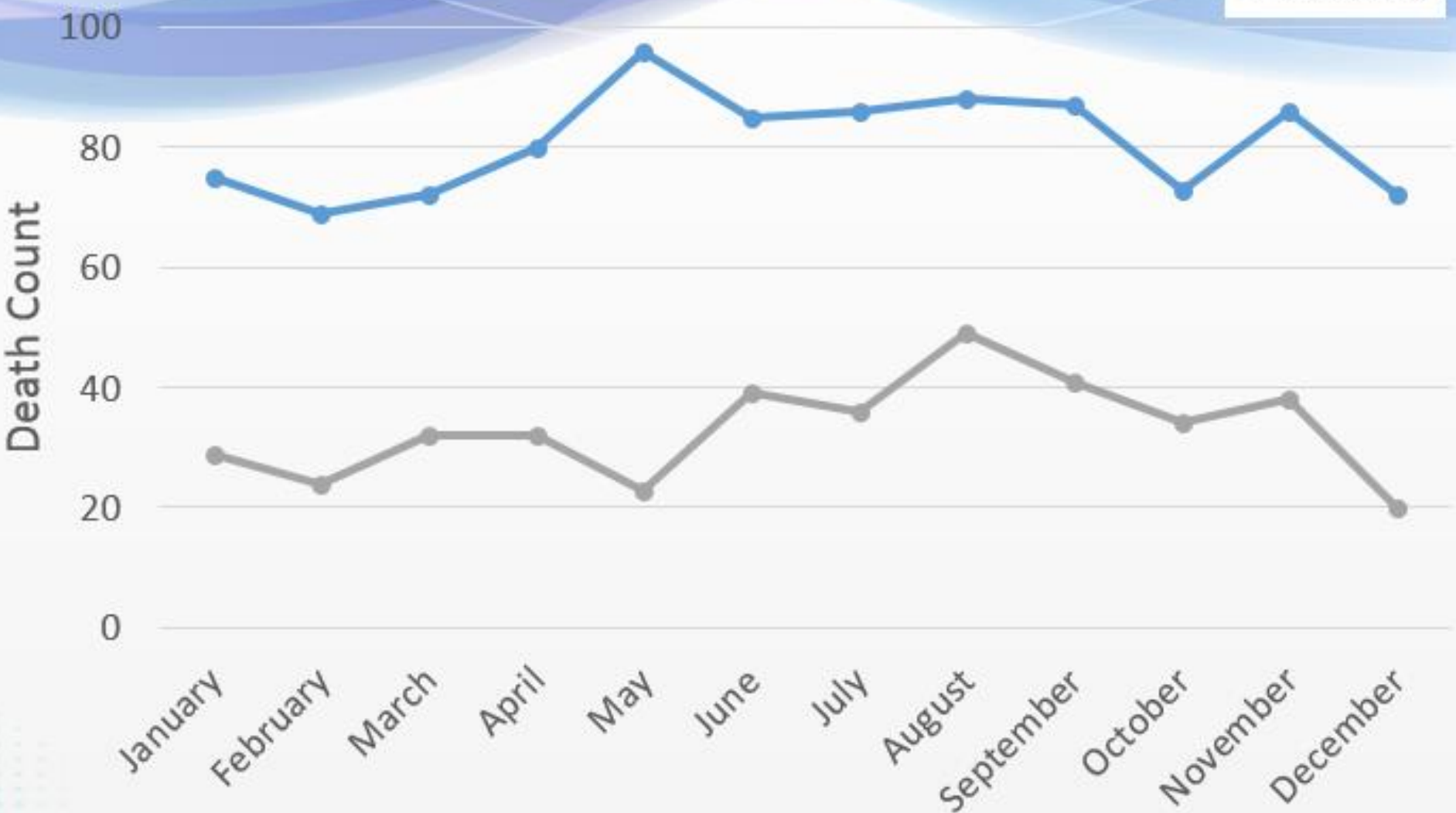
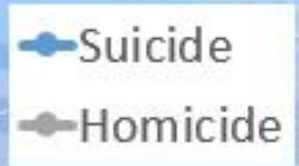
■ Male ■ Female

# Manner of Death by Age Group



\*preliminary  
numbers

# Manner of Death by Month



\*preliminary numbers

# Suicide Crude Rates

	2010	2011	2012	2013	2014	2015
<b>Overall</b>	13.4	13.4	14.3	14.3	14.3	<b>14.7</b>
<b>Males</b>	21.1	21.3	23.3	23.3	23.3	<b>23.8</b>
<b>Females</b>	5.8	6.0	5.7	5.7	5.7	<b>5.8</b>

Rates per 100,000 people

**\*2015-preliminary numbers**

\*\*2010-2014 Rates via CDC Wonder

# Rates by Sex and Race

## 2015 Suicide Rate

- Whites—15.96
- African Americans—7.85
  
- White Males—**25.88**
- White Females—6.29
- AA Males—14.02
- AA Females—Unstable

## 2015 Homicide Rate

- Whites—2.82
- African Americans—34.08
  
- White Males—3.89
- White Females—1.77
- AA Males—**58.36**
- AA Females—11.52

Rates per 100,000 people

# Homicide Crude Rates

	2010	2011	2012	2013	2014	2015
Overall	4.9	4.8	5.3	<b>6.1</b>	5.5	6.0
Males	7.7	7.3	8.1	<b>9.6</b>	8.9	9.4
Females	2.1	2.4	2.5	2.6	2.2	<b>2.7</b>

Rates per 100,000 people

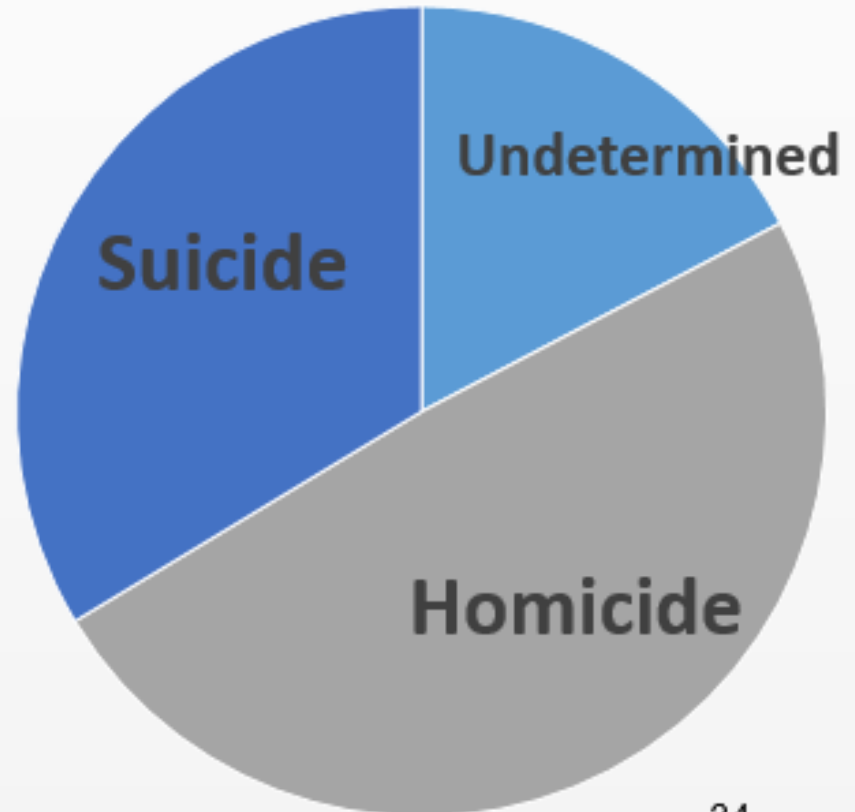
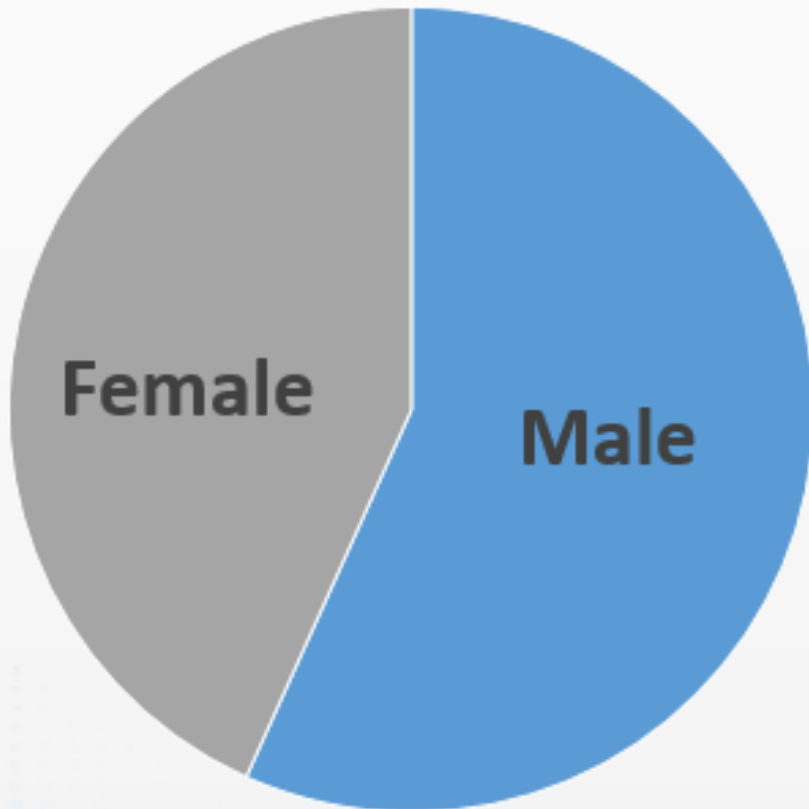
**\*2015-preliminary numbers**

\*\*2010-2014 Rates via CDC Wonder

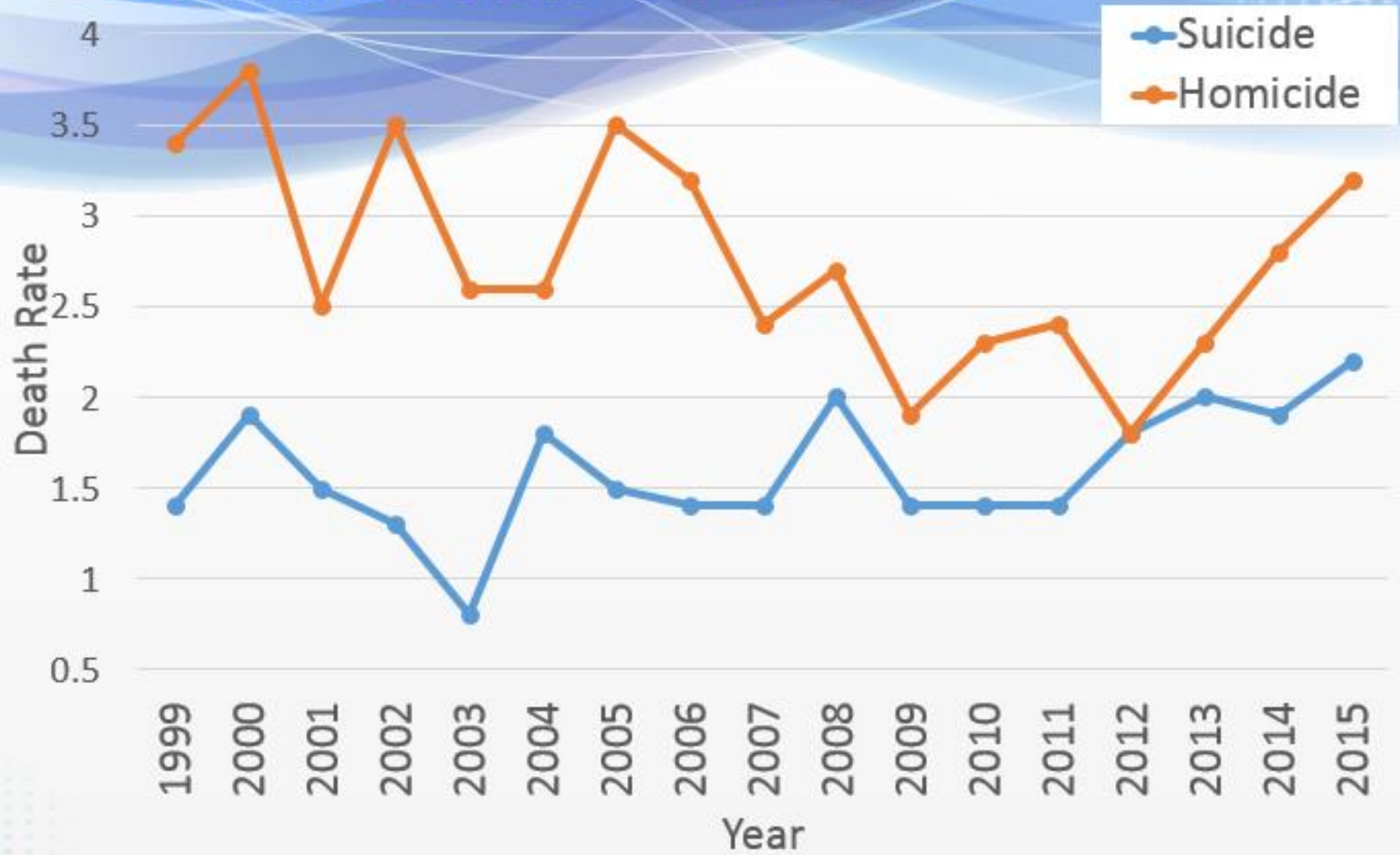


# Child Deaths-2015

- 105 violent deaths of individuals <18



# Child Deaths Over Time



**\*2015-preliminary numbers**  
**\*\*1999-2014 Rates via CDC Wonder**

Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)

# Public Health Preparedness Districts



- District Rates based on County of Residence

# 2015 District Suicide Rate Rank

- |                     |                     |
|---------------------|---------------------|
| 1. District 7—22.6  | 7. District 2—13.2  |
| 2. District 10—19.8 | 8. District 1—12.8  |
| 3. District 6—15.0  | 9. District 4—12.4  |
| 4. District 9—14.6  | 10. District 3—11.6 |
| 5. District 8—14.0  |                     |
| 6. District 5—13.7  |                     |

\*preliminary  
numbers

Rates per 100,000 people

# Counties with 2015 Suicide Rates above 20

- **District 7**

1. Clay\*
2. Vigo
3. Putnam\*
4. Owen\*

- **District 10**

1. Pike\*
2. Perry\*
3. Vanderburgh
4. Gibson\*

\*Unstable rate

\*\*preliminary  
numbers

Rates per 100,000 people

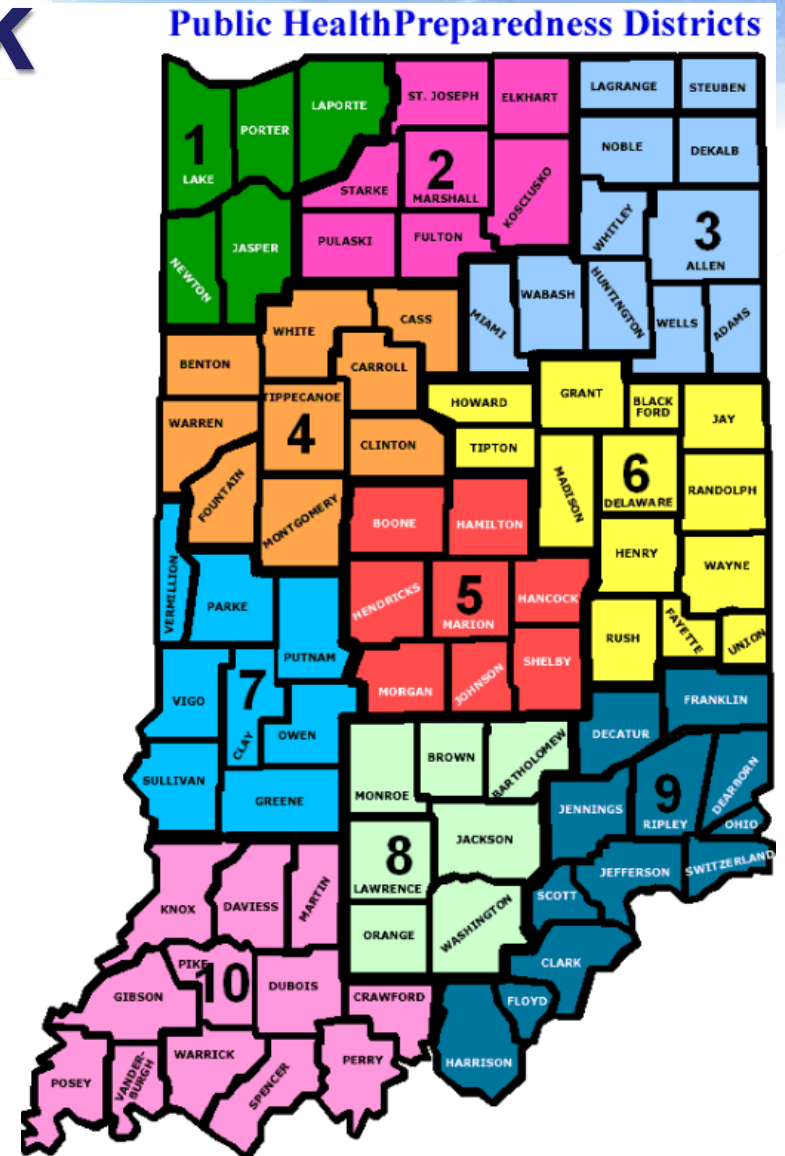
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# 2015 District Homicide Rate Rank

1. District 1—9.7
2. District 5—8.9
3. District 2—5.5
4. District 3—4.4
5. District 6—4.3

Rates per 100,000 people

\*preliminary numbers



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# Circumstances found in 2015 Homicides

Occurring in Allen, Lake, Madison,  
Marion, St. Joseph, or  
Vanderburgh County, Indiana

\*preliminary  
numbers

# Data Sources

- 313 Homicides
  - 221 with coroner report abstracted
  - 104 with law enforcement abstracted
  - 89 with both abstracted
- Cases (236) with at least one data source were included in the following slides

\*preliminary  
numbers



# Homicide Circumstances

- Fight between two people: 15
- Precipitated Other Crime: 16
  - Most common: burglary, drug trade, motor vehicle theft, robbery
- Crime in Progress: 32
- Drug Involvement: 21
- Drive-by Shooting: 11
- Argument: 38
- Intimate Partner Violence: 15

\*preliminary  
numbers



# Data Year—2016

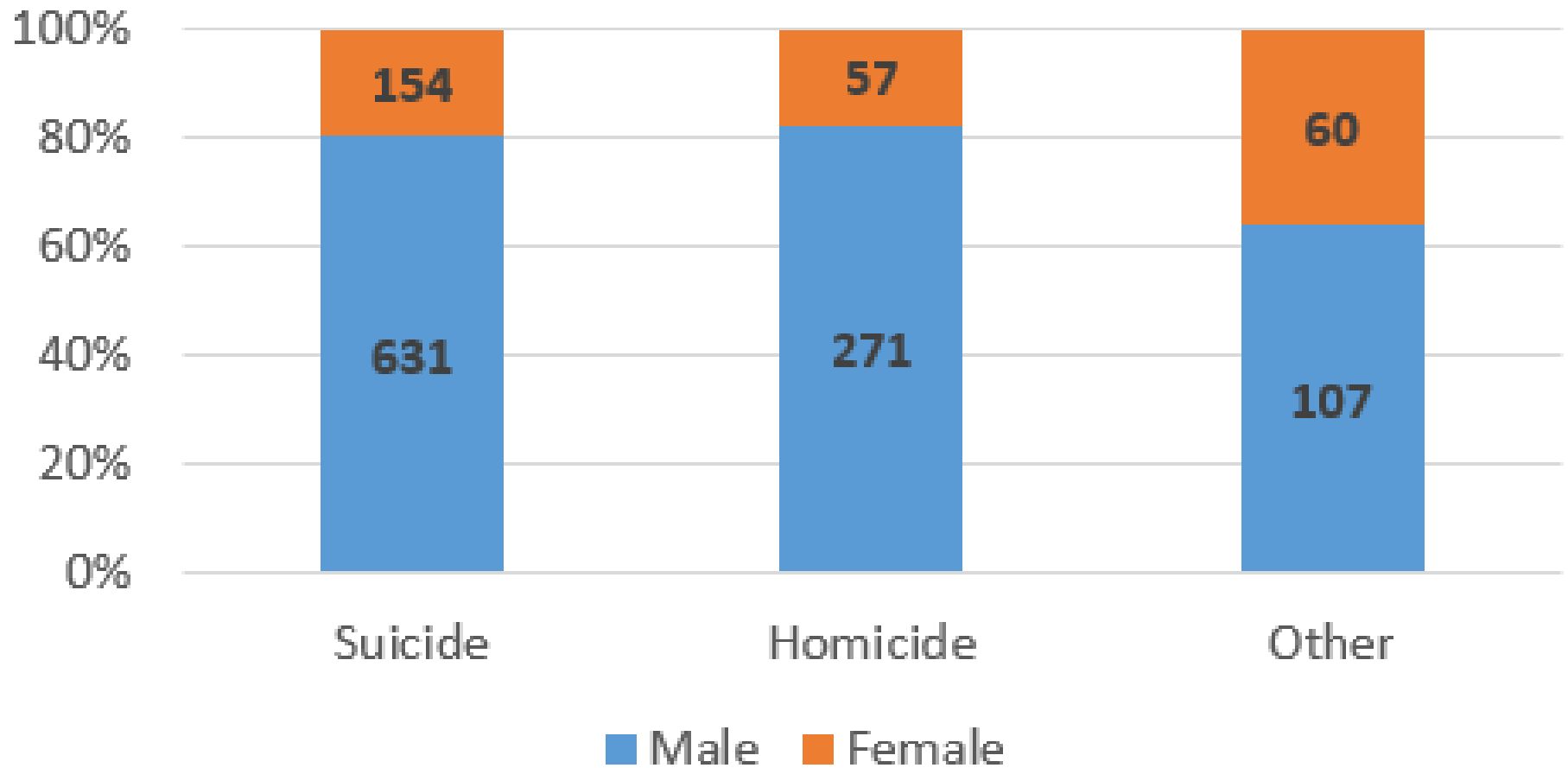
**\*All data is preliminary\***

# Death Certificates-2016

- 1280 cases statewide (as of October 2016)
  - 785 Suicides (61%)
  - 328 Homicides (26%)
  - 143 Undetermined (11%)
  - 24 Accidental or Natural (2%)

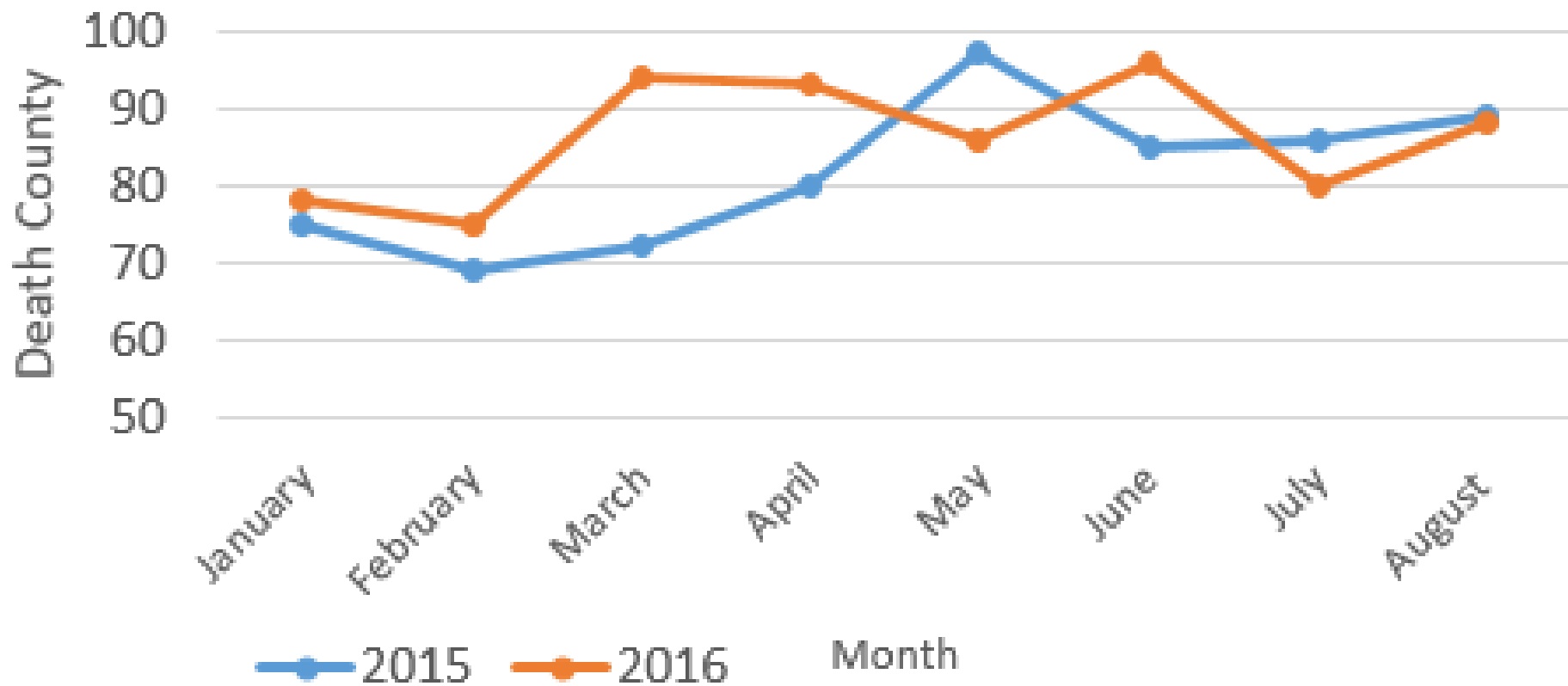
\*preliminary  
numbers

## Percentage of Cases by Manner and Sex



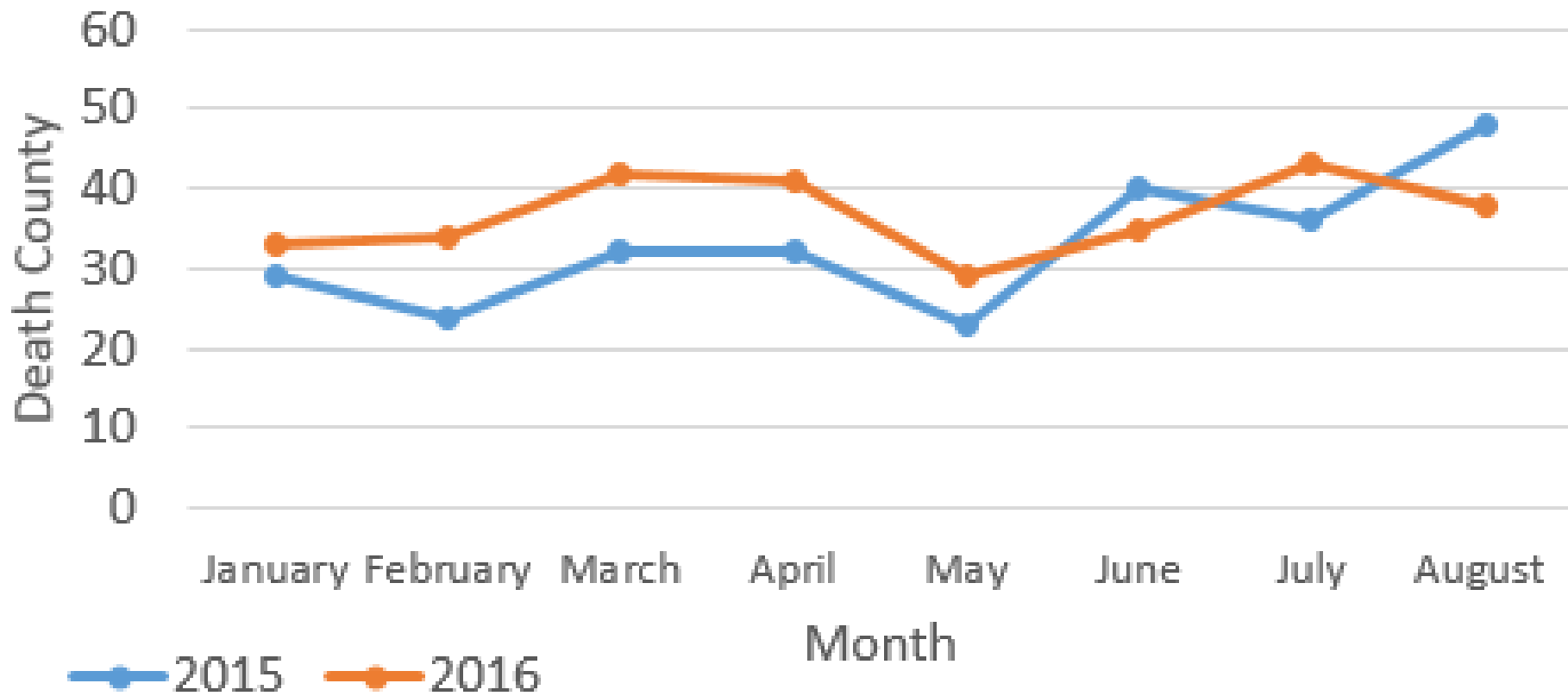
\*preliminary  
numbers

## Suicide Count by Month and Year



\*preliminary  
numbers

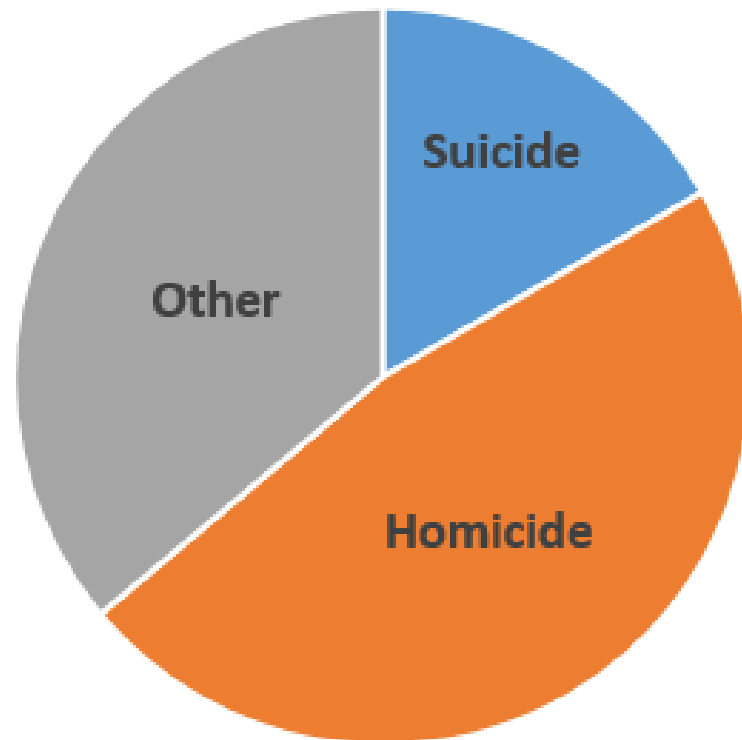
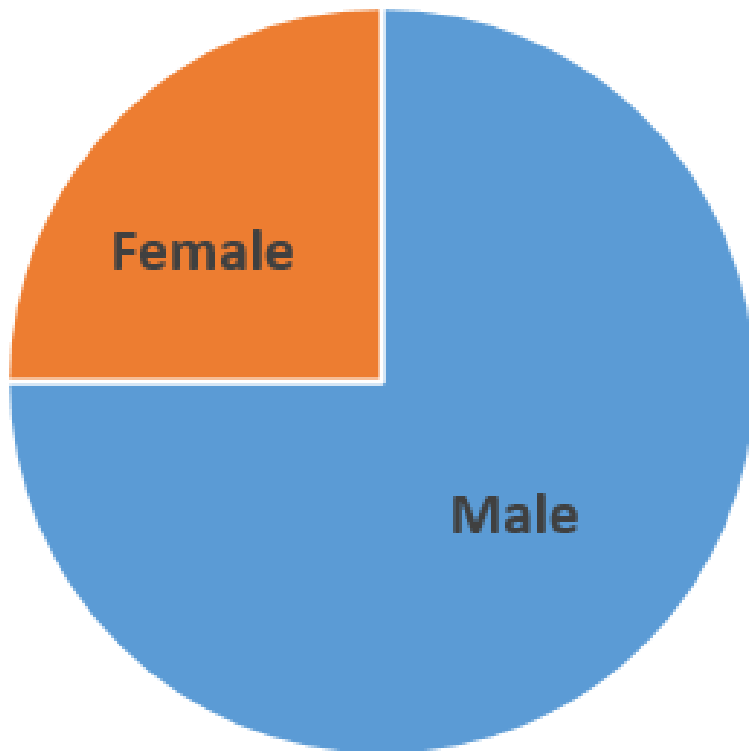
## Homicide Count by Month and Year



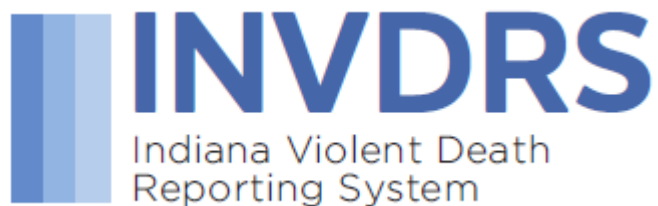
\*preliminary  
numbers

# Child Deaths-2016

- 36 violent deaths of individuals <18.



# What else would you like to see?



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# **INDIANA INJURY PREVENTION ADVISORY COUNCIL UPDATES**

# Injury Prevention Happenings

- New Injury Prevention Program Coordinator
- Outreach at Labor of Love Summit 2016



# Resource Guide App



- Injury Prevention at your fingertips
- Updated mid-August with 2014 data
- Free download for iOS & Android
- Phone & tablet capabilities

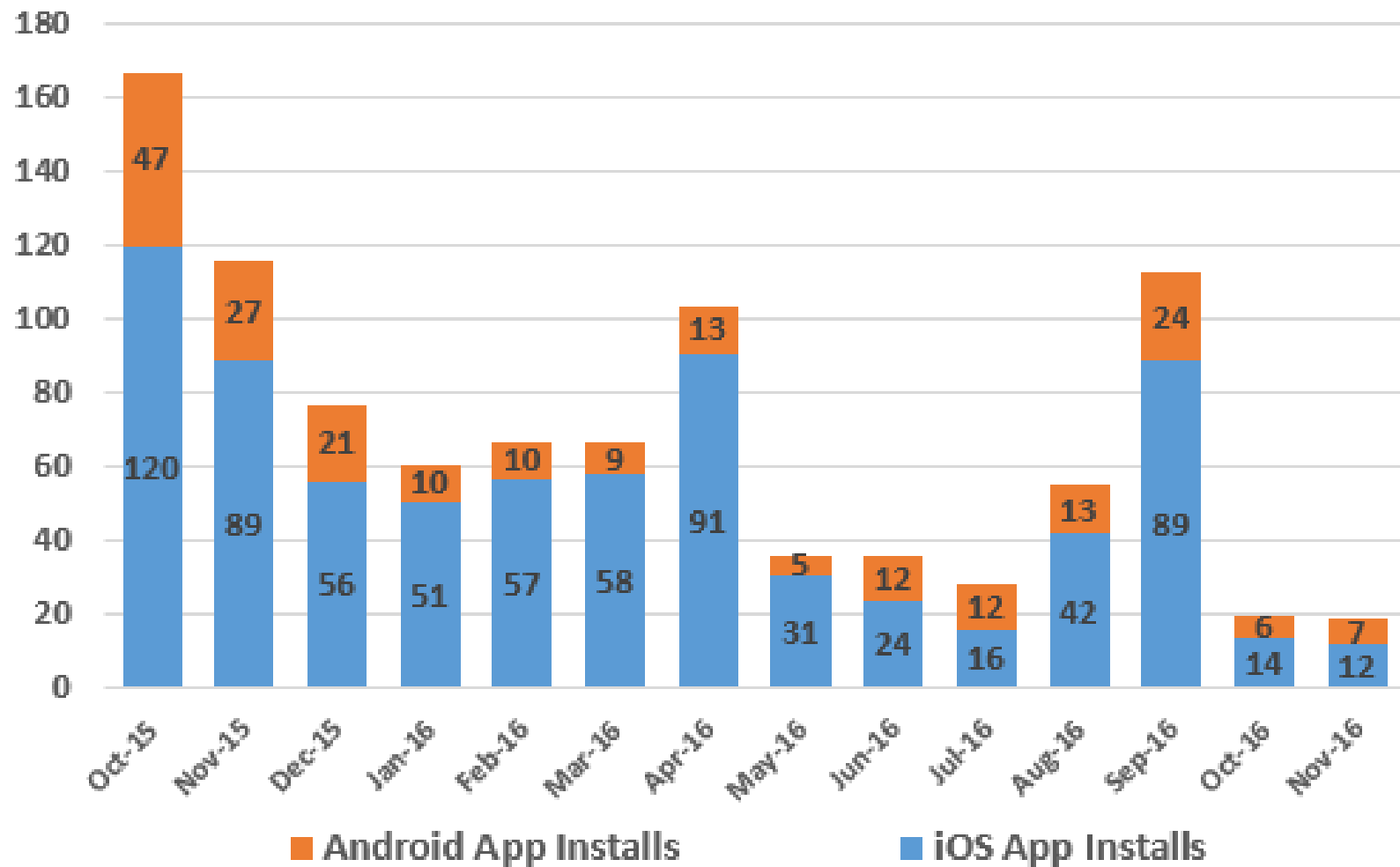


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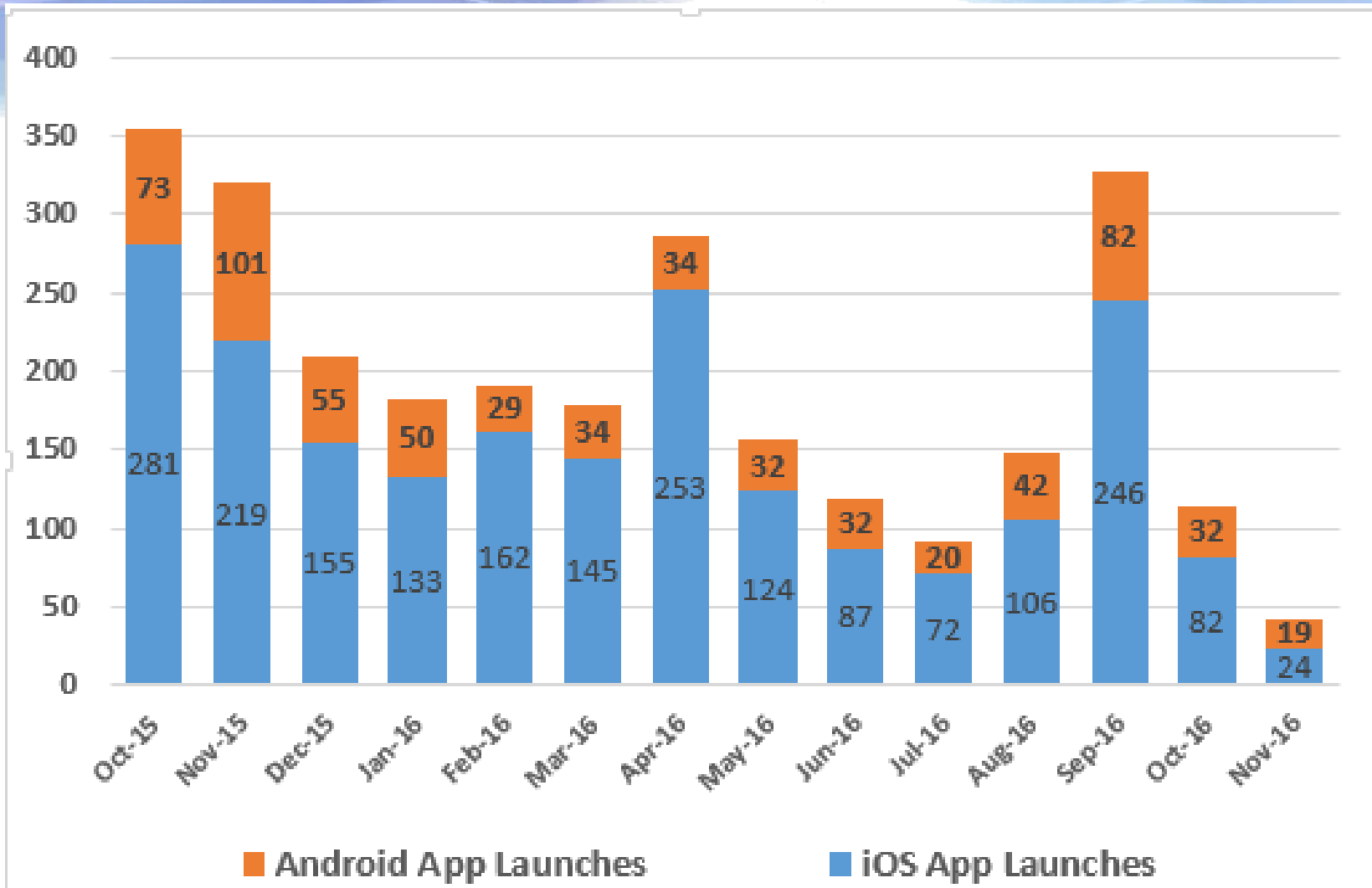
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# Installs per Month, N = 1,001



# Launches per Month, N = 3,408



# November 18, 2016 Recap

Meeting focused on Pediatric Injury Prevention:

- Infant Mortality/ SUID data
- ISDH Safe Sleep Programming
- MCH MOMS Helpline
- Vanderburgh County Health Department Activities



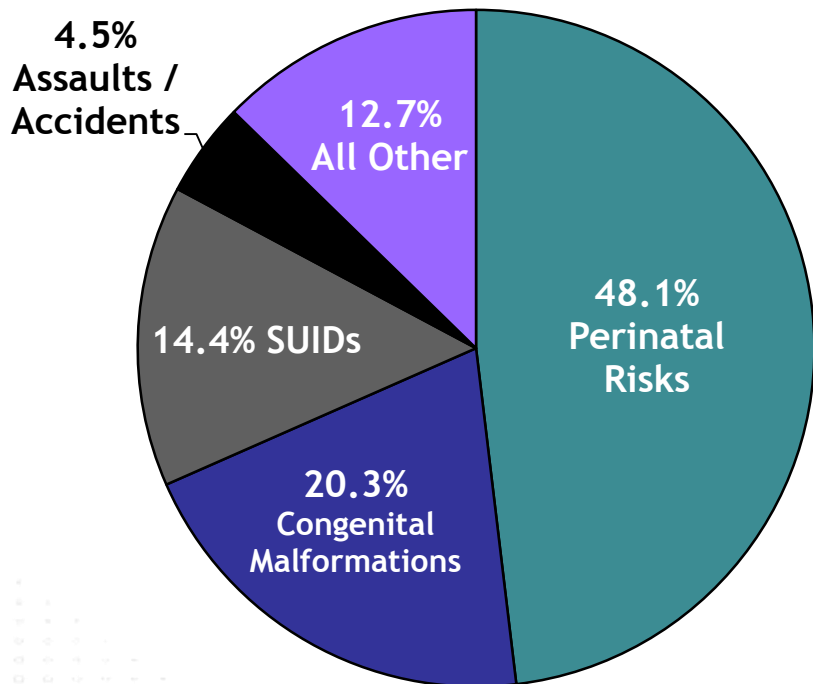
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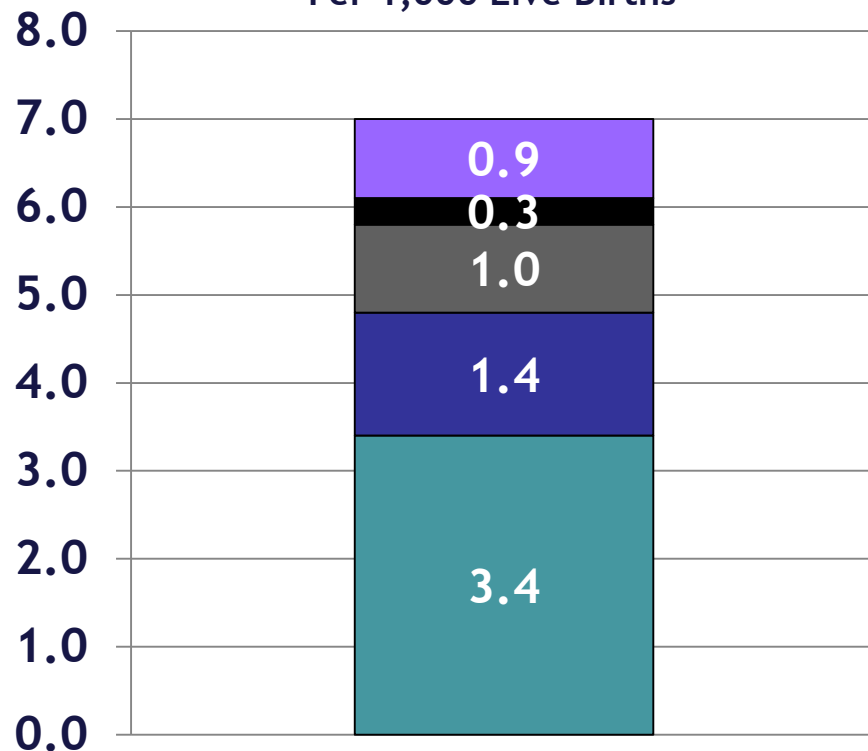
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# Infant Mortality Distribution by Cause Indiana 2014

**% Distribution of Infant Deaths  
N = 597**



**Cause Specific  
Mortality Rates\*  
Per 1,000 Live Births**



\*Note: Cause specific mortality rates may not exactly equal the overall infant mortality rate due to rounding.  
Source: Indiana State Department of Health, Maternal & Child Health Epidemiology Division [February 24, 2016]  
Indiana Original Source: Indiana State Department of Health, PHPC, ERC, Data Analysis Team



# Sleep tight

knowing your baby is asleep **A**lone, on her **B**ack in a **C**rib.

Protect your baby from suffocation by practicing the ABCs of safe sleep and help reduce Indiana's infant death rate. Visit [www.LaborofLove.in.gov](http://www.LaborofLove.in.gov) or call 211 to learn more.



**Labor of Love**  
*Helping Indiana Reduce Infant Death*

Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)





MCH  
**MOMS  
HELPLINE**

1-844-MCH-MOMS  
(844-624-6667)

*The key to a healthy baby and a happy mom*

**Email Questions: [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)**

# 3<sup>rd</sup> Annual IPAC Conference

Making Connections:

Community, Programs, and Progress

- Date: TBD – May, 2017
- One day conference
- Call for Presenters
- Call for Abstracts (Poster presentation)



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# 2017 Regular IPAC Meetings

Meetings: 10 a.m. – 12 p.m. EST

- March 17
- July 21 – Webcast
- September 15
- November 17 (potentially Webcast)



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# IPAC Contact information

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Injury Prevention Epidemiologist Consultant

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Phone: 317-617-4155

IPAC website:

<http://www.in.gov/isdh/25395.htm>



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# International Survivors of Suicide Loss Day

- Saturday, November 19<sup>th</sup>, 2016
- Event Sites in Indiana:
  - Akron
  - Chesterton
  - Fort Wayne
  - Indianapolis
  - Madison
  - Princeton

[www.afsp.org](http://www.afsp.org)

# Upcoming Observances

- International Survivors of Suicide Day – November 19th
- National Drug and Alcohol Facts Week – January 23-29, 2017
- Teen Dating Violence Awareness Month – February 2017



# Upcoming Events

- Midwest Injury Prevention Alliance Summit:  
December 1 & 2
- National Rx Drug Abuse & Heroin Summit – April 17-20, 2017 in Atlanta, GA
- Sexual Assault, Domestic Violence, and Systems Change - April 18th - 20th in Orlando, Florida



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# 2017 meeting dates

- **1 p.m.-3 p.m. EST in Rice Auditorium**
  - March 17<sup>th</sup> (collaboration)
  - September 15<sup>th</sup> (data heavy)





# 2017 meeting dates

- **Other presentations**
  - July 21<sup>st</sup>, IPAC Webcast



# Call to Action

- Send interested parties to ISDH Division of Trauma and Injury Prevention
  - [INVDRS@isdh.in.gov](mailto:INVDRS@isdh.in.gov)
  - INVDRS Epidemiologist  
Rachel Kenny  
317-233-8197  
[rkenny@isdh.in.gov](mailto:rkenny@isdh.in.gov)