

TRAUMA TIMES

A Communication of the Division of Trauma and Injury Prevention

Indiana State Department of Health

Volume 8, Issue 6

December 2017

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Upcoming Events

- 12/15 Indiana State Trauma Care Committee meeting
- 12/25-12/26 State offices closed for Christmas

ISDH receives four-year first responder CARA grant

The Indiana State Department of Health (ISDH) was awarded the First Responder Comprehensive Addiction and Recovery Act grant. This four-year, \$3.2 million grant will:

- Provide resources through the Indiana naloxone kit distribution program for rural first responders for emergency treatment of known or suspected opioid overdoses in rural communities;
- Train first responders on carrying and administering naloxone through a partnership with Overdose Lifeline; and
- Expand the Indiana Recovery and Peer Support Initiative for referral to appropriate treatment and recovery communities.

ISDH and its partners will target rural communities, including 49 rural counties that represent 1.47 million Indiana residents (22.3 percent of the total population). These counties have high rates of non-fatal emergency department visits due to opioid overdose, high average daily morphine milligram equivalents of opioids prescribed per capita, a greater percentage of non-Hispanic white residents and lower reported use of naloxone by first responders.



The 49 counties (highlighted in blue) are the rural counties identified by the federal office of management and budget.

CDC launches "Rx Awareness" campaign to raise opioid overdose awareness

Overdose deaths involving prescription opioids have quadrupled in the United States since 1999. This national epidemic is impacting Indiana as well, where more than 3,000 people have died due to prescription opioid overdose in the last 15 years. In fact, more Hoosiers die annually from prescription drug overdoses than from motor vehicle crashes. To address this public health crisis, the Indiana State Department of Health (ISDH) is taking part in the Centers for Disease Control and Prevention's (CDC's) Rx Awareness campaign.

The campaign, designed to bring attention to the risks associated with prescription opioids, focuses on the dangers of these drugs, whether they are used for medical or nonmedical (recreational) purposes. Through a series of testimonials from people affected directly by prescription opioid overdose, the effort aims to increase awareness that prescription opioids can be addictive and dangerous and decrease the number of individuals who use opioids recreationally or overuse them.

To launch the campaign in Indiana, ISDH will work with county health departments to disseminate information through a coordinated digital and social media campaign.



Take Action and Help

Whether you are a healthcare provider, first responder, law enforcement officer, public health official or local resident, the opioid epidemic is likely affecting you and your community. No matter who you are, you can take action to end the opioid overdose epidemic. We all have a role to play on the frontlines of this fight—it **starts with addressing prescription opioid misuse and overdose.**

What can you do?

- Avoid taking prescription painkillers more often than prescribed.
- Dispose of medications properly, as soon as the course of treatment is done. Avoid keeping prescription painkillers or sedatives around "just in case."
- Help prevent misuse by not selling or sharing prescription drugs. Never use another person's prescription drugs.
- Learn more about prescription opioids, and spread the word to increase awareness in your community about the risks and dangers.
- Help those struggling with addiction find the right care and treatment. Start by calling the Indiana Addiction Hotline at 1-800-662-HELP (4357). If you have questions about medicines, call Poison Help at 1-800-222-1222.

For more information about the campaign, visit [CDC.gov/RxAwareness](https://www.cdc.gov/RxAwareness).



Indiana State Department of Health

Increasing Patient Satisfaction While Decreasing Opioid Prescriptions & Other Opioid Topics of Interest

Friday, December 15
10 a.m.

Rice Auditorium, 2 N. Meridian, Indianapolis
or via webcast



Dr. Chad Brummett, Associate Professor, Anesthesiology, University of Michigan, will present at the Indiana State Trauma Care Committee on his involvement with the Michigan Opioid Prescribing Engagement Network (Michigan OPEN) and his clinical research in post-surgical pain.

To view ISDH webcasts, test your access to view streaming videos several days prior to the event. Use the following link for the test and to view the webcast: <http://videocenter.isdh.in.gov/videos/>. To test, click on any thumbnail. If the video does not play, your network may have restrictions that prevent you from watching streaming content. If you experience problems with accessibility, contact your system administrator. WiFi connectivity should be avoided given variable connection speeds and the risk of buffering problems. At the indicated date and time, this webcast will be available via the Live Video options at the top and right side of the webpage. Questions can be submitted both during and after the webcast at: indianatrauma@isdh.in.gov

Funding for this presentation was made possible in part by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices or organizations imply endorsement by the U.S. Government.

Trauma Care Committee hears about resource facilitation following traumatic brain injuries and stroke care legislation

The Indiana State Trauma Care Committee (ISTCC) recently met at the Indiana State Department of Health.

Dr. Lance Trexler, Director of Rehabilitation Neuropsychology, Rehabilitation Hospital of Indiana, presented on resource facilitation for managing health and social outcomes following traumatic brain injuries (TBIs). Dr. Trexler explained that about 2,472 hospitalizations occur annually for TBI and 66,410 people are living with a disability secondary to TBI. What are the public health implications that Indiana and the United States would face? Some of these implications include at least 50 percent of individuals with a TBI return to the hospital at least once, 33 percent rely on others for help with everyday activities and 22 percent reside in nursing homes. The annual lifetime economic impact of resource facilitation could yield around \$366 million a year.

50%

of individuals with a TBI return to the hospital at least once.

2014 Stroke Mortality Rates:

Indiana: 42%

National: 37%

Alex Meixner, regional vice president of advocacy for the American Heart Association and American Stroke Association, discussed new legislation mandating the Department of Homeland Security and ISDH to implement a rule governing stroke centers. Indiana had a higher stroke mortality rate, and stroke is the fourth-leading cause of death in the state. In January 2017, House Bill (HB) 1145 was introduced to ensure Indiana's regions developed and adopted stroke-focused protocols and that ISDH maintained a list of designated stroke centers. On July 1, 2018, HB 1145 will go into effect allowing multiple agencies to develop protocol and training processes and the creation of certified stroke centers and network hospitals.

Judi Holsinger of St. Vincent Indianapolis provided the designation subcommittee update. Memorial Hospital and Health Care Center had its one-year written review and is awaiting its verification visit in May 2018.

Dr. Stephanie Savage of IU Health Methodist from the PI subcommittee presented on emergency department length of stays in hospitals, district by district, as well as the group's work with a pilot project in collecting more specific data points when transferring patients.

Revision to the national EMS scope of practice model: Administering naloxone and applying tourniquets

The national EMS scope of practice model is used as guidance by state EMS agencies throughout the United States to develop rules and regulations. Due to the severity of the opioid epidemic, the National EMS Advisory Council (AC) has reviewed the literature and determined that there are more pros than cons to allowing emergency medical technicians at every level to administer naloxone, the opioid-reversing drug approved by the FDA. It blocks opioid receptor sites, reversing the toxic effects of the overdose. Naloxone is administered when a patient is showing signs of opioid overdose.



Uncontrolled bleeding remains the most preventable cause of death following traumatic injury. After the National EMS AC reviewed the literature, it was determined that there are low complication rates and significant benefits when all levels of EMTs are able to apply tourniquets. Wound packing, with a hemostatic dressing or with plain gauze, will also be included in the model for all levels of EMS personnel.

To learn more about these scope of practice model changes, visit <https://nasems.org/Projects/EMSScopeOfPractice/>.

December 2017

Injury prevention observances

Safe Toys & Gifts Month		National Drunk and Drugged Driving			1 Pre-holiday impaired driving prevention	2 Pre-holiday impaired driving prevention
3 Pre-holiday impaired driving prevention	4 Older Driver Safety Awareness Week	5 Older Driver Safety Awareness Week	6 Older Driver Safety Awareness Week	7 Older Driver Safety Awareness Week	8 Living Life To the Fullest Older Driver Safety Awareness Week	9 Pre-holiday impaired driving prevention
10 Pre-holiday impaired driving prevention	11 Pre-holiday impaired driving prevention	12 Pre-holiday impaired driving prevention	13 Drive sober or get pulled over	14 Drive sober or get pulled over	15 Drive sober or get pulled over	16 Drive sober or get pulled over
17 Drive sober or get pulled over	18 Drive sober or get pulled over	19 Drive sober or get pulled over	20 Drive sober or get pulled over	21 Drive sober or get pulled over	22 Drive sober or get pulled over	23 Drive sober or get pulled over
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Holiday health and safety tips

- Stay warm—Cold temperatures can cause serious health problems, especially in infants and older adults. Stay dry and dress warmly in several layers.
- Travel safely—Don't drink and drive. Wear a seat belt every time and always buckle your child in the car using a child safety seat, booster seat or seat belt appropriate for his/her height, weight and age.
- Watch the kids—Keep a watchful eye on your kids to keep potentially dangerous toys, food, drinks, household items and choking hazards out of kids' reach.
- Prevent injuries—Use step stools instead of climbing on furniture, leave the fireworks to the professionals, wear a helmet when riding a bicycle or skateboarding and install a smoke detector and carbon monoxide detector in your home.

For more information, visit <https://www.cdc.gov/family/holiday/index.htm>.

Safe winter weather traveling

Have you taken the time to ensure that your vehicle is ready for traveling this winter season? Although proper vehicle maintenance and travel planning are important year-round, they are especially crucial in the winter months. Winter driving can oftentimes be hazardous, so it is important to remember the three P's of safe winter driving: Prepare, protect and prevent.

The National Highway Traffic Safety Administration (NHTSA) says there are several ways to prepare for a winter trip. One easy way to safeguard your travels is to prepare a kit of proper equipment in case of an emergency.

Checklist of supplies for your car:

- Bag of sand or cat litter (for traction)
- Battery-powered radio
- Blankets
- Charged cell phone
- Compass
- Extra batteries
- Extra clothing
- First aid kit
- Flares
- Flashlight
- Food
- Ice scraper
- Jumper cables
- Lighter
- Maps
- Medications
- Portable charger
- Tire pump
- Water



Planning your route ahead of time can help you identify what you and your family might need access to. Get to know your car and check for routine services (such as oil changes, tune ups, antifreeze, battery power, etc.).

Check out <https://www.nhtsa.gov/recalls> to see whether a recall has been issued for your vehicle. If so, find a local dealer in your area to fix your recall for *free*. Visit NHTSA's full list of recommendations online at <https://www.nhtsa.gov/winter-driving-tips>, and do not let this holiday season be your last!

Stepping On recap

In early August, the Indiana State Department of Health (ISDH), Division of Trauma and Injury Prevention, announced the introduction of *Stepping On* in Indiana. *Stepping On* is an evidence-based program proven to reduce falls and build confidence in older adults. A community-based workshop, *Stepping On* was developed in Australia and tested in a randomized trial where it demonstrated a 31 percent reduction in falls. Wisconsin developed the American version.

At the initial training, the Wisconsin Institute of Healthy Aging (WIHA) trained six individuals on the high-level, evidence-based older adult falls prevention program. As December begins, three *Stepping On* workshops have been held in Anderson, Bloomington and Lafayette from the six participants of the initial class.

Because *Stepping On* leaders are required to facilitate two full workshops, each leader will also instruct a full workshop in the spring. ISDH and the University of Indianapolis' Center for Aging and Community are partnering and will train two master trainers in Indiana, which will enable the program to further spread to other parts of the state.

More information on the train-the-trainer courses will come in the spring of 2018.

Sliding through winter safely: Traumatic brain injury prevention

A trauma brain injury (TBI) occurs when the brain is impacted by an external mechanical force, possibly leading to permanent or temporary impairment of cognitive, physical and psychosocial functions. This can often be associated with a diminished or an altered state of consciousness.

Although it is vital to use preventive measures all year around, it is especially crucial to prevent TBIs in the winter due to more hazards from inclement weather, especially when traveling. Here is a list of tips and preventive measure to ensure that you prevent TBIs this holiday season:

- Allow yourself plenty of time to get to your destination, and be familiar with the directions that you will be following.
- Always buckle up with your seat belt and use child safety seats in the proper manner. Smaller children in car seats should remove their winter coats before being harnessed in. The coat can then be placed over the straps to keep the traveler warm. To prevent crashes, remember to stay alert and be cautious.
- Get plenty of rest before your trip, and attempt to make pit stops along the way.
- Always keep an appropriate distance between cars on the road, and always keep your eyes open for pedestrians. Be alert for environmental factors that could lead to an accident (such as inclement weather, animals and congested traffic).
- When walking, take the path of least resistance.
- Chose the right shoes! You can be safe and fashionable at the same time. Choose boots and shoes that are durable, have a strong arch and have plenty of traction on the bottom.
- Keep your hands free. Wear gloves so you can keep your hands out of your pockets to help you balance. Avoid carrying heavy loads or children that may cause you to become off balance.
- Last, plan ahead. Consider the weather and the geographic location that you will be travelling in. Avoid going out in inclement weather unless absolutely necessary. If it can wait until the weather and sidewalks are clear, so can you.

Use these tips this winter to prepare for traveling, protect yourself against the weather on the road and prevent any crashes before they happen.



For more information, visit <https://www.cdc.gov/features/hockeyconcussions/index.html>.

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