



## Injury Prevention

In Colorado, injuries are the third leading cause of death for all ages and the leading cause of death for people under age 45.<sup>1</sup> Each year, they cause 3,300 deaths and more than 32,000 hospitalizations. It is estimated that nearly one in eight Coloradans seeks medical treatment for an acute injury each year. Recognizing the importance of this public health issue, Colorado is implementing a variety of statewide injury surveillance and prevention and control programs with the overarching goal of reducing injury-related morbidity and mortality among all Coloradans. In collaboration with partners at the state and local level, CDPHE is focusing in three areas of high need for the Injury Prevention Winnable Battle: child fatalities, motor vehicle fatalities and older adult falls.

### **STATEWIDE GOAL: Reduce injury-related morbidity and mortality among all Coloradans.**

#### **Child Fatality Prevention**

Each year, Colorado has nearly 700 fatalities among children younger than 18 years. Nearly half of child fatality deaths are due to natural causes among infants in the first 28 days of life and do not have clear preventability. The remaining child fatalities are reviewed by multidisciplinary teams for the purpose of identifying prevention recommendations. Among preventable child fatalities, most are due to unintentional injury, making unintentional injury the leading cause of preventable death among children.

**LONG-TERM OUTCOME MEASURE:** By 2019, reduce the child fatality rate from 46.4 deaths per 100,000 2013 to 40.0 deaths per 100,000 among children ages 0-17 years. (Data source: Vital records)

#### **STRATEGIES:**

- 1. Increase the number of evidence-based child fatality prevention projects implemented and evaluated at the local level.**

**Objective 1:** By 2018, 50 evidence-based projects will be initiated by local child fatality review teams. (Data source: Child Fatality Prevention System Prevention Strategy Tracking Form and Annual Local Team Survey)

**Baseline:** Zero in 2013

**Objective 2:** By 2018, 85 percent of local health agencies will report having moderate to high injury prevention capacity. (Data source: Office of Planning and Partnerships LPHA 2011 Annual Report)

**Baseline:** 15 percent in 2011

**Coordinating Agency:** CDPHE

**Partners in Implementation:** LPHAs, local child fatality team members (e.g. law enforcement, coroners, attorneys, hospitals, county human services), Child Fatality Prevention System State Review Team members

## 2. Increase the number of state-level systems and policy change strategies implemented.

**Objective 1:** By June 2018, 25 state-level systems and policy change strategies will have been implemented since the passage of Senate Bill 13-255. (Data source: Child Fatality Prevention System Annual Legislative Report)

**Baseline:** Zero in July 2013

**Coordinating Agency:** CDPHE

**Partners in Implementation:** Child Fatality Prevention System State Review Team members, Colorado legislators, CDHS, Colorado Department of Public Safety, CDOT, Colorado Department of Education

### Motor Vehicle Fatality Prevention

In Colorado, motor vehicle accidents are a leading cause of unintentional injury for people younger than 65 years. For Coloradans between ages of 5 and 24 years, half of unintentional injury death is due to motor vehicle accidents. Each year, more than 300 motor vehicle occupants die in motor vehicle crashes and nearly 2,500 are hospitalized for nonfatal injuries.

#### LONG-TERM OUTCOME MEASURES:

- **By 2019, reduce the motor vehicle fatality rate in Colorado from 9.5 deaths per 100,000 population in 2013 to 8.5 deaths per 100,000 population.** (Data source: Death certificate data)
- **By 2018, reduce the teen motor vehicle fatality rate for ages 15-19 years from 11.7 deaths per 100,000 teens in 2013 to 9.7 deaths per 100,000 teens.** (Data source: Death certificate data)

#### STRATEGY:

1. **Educate decision-makers about evidence-based practices and policies related to seat belt use and educate parents, teens, and law enforcement about Colorado's graduated driver's license law.**

**Objective 1:** By 2018, increase the percent of adults and teens observed to wear seat belts to 90.0 percent. (Data source: CDOT Seat Belt Observational Surveys)

**Baseline:** 82.1 percent in 2013 for adults; 84.8 percent in 2013 for teens

**Objective 2:** By 2018, reduce the number of crashes caused by teen drivers ages 15-19 years to 74 crashes per 1,000 licensed teen drivers. (Data source: Colorado Traffic Accident Reports)

**Baseline:** 82.2 crashes per 1,000 licensed teen drivers in 2012.w

**Coordinating Agency:** CDPHE

**Partners in Implementation:** Colorado Teen Driving Alliance, CDOT, Colorado Department of Public Safety, Colorado Department of Revenue, Drive Smart Colorado, AAA Colorado, regional emergency medical advisory councils (RETACs), LPHAs, local motor vehicle safety coalitions

## Older Adult Fall Prevention

For adults ages 65 years and older, falls are the leading cause of nonfatal injuries, hospital admissions for trauma and injury death.<sup>26</sup> Each year, an average of 400 Coloradans ages 65 years or older die from fall-related injuries and more than 10,000 are hospitalized for nonfatal injuries.

### LONG-TERM OUTCOME MEASURE:

- **By 2019, decrease the rate of fall-related hospitalizations among adults ages 65 and older in Colorado from 1,263 hospitalizations per 100,000 population in 2013 to 1,136.7 hospitalizations per 100,000 population.** (Data source: Colorado Hospital Association)

### STRATEGY:

1. **Increase the number of organizations that offer evidence-based fall prevention programs and increase the number of health care providers who make successful referrals to evidence-based community fall prevention programs.**

**Objective 1:** By 2018, 70 organizations will offer a minimum of two evidence-based fall prevention programs per year. (Data source: CDPHE Falls Prevention Database)

**Baseline:** 19 organizations in 2013

**Objective 2:** By 2018, the number of older adults who participate in evidence-based fall prevention programs will increase to 2,000. (Data source: CDPHE Falls Prevention Database)

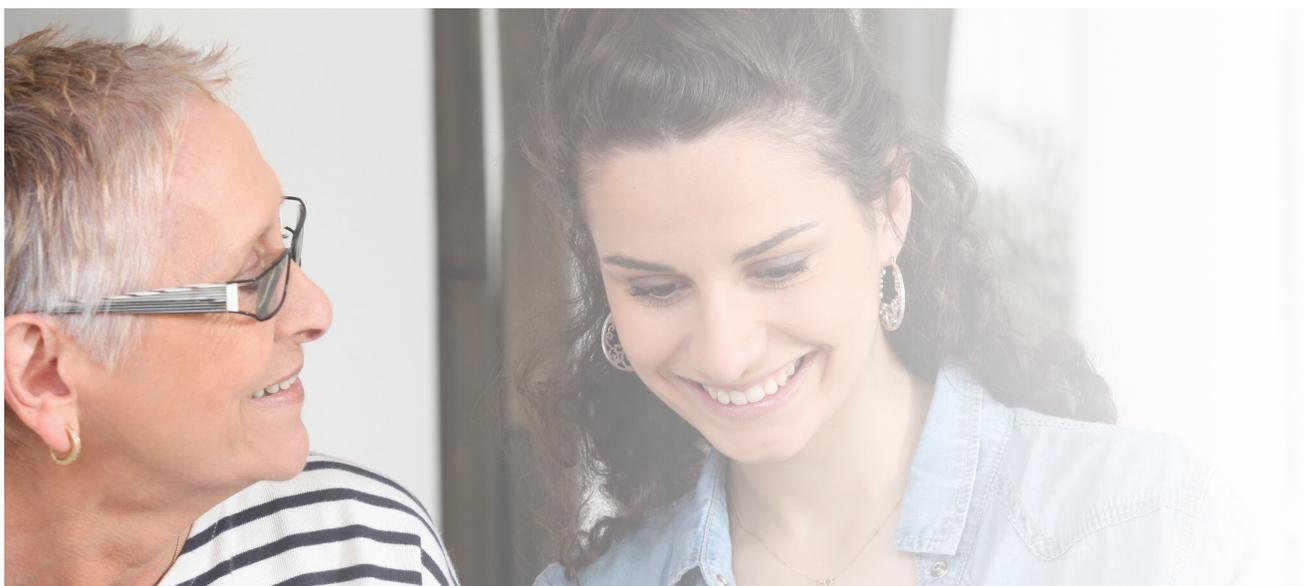
**Baseline:** 424 older adults in 2013

**Objective 3:** By 2018, the number of older adults participating in evidence-based fall prevention programs who report being referred by health care providers will increase to 500. (Data source: CDPHE Falls Prevention Database)

**Baseline:** 25 older adults in 2013

**Coordinating Agency:** CDPHE

**Partners in Implementation:** CDHS State Unit on Aging, HealthOne Hospital System, Centura Hospital System, YMCAs, Senior Centers, Regional Emergency Medical Advisory Councils, Tri-County Health Department, Fall Prevention Network, Parks and Recreation Centers.



1 Colorado Health Statistics and Vital Records