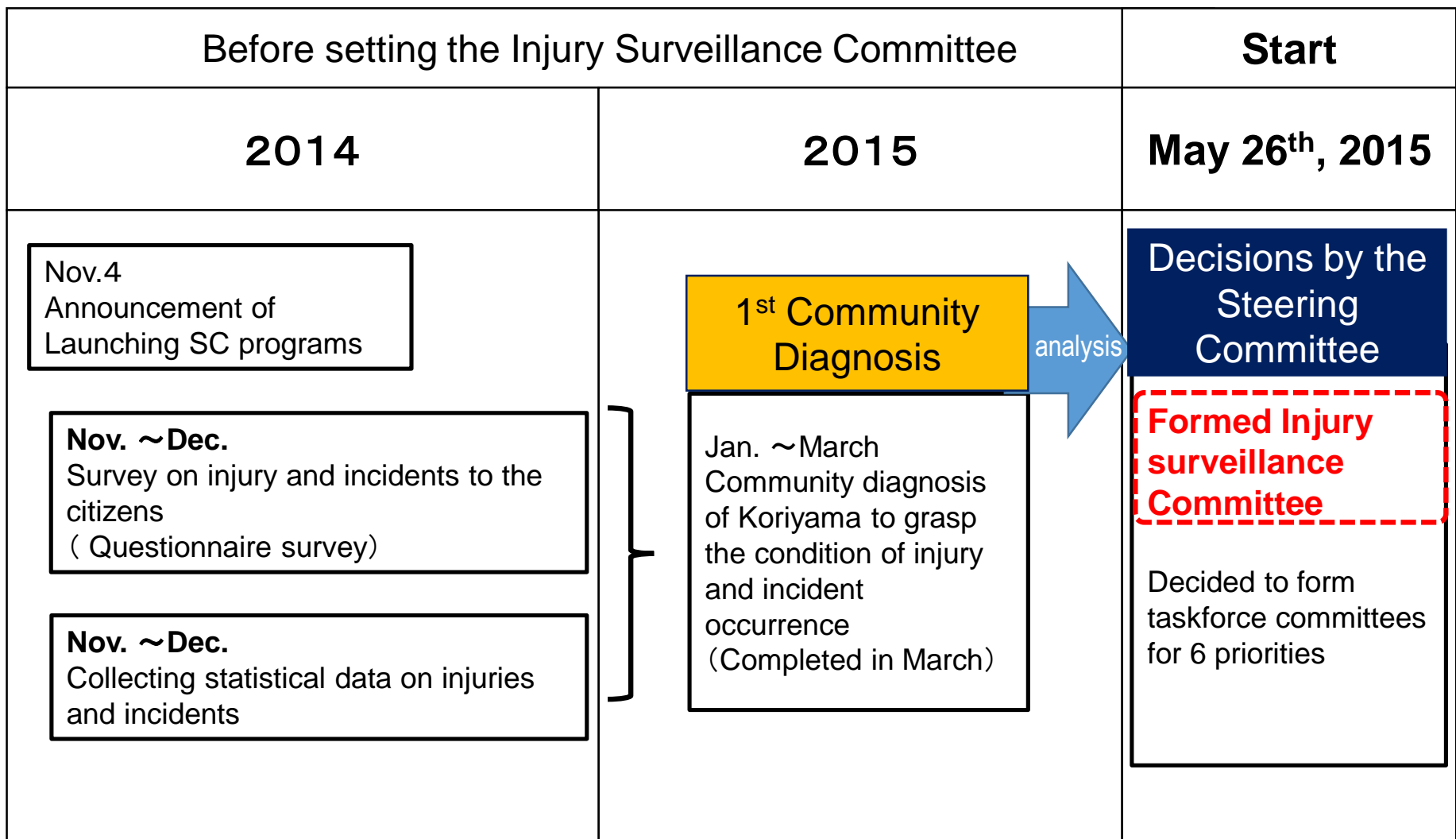# Injury Surveillance Committee

Presented by Dr. Teranishi Yasushi, Chair

1 Footprints of Injury surveillance Committee up to Today

Fig. 1

Before setting the Injury Surveillance Committee		Start
2014	2015	May 26th, 2015

Nov.4
Announcement of
Launching SC programs

Nov. ～Dec.
Survey on injury and incidents to the citizens
（ Questionnaire survey）

Nov. ～Dec.
Collecting statistical data on injuries and incidents

1st Community Diagnosis

analysis

Jan. ～March
Community diagnosis of Koriyama to grasp the condition of injury and incident occurrence
（Completed in March）

Decisions by the Steering Committee

Formed Injury surveillance Committee

Decided to form taskforce committees for 6 priorities

1

2 Necessities of Injury Surveillance Committee

Necessity① To make efficient data collections and analysis

At the 1ˢᵗ community diagnosis in 2014, **SC secretariat(Section of SC promotion in the city government) was in charge, but it was not efficient.**

Only SC secretariate was in charge of data collection and analysis（Section of SC promotion in the city government

Fig.2

**Identify who has what data
Ask to provide data**

Police

Fire Department

Public Health Center

Others

Not familiar with works with data by checking definitions & codes

Secretariat collected data and made analysis

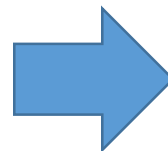Need expertise for each fields

Not effective

2

Necessity② For sustainable data collection and analysis

Seven Indicators

1. An infrastructure based on partnership and collaborations, governed by a cross- sector group that is responsible for safety promotion in their community
2. Long-term, sustainable programs covering genders and all ages, environments, and situations
3. Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups
4. **Programs that are based on the available evidence**
5. **Programs that document the frequency and causes of injuries**
6. **Evaluation measures to assess their programs, processes and the effects of change**
7. On-going participation in national and international Safe Communities networks

To make the practice of Indicator 4-6 efficient and sustainable, SC secretariat cannot make enough performance

Set up Injury Surveillance Committee
Decided by The Steering Committee（May, 2015）

3

３　Responsibility of Injury Surveillance Committee

Role **1** <u>**Data collection and analysis**</u> on injuries & incidents **(Ind.4 & 5)**

　　○Development of the sustainable structure for data collection
　　○Comparison among nation and prefecture, and Koriyama city
　　○Comparison by age group and area etc.

Role **2** <u>**Assessment**</u> of SC programs**(Ind.4 & 6)**

　　○Is data collected for programs appropriate as evidence ？
　　○Is measure of evaluation of the programs appropriate ?
　　○Is index appropriately set up?

Role **3** <u>**Advices for SC programs**</u> based on data analysis**(Ind.4 & 6)**

　　○Advise to the steering committee and taskforce committees

３　Responsibility of Injury Surveillance Committee

Table 1

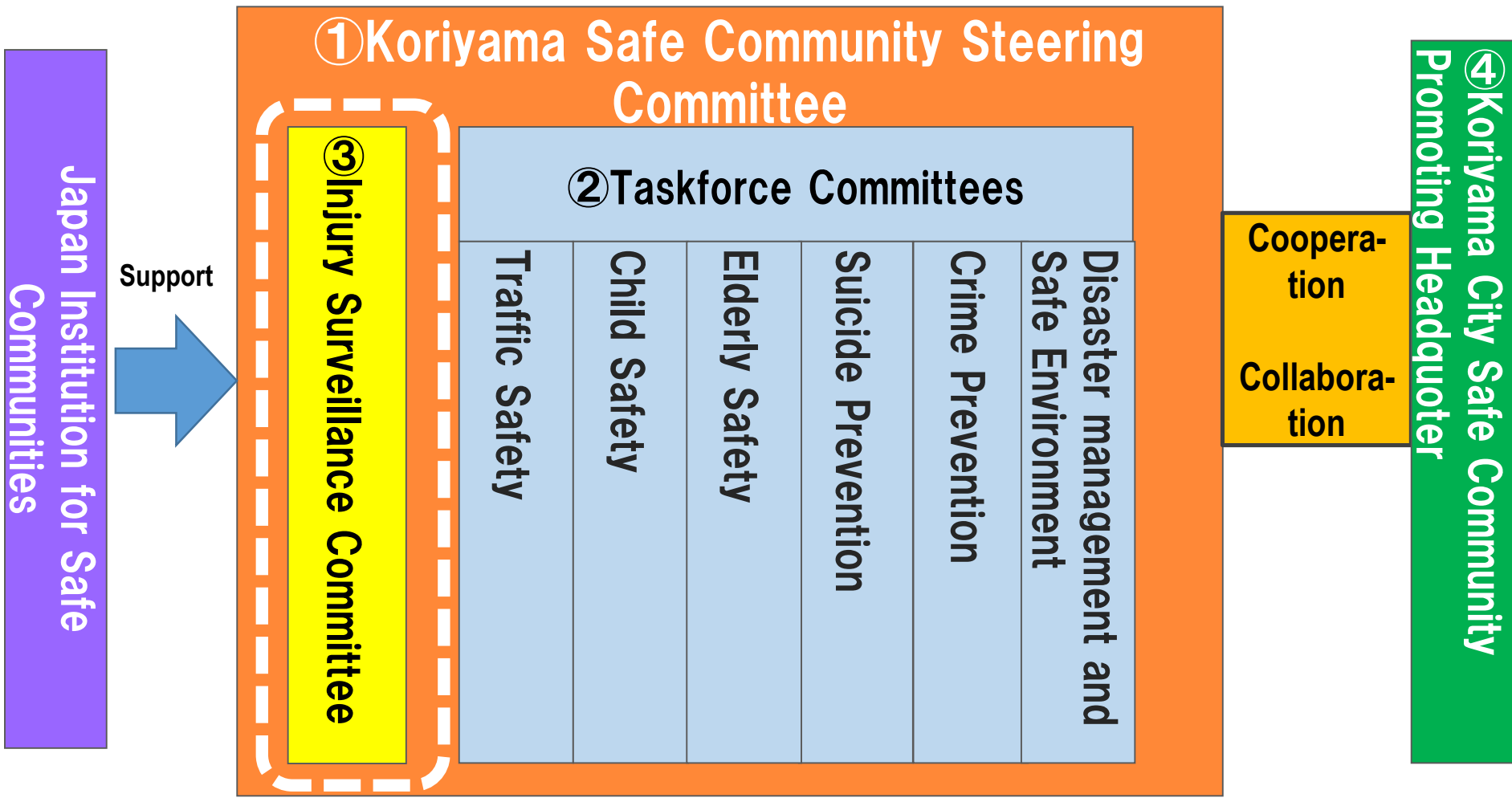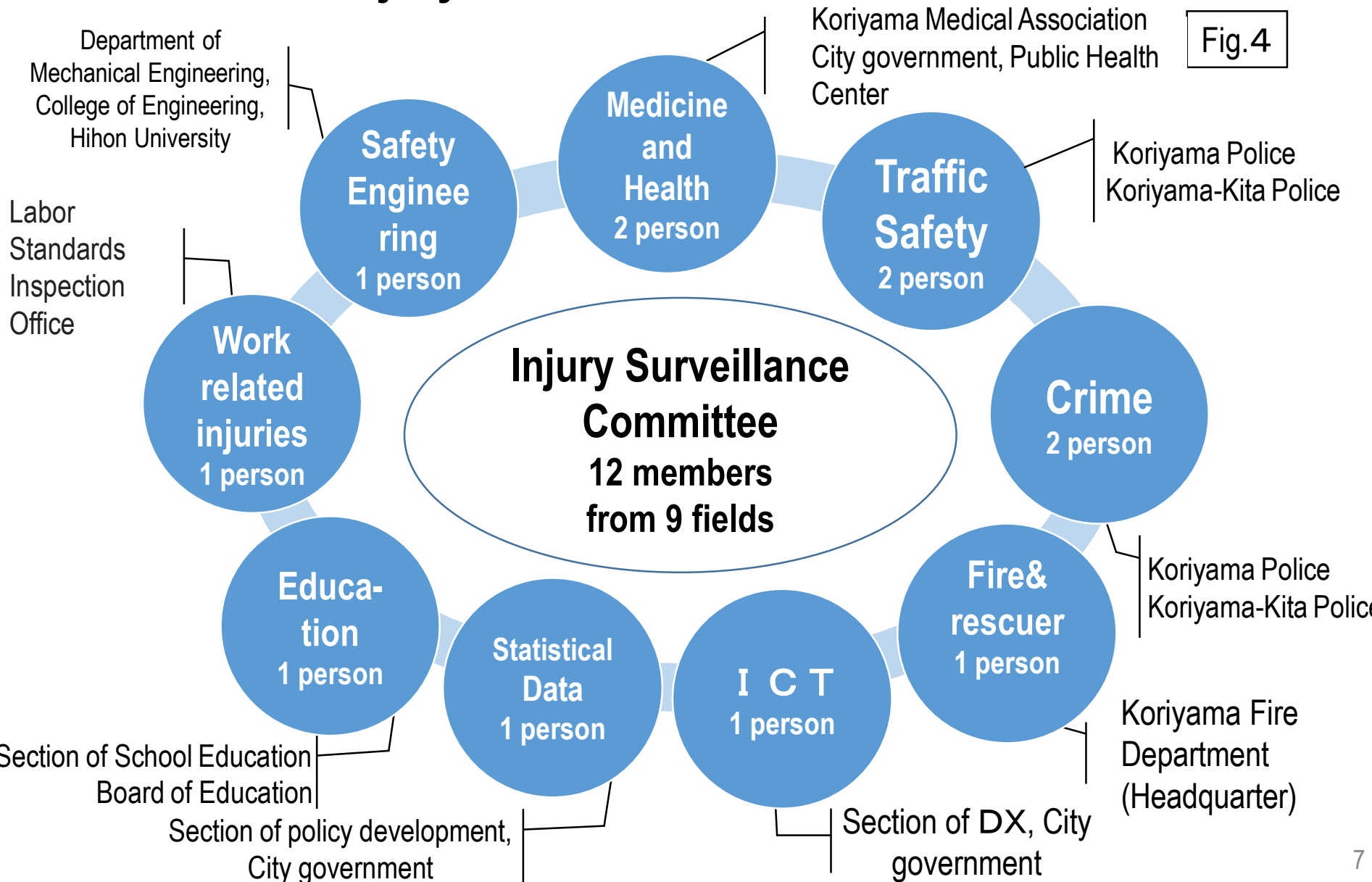| 2014	Nov.4　　Announcement of Launching SC programs	1st Community diagnosis
2015	May 26　Formed SC Steering Committee Formed Injury Surveillance Committee July 8　　Formed Taskforce Committees	
2016	Nov.7〜9　Pre-on-site evaluation	2nd Community diagnosis
2017	Nov.8〜10 On-site evaluation	
2018	**Feb. 2　International Designation**	3rd Community diagnosis
2019		
2020	※ Pandemic of Covid 19	4th Community diagnosis
2021	Nov. 15〜16　Pre-on-site evaluation	
2022	Nov. (planed)　On-site evaluation	5th Community diagnosis

Effectiveness

4 Position of the Committee

Fig.3

4 Structure of Injury Surveillance Committee

Fig.4

Department of Mechanical Engineering, College of Engineering, Hihon University

Koriyama Medical Association
City government, Public Health Center

Labor Standards Inspection Office

Koriyama Police
Koriyama-Kita Police

Safety Engineering
1 person

Medicine and Health
2 person

Traffic Safety
2 person

Work related injuries
1 person

Injury Surveillance Committee
12 members
from 9 fields

Crime
2 person

Education
1 person

Statistical Data
1 person

ＩＣＴ
1 person

Fire& rescuer
1 person

Koriyama Police
Koriyama-Kita Police

Koriyama Fire Department (Headquarter)

Section of School Education
Board of Education

Section of policy development, City government

Section of ＤＸ, City government

4 Structure of Injury Surveillance Committee

Member List

Table2

Fields and Affiliations			Position
1	Medical/Health	Koriyama Medical Association	Vice Chair
2	Safety Engineering	College of Engineering, Nihon University	Professor, Department of Mechanical Engineering
3	Work related injuries	Koriyama Labor Standards Inspection Office	Section manager, Section of Safety and Health
4	Traffic Incidents	Koriyama Police	Manager, Section of Traffic #1
5	Crimes	Koriyama Police	Manager, Section of Life Safety
6	Traffic incidents	Koriyama Kita Police	Manager, Section of Traffic
7	Crimes	Koriyama Kita Police	Manager, Section of Life Safety
8	Fire and first aid	Koriyama Fire Department	Chief
9	Statistic Data	Koriyama City	Manager, Section of Policy Development
10	ＩＣＴ	Koriyama City	Manager, Section of Digital Transformation
11	Medical/Health	Koriyama City Public Health Center	Manager, Section of General Affairs
12	Education	Koriyama City Board of Education	Manager, Section of school education

8

4 Structure of Injury Surveillance Committee

Members lead data collection and analysis with their collogues beside attend the meetings
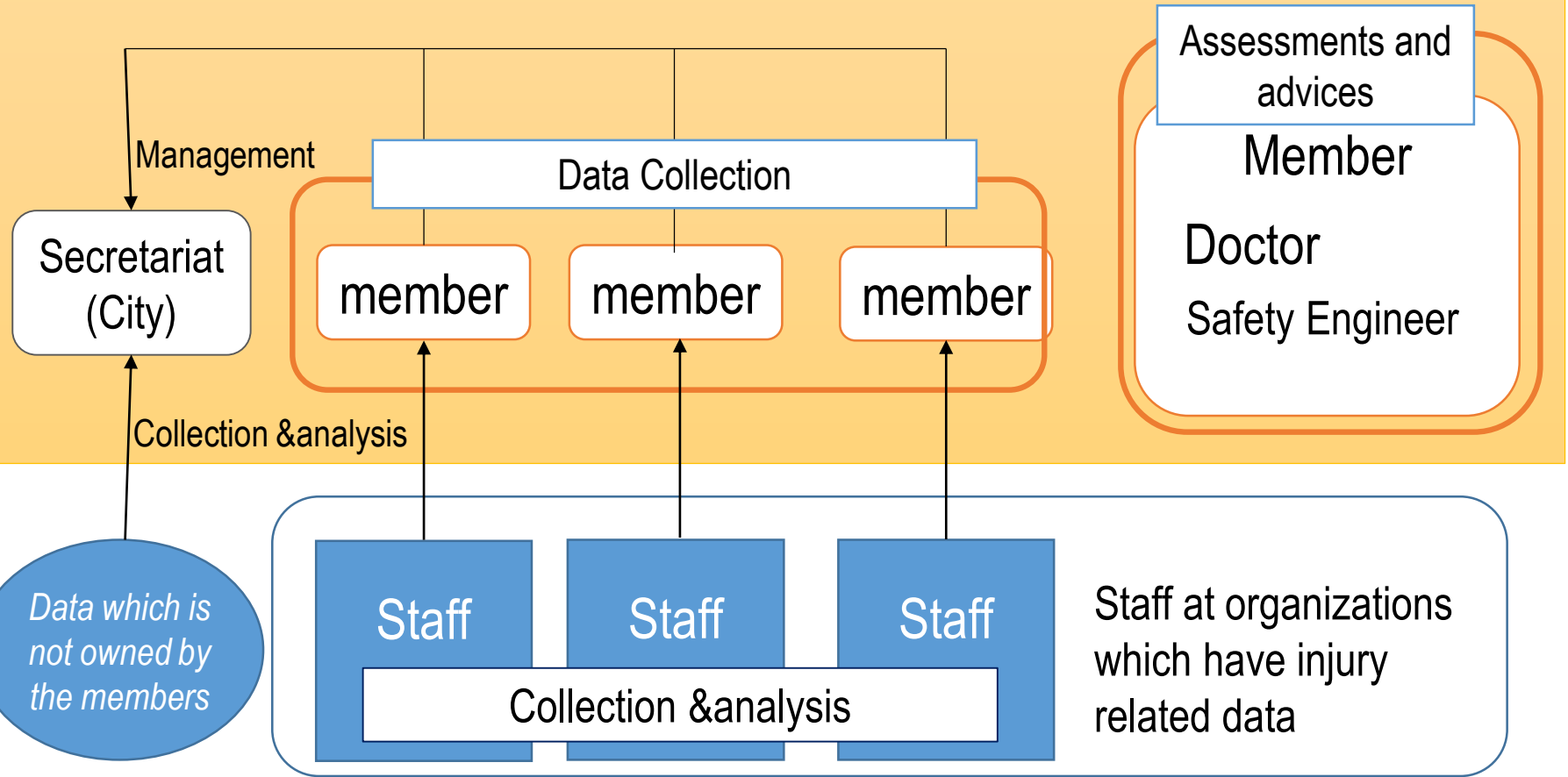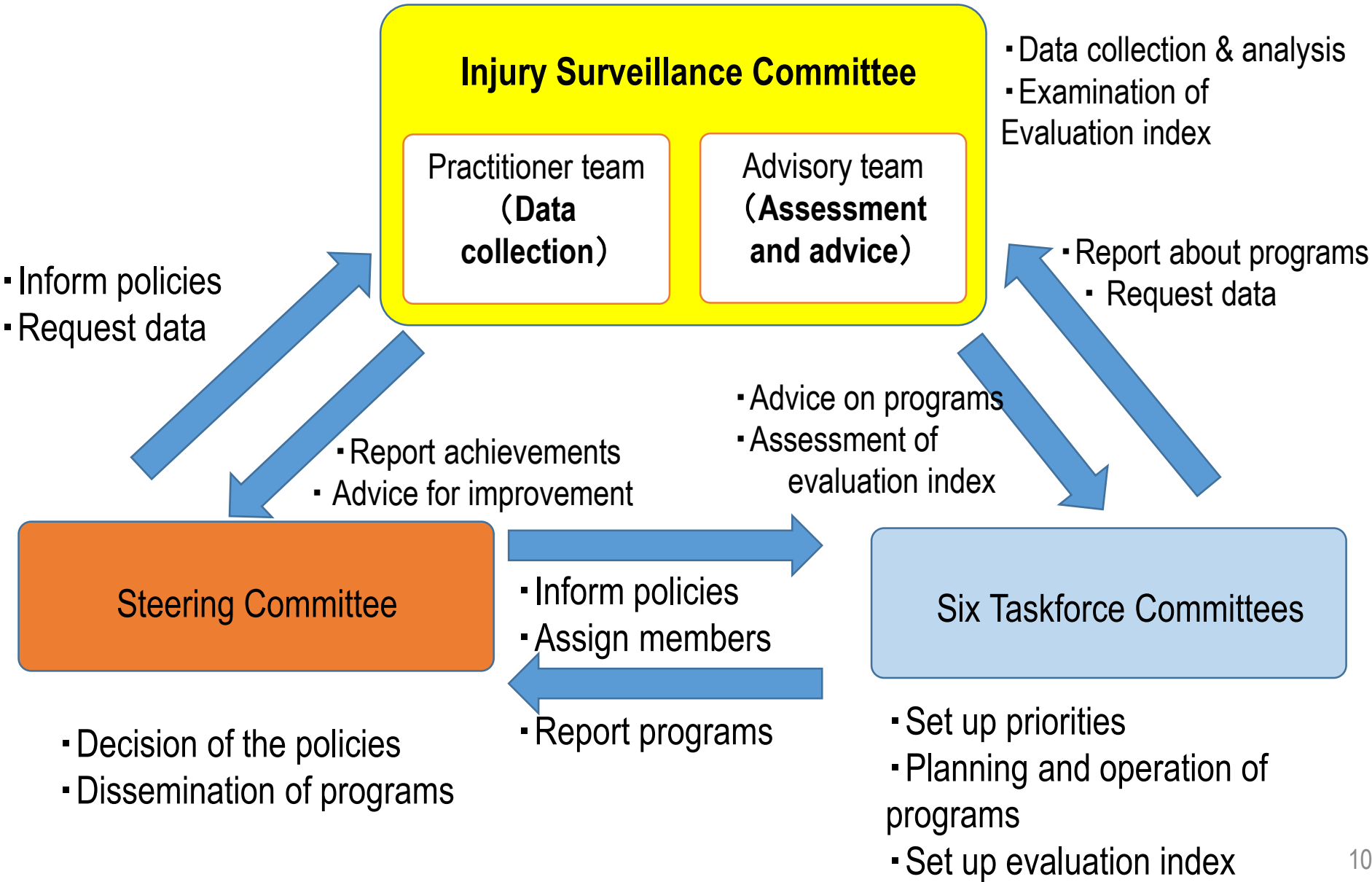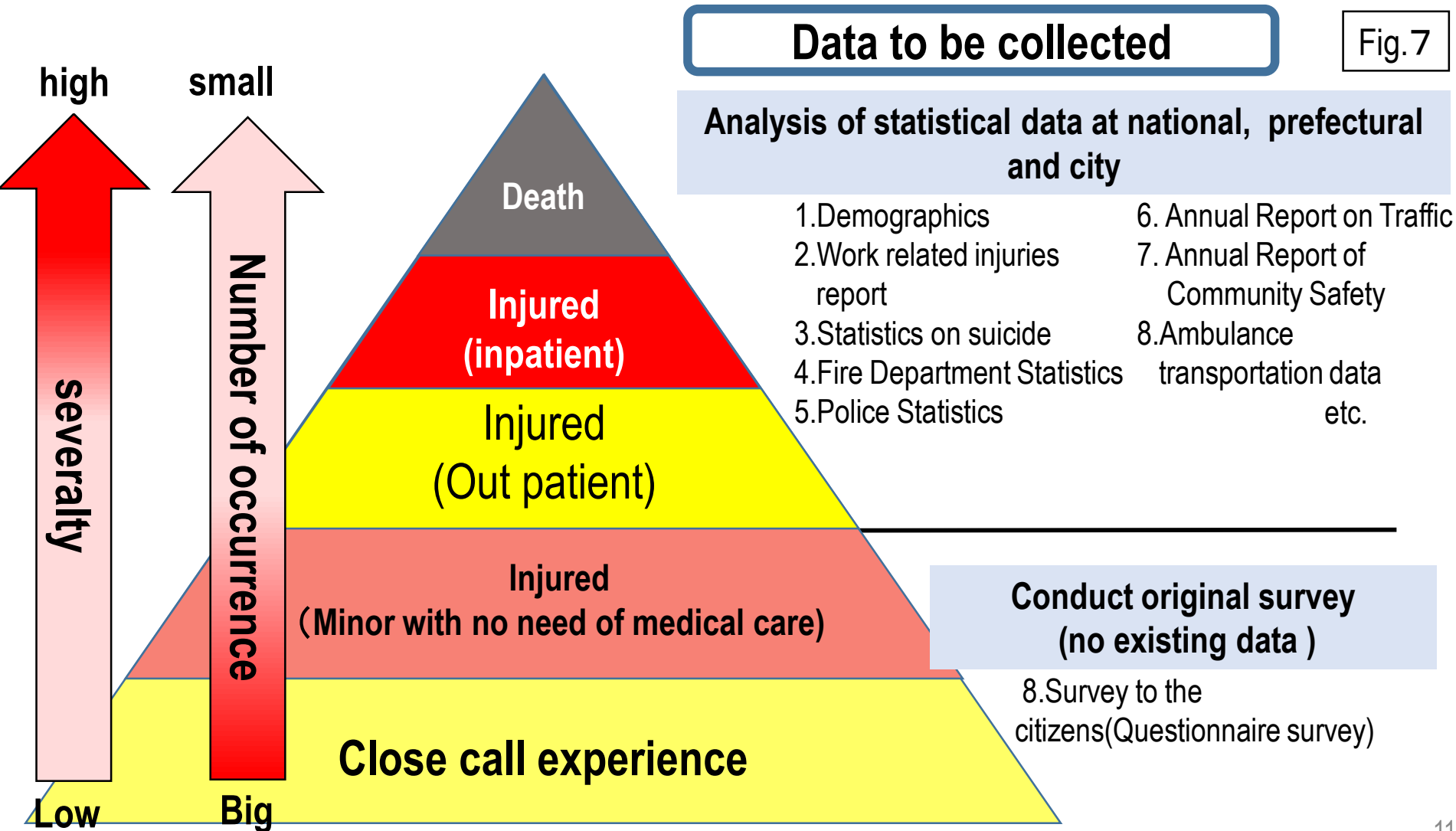
Fig.5

Injury Surveillance Committee

Management

Secretariat
(City)

Data Collection

member   member   member

Collection &analysis

Assessments and advices

Member

Doctor

Safety Engineer

Data which is not owned by the members

Staff   Staff   Staff

Collection &analysis

Staff at organizations which have injury related data

9

Correlation diagram

Fig.6

Injury Surveillance Committee

Practitioner team（**Data collection**）

Advisory team（**Assessment and advice**）

・Data collection & analysis
・Examination of Evaluation index

・Inform policies
・Request data

・Report about programs
・Request data

・Report achievements
・Advice for improvement

・Advice on programs
・Assessment of evaluation index

Steering Committee

・Inform policies
・Assign members

Six Taskforce Committees

・Report programs

・Decision of the policies
・Dissemination of programs

・Set up priorities
・Planning and operation of programs
・Set up evaluation index

10

5 Data Collection

Identify Profile of Injury and Incident Occurrence

Data to be collected

Fig.7

Analysis of statistical data at national, prefectural and city

1. Demographics
2. Work related injuries report
3. Statistics on suicide
4. Fire Department Statistics
5. Police Statistics
6. Annual Report on Traffic
7. Annual Report of Community Safety
8. Ambulance transportation data etc.

Conduct original survey (no existing data)

8. Survey to the citizens(Questionnaire survey)

high   small

severalty ← Number of occurrence

Death

Injured (inpatient)

Injured (Out patient)

Injured （Minor with no need of medical care)

Close call experience

Low   Big

11

Main data used by taskforce committees

Table3

Frequency	Data	Traffic Safety	Child Safety	Elderly Safety	Suicide Prevention	Crime Prevention	Disaster management and Environment
Yearly	1 Demographics			●	●		
	2 Work related injuries report						●
	3 Statistics on suicide				●		
	4 Fire Department Statistics			●			●
	5 Police Statistics	●				●	
	6 Annual Report of Traffic	●	●	●			
	7 Annual Report of Community Safety					●	
	8 Ambulance transportation data	●	●	●	●	●	●

12

Data used by taskforce committees(except injuries)

Table4

Frequency	Data	Traffic Safety	Child Safety	Elderly Safety	Suicide Prevention	Crime Prevention	Disaster management and Environment
Monthly	Survey on illegal barkers					●	
Yearly	Survey on support services to the elderly			●			
	Record on consultation on elderly abuse			●			
	Record on consultation on child abuse		●				
	Record on consultation on abuse by intimate partners					●	
Bi-yearly	Questionnaire survey on attitude of the citizens	●	●	●	●	●	●

13

Medical Data

Table 5

～Project to promote health of citizens at all ages with SDGs promotion ～
Good use of joint study with Fukushima prefecture Medical University

Comprehensive Collaboration Agreement with Fukushima Prefecture Medical University on promotion of SDGs on March 12, 2021

University analyzes medical related information provided by Koriyama City. The City makes good use of the results from the various viewpoints to extent the healthy life expectancy and solve health inequality in collaboration with Safe Community programs which aims to make the city where all citizens can live in good health.

No	Data	No	Data
1	medical prescription of National Health Insurance	12	Lung cancer screening
2	special health check-up	13	Colorectal cancer screening
3	Information about the insured of the Medical Care System for Older Senior Citizen	14	Breast cancer screening
4	medical prescription of the Medical Care System for Older Senior Citizen	15	Cervical cancer screening
5	Health check under the Medical Care System for Older Senior Citizen	16	Infant health checkup（18 months old and 3 years old）
6	Information of Long-term care certification etc.	17	Participants to the programs for senior friendly housing
7	Opinion of home doctors	18	Student list of Asaka Academy
8	List of Certification of Needed Long-Term Care	19	Participants of healthy longevity support programs
9	Questionnaire of Long-term care prevention	20	Physical check up of participants to socializing programs (Active 100 years exercise)
10	medical prescription of Long-Term Care insurance	21	osteoporosis screening
11	Gastric cancer screening		

Refer the results of analysis

14

6 Efforts after Designation

Table6

#	Date	Contents of the meetings
1	Aug. 20, 2018	● Study on the discussion about programs by the taskforce committees ● Confirmation of data which are required by the taskforce committees ● Discussion on methods of the 3rd community diagnosis
2	May 31, 2019	● Analysis of the 3rd Community diagnosis ● Analysis of the programs by the taskforce committees ● Discussion on launching Safe Community Awards
3	Nov. 12, 2019	● **Judge for Safe Community Awards**
4	July 30, 2020	● Discussion on contents of the 4th questionnaire survey for community diagnosis
5	Oct., 29, 2020	● **Judge for Safe Community Awards**

6 Efforts after Designation

Table7

#	Date	Contents of the meetings
6	April 14, 2021	● Assessment of the programs by the taskforce committees ● Analysis of the 4th Community Diagnosis
7	May 24, 2021	● Confirmation of the taskforce committees
8	Aug., 19, 2021	● Confirmation about the evaluation methods of the programs by the taskforce committees
9	Oct. 20, 2021	● Discussion on the structure of the steering committee and new problems or challenges ● Judge for the Safe Community Awards

6 Efforts after Designation

6 Efforts after Designation

① Revision of questionnaire sheets for community diagnosisし

【Targets】
Individual version: 8,800 citizens, Household version: 4,000 households

【Revisions 】

Table8

In 2014（First time）	In 2018 and later
Individual : 16 questions basic attribute, attachment to the community, means of going out, wariness, health condition etc.	**Individual:34 questions** basic attribute, traffic safety, children and elderly safety, suicide, crime prevention, preparedness for disasters etc.
Household: 18 questions Basic attribute, participation to community activities, injuries of family members, preparedness for disasters etc.	**Household: 10 questions** basic attribute, injuries of family members, crime prevention, preparedness for disasters etc.

Improvements
- Revised questions to make clear relations to challenges by the taskforce committee
- Added questions to make year to year comparisons

① Revision of questionnaire survey for community dlagnosis

4th Questionnaire survey to the citizens （**individuals: 34 questions**）
①Traffic Safety ②Child safety ③Elderly Safety ④Suicide Prevention ⑤Crime Prevention ⑥Disaster Management &Environment

Table9

Questions	Contents	Taskforce
1～5	Basic information (gender, age group, family structure etc.)	-
6	Number of people to whom you can confess hardship	-
7	Degree of safety of Koriyama by citizens	-
8～9	About Safe Community	-
10	Injuries and incident which make the citizen worried about	①②③④⑤⑥
11	participation to community activities	⑤⑥
12	Socialization with neighbors and other citizens	⑤
13～16	Manners of bicycle rides and returning driving licenses	①
17～21	Child abuse	②
22～23	Dementia of the elderly	③
24～27	Awareness of counseling services for suicide prevention	④
28～29	Crime prevention and domestic violence	⑤
30～31	Illegal barkers	⑤
32～33	Participation to disaster management activities	⑤
34	Injuries and incidents while farming (home gardening)	⑥

19

① Revision of questionnaire survey for community diagnosis

4th Questionnaire survey to the citizens （**Household: 10 questions**）

Table1

①Traffic Safety ②Child safety ③Elderly Safety ④Suicide Prevention ⑤Crime Prevention
⑥Disaster Management &Environment

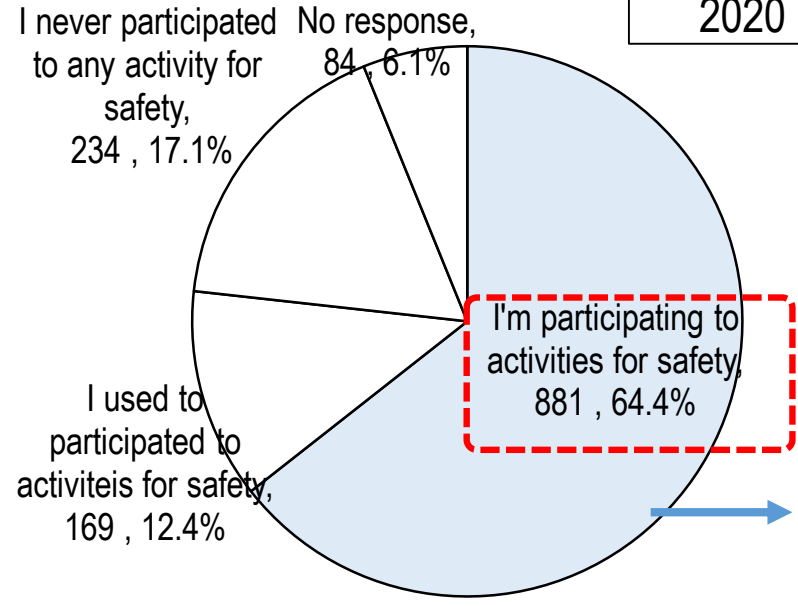| Questions	Contents	Taskforce
1	Basic information	-
2	(gender, age group, family structure etc.)	
3	Activities for safety	①②③④⑤⑥
4	Spots which people worry about injury occurrence at home	②③
5	Place of injury occurred at home	②③
6	Measures for crime prevention at home	⑤
7	Preparedness for disaster at home	⑥
8〜9	Relation to the volunteer fire brigade	⑥
8	Injuries and incidents which cause injuries of family members	①②③⑤⑥

② **Continuous data collection**

【Some result of questionnaire survey】
Safe behaviors on Traffic Safety

Fig.9

2018

No response, 90 , 7.3%

I never partisipated to any activity for safety, 296 , 23.9%

I'm participating to activities for safety, 603 , 48.7%

I used to participate to activities for safety, 249 , 20.1%

I never participated to any activity for safety, 234 , 17.1%

No response, 84 , 6.1%

2020

I'm participating to activities for safety, 881 , 64.4%

I used to participated to activiteis for safety, 169 , 12.4%

Increase by 15.7 points

Advises by the Surveillance Committee
- Need study on the concrete details about the response "I am taking (safety behavior"
- Questionnaire survey by on-line

③ Proposals to taskforce committees based on community diagnosis

【**Advices to the taskforce committees**】

Table11

Common for all taskforce committees	● Around half of the evaluations are not recorded yet, to evaluate the achievements, **the methods to recognize changes in awareness and behavior** should be discussed. ● It is important to keep eyes on the trend of data carefully since the community diagnosis reveals various impacts by Covid 19. ● As for the questionnaire to evaluate the programs, on-line should be considered.
Traffic Safety	● In addition to the number of the incidents, **details of each incident** should be examined. ● Although it is not possible for the taskforce committee to approach to the environmental changes, **it should make proposals to the authorities** about improvement of the structures of intersections which have frequent incidents upon the analysis of causes of incidents and volume of traffic.
Elderly Safety	● With growing population of the elderly, it is expected that their safety will become more serious social issues. Therefore, not only the morbidity of the elderly, but also **the proportion of the elderly population should be considered** at the evaluation of the exercise for care need prevention.

③ Proposals to taskforce committees based on community diagnosis

【**Advices to the taskforce committees (Continued from the previous slide**】　Table12

Suicide Prevention	● Since not many citizens know about the counseling services, it is important to access how the information materials are used. ● It should be discussed how to deliver the information to the citizens who are in hardships. ● Mortality from suicide is expected to grow due to Covid19, related data should be prepared to **improve counseling services.**
Disaster Management &Environment Safety	● Although it has been difficult to organize educational programs due to Covid 19, considering that no one knows when we get hit by natural disasters, we should keep working on **providing the programs by on-line**

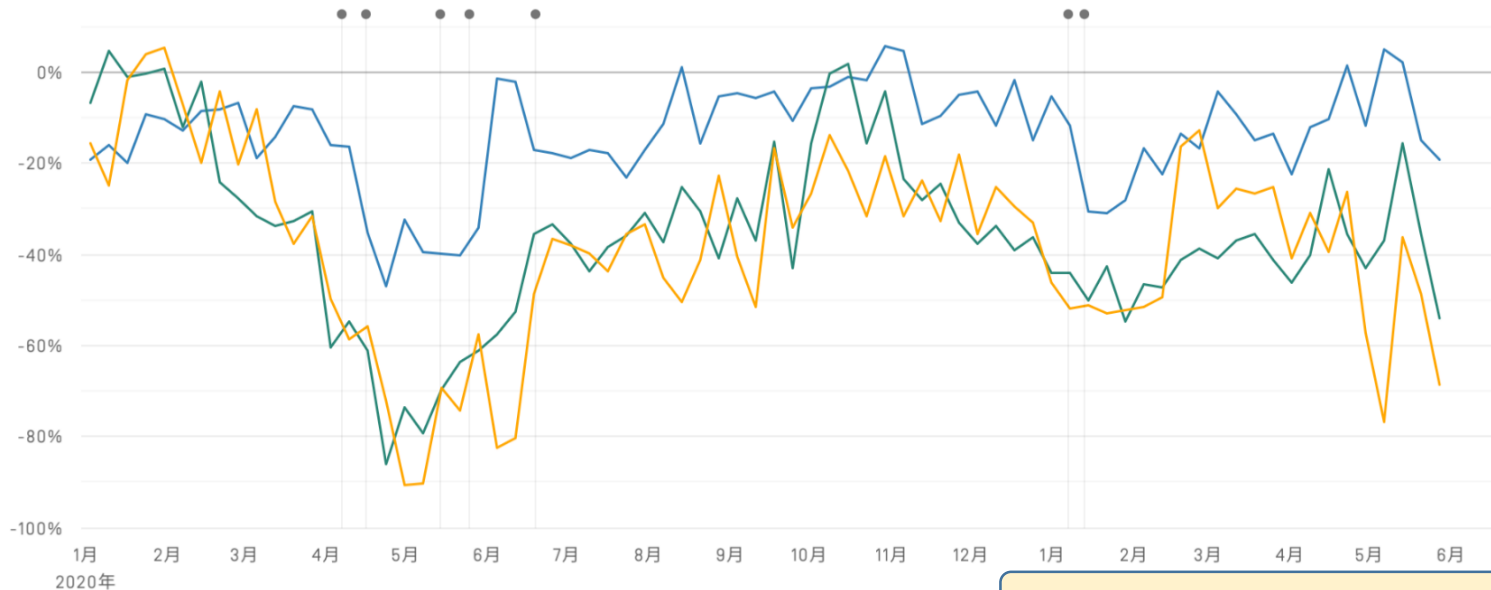## ④ Response to the advices

【**Response by taskforce committees**】

Proposal
- It is important to keep eyes on the trend of data carefully since the community diagnosis reveals various impacts by Covid 19

Trend of number of people at Koriyama Station in 2019 (in comparison)

Fig.10

People live ■ in the city ■ in the prefecture ■ outside of the prefecture

Response
Keep close eyes on impacts of Covid 19

V-RESAS   https://v-resas.go.jp   出典：株式会社Agoop「流動人口データ」

④ Response to the advices

【Response by the taskforce committee of Traffic Safety】 | Table13 |

Long Term Evaluation	2016	2017	2018	2019
Incident at intersections	628 cases	680 cases	583 cases	594 cases

Proposal
- **Details of incidents should be examined** in addition to the number of the incidents
- Upon examinations of causes of incidents and volume of traffic, **proposals on environmental modifications should be made to the organizations in authority** since the taskforce committee doesn't have the authority.

Response

By asking Koriyama Police to exam 594 traffic incidents at intersections in 2019, it was found that the collisions of cars account for 86.5%, collisions car and passengers as13.1%, and single- cars incidents as 0.3%.

In addition, with information about the situations of those incidents, inspections at sites was conducted to make the proposal to the authorities.

④ Response to the advices

【**Response by the taskforce committee of Traffic Safety**】　　Fig.１１

Questionnaire on
traffic incident prevention

生徒の皆さんにお知らせしたアンケートの回答は、
こちらのＱＲコードからお願いします。

アンケート締切日　　令和３年９月１３日（月）

問合せ先：交通安全対策委員会（郡山市市民部セーフコミュニティ課）
〒963-8601　福島県郡山市朝日一丁目２３番７号
電話：024－924－2151　／　ＦＡＸ：024－921－1340
メール：safecommunity@city.koriyama.lg.jp

④ Response to the advices

【**Response by the taskforce committee of Elderly Safety**】

Proposal
- With growing population of the elderly, it is expected that their safety will become more serious social issues. Therefore, not only the morbidity of the elderly, but also **the proportion of the elderly population should be considered** at the evaluation of the exercise for care need prevention.

Response
Started to check achievements with proportion of injuries out of the population of the elderly

Revise the index for long term evaluation on the elderly safety

Table 14

		2016			2017			2018			2019			2020		
Population of the elderly		65～79	80～89	90～	65～79	80～89	90～	65～79	80～89	90～	65～79	80～89	90～	65～79	80～89	90～
		54,337	19,439	4,155	55,455	19,683	4,488	56,677	20,085	4,747	57,765	20,156	5,012	58,824	20,018	5,376
Falls	Ambulance transportation from general injuries	402	466	150	431	470	204	461	485	195	477	507	236	445	454	221
	Proportion of the elderly	0.74%	2.40%	3.61%	0.78%	2.39%	4.55%	0.81%	2.41%	4.11%	0.83%	2.52%	4.71%	0.76%	2.27%	4.11%
Suffocation	Mortality from suffocation	7	7	0	7	11	9	7	12	8	7	9	7	—	—	—
	Proportion of the elderly	0.01%	0.04%	0.00%	0.01%	0.06%	0.20%	0.01%	0.06%	0.17%	0.01%	0.04%	0.14%	—	—	—

27

④ Response to the advices

【**Response by the taskforce committee of Suicide Prevention**】

Citizens who don't know the counseling services on suicide 42.2% （community diagnosis in 2020）

Proposal
●Should assess how information materials are used considering that not many citizens
  know about the counseling services
●Should think how to convey the information to whom who need the services
●Should provide information on improvement of the services since the increase of suicide is
  expected due to Covid 19 pandemic

Response
Started to distribute leaflets about counseling services at work places and education facilities.
The leaflets has QR code to lead readers to questionnaire surveys.
At the exhibition of suicide prevention in a shopping center, conducted a survey which has
simple way to answer so that citizens can easily response when they pass by.

④ Response to the advices

【**Response by the taskforce committee of Suicide Prevention**】

Fig.12

Panel exhibition on suicide prevention at shopping Centers

Questionnaire survey
Answering to questions by putting stickers

④ Response to the advices

【**Response by Taskforce of Disaster Management and Environment**】 Table15

Activity Index	2017	2018	2019	2020
Disaster Management Education	21 times	27 times	39 times	4 times

Proposal
- Although it is difficult to organize educational programs in person due to Covid 19 pandemics, who never know when we get hit by natural disasters. Therefore, we should keep working on it by on-line.

Response
- Started on-line classes of disaster management when participants are available to access to the internet.
- In the condition of Covid 19 pandemic, contents of the programs were changed by focusing different aspects which don't require people's gathering such as collecting/sharing information in a disaster and providing on-line disaster management drills

On-line class at Jr. High School

⑤ Discussion about direction of the programs

Table16

Priorities	Comparison from the last designation	Possible risks
Incidents of the elderly	Elderly who severely injured by traffic incidents 165 in 2017 → 159 in 2020	Weakness and decline of physical strengthen by aging
Child abuse	Counseling related to abuses in Koriyama 44 in 2017 → 26 in 2020	Change of life style by Covid 19 pandemic and isolation of children
Falls of the elderly	Mortality among the elderly from falls 18 in 2017 → 20 in 2019	Weakness and decline of physical strengthen by aging Increasing number of the elderly living alone
Dementia	Proportion of the elderly with dementia 10.7 in 2015 → 10.1% in 2020	Weakened relationship with others Isolation of the elderly
Suicide	Proportion of citizens who don't know about the counseling services for suicide prevention 64.9% in 2016→ 42.2% in 2020	Change of life style and isolation by Covid 19 pandemic
Domestic Violence	Counseling about DV in Koriyama 68 cases in2017→61 cases in 2019	
Disaster management	Citizens who never participate to disaster management drills 75.3% in 2018 → 77.8% in 2020	Weekended relation with others Disasters caused by the climate changes

Koriyama

⑥ Judge of Safe Community Awards

Fig.13

Bandana presentation ceremony at Traffic Safety parade
<Azumi district Traffic Safety council>

Watch over children
<Oshima district crime prevention association>

Student safety at commuting
<Oyamada District Crime prevention association>

Activities for Traffic Safety in Covid 19
<Koriyama Kita District traffic safety council Atami branch>

Delivering messages "Letter Command"
< Koriyama Kita District traffic safety council Tadano branch >

Support safety at school activity
"Community adventure"
<Koriyama City East part female association>

Video clip of injury prevention by student health committee
<Koriyama City Kaoru elementary school>

Stop signs at high risk spots
<Koriyama District Traffic Safety Association, Kaisei branch>

Call for frail prevention to the elderly who stay home
<Azumi district social welfare council>

⑦ Safe Community activieis in the Covid 19 Pandemic

Providing important information including prevention of being effected and increasing severity of Covid-19 affection through YouTube. Especially, providing information on how to promote physical strengthen among the elderly.

Koriyama Official YouTube   https://youtu.be/rM54NX_r1fE

Fig.14

sign language interpreter

Subtitle

33

7 Achievements and Challenges

Achievements

①**Set up priorities and index for activity evaluation upon data analysis**

②**Set up indicators for Output & Outcome evaluation which have made us able to access changes in the awareness and attitude of citizens**

Challenges

①**Build S+PDCA Cycle in the community activities**

②**Promotion of Digital Transformation in Safe Community programs**

8 Actions for the future

① Evaluate the interventions and improvement by the taskforce Committees

② Data Collection and analysis makes the SC promoting bodies able to identify possible risks and develop measures in the future

Make our society sustainable and reach SDGs by Safe Community programs

Thank you for your attention

Injury Surveillance Committee