

Injury Surveillance Committee







Presented by Dr. Teranishi Yasushi, Chair



1 Footprints of Injury surveillance Committee up to Today

Fig. 1

Before setting the Injur	Start	
2014	2015	May 26 th , 2015
Nov.4 Announcement of Launching SC programs	1 st Community Diagnosis	Decisions by the Steering Committee
Nov. ~Dec. Survey on injury and incidents to the citizens (Questionnaire survey)	Jan. ~March Community diagnosis of Koriyama to grasp the condition of injury	Formed Injury surveillance Committee
Nov. ~Dec. Collecting statistical data on injuries and incidents	and incident occurrence (Completed in March)	Decided to form taskforce committees for 6 priorities

Koriyama

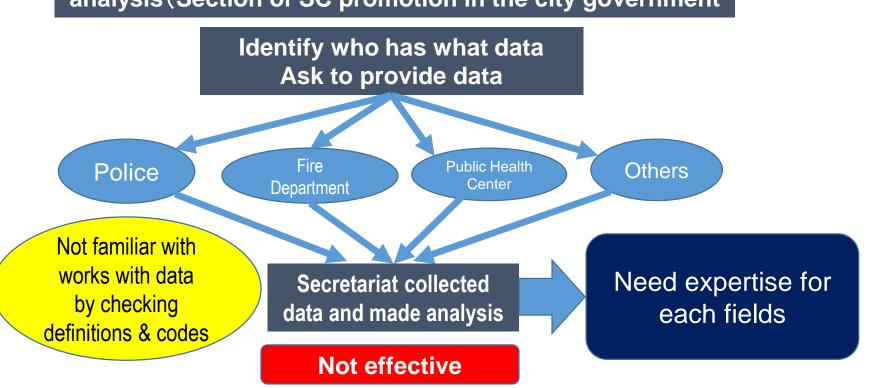
2 Necessities of Injury Surveillance Committee

Necessity 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







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 Responsibility of Injury Surveillance Committee

- Role 1 Data collection and analysis on injuries & incidents (Ind.4 & 5)
 - ODevelopment of the sustainable structure for data collection
 - OComparison among nation and prefecture, and Koriyama city
 - OComparison by age group and area etc.
- Role 2 Assessment of SC programs(Ind.4 & 6)
 - Ols data collected for programs appropriate as evidence ?
 - Ols measure of evaluation of the programs appropriate?
 - Ols index appropriately set up?
- Role 3 Advices for SC programs based on data analysis (Ind.4 & 6)
 - OAdvise to the steering committee and taskforce committees



3 Responsibility of Injury Surveillance Committee

2014	Nov.4 Announcement of Launching SC program	ns	1 st 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 Effective	enes	SS
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. 8∼10 On-site evaluation		5th Community diagnosis



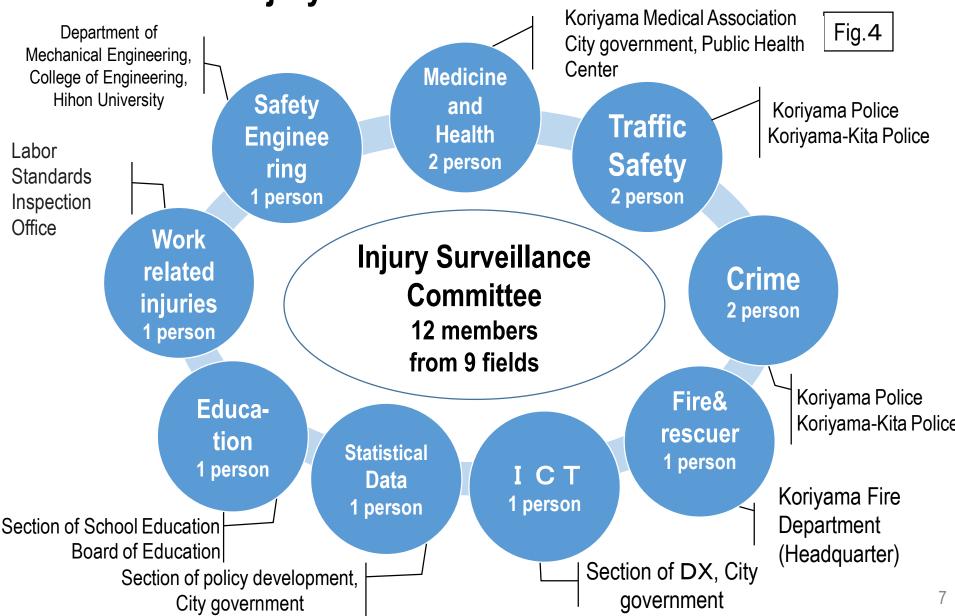
4 Position of the Committee

Fig.3





4 Structure of Injury Surveillance Committee





Structure of Injury Surveillance Committee

Member List

	Fields a	nd Affiliations	Position
1	Medical/Health	Koriyama Medical Association	Vice Chair
2	Safety Engineering	College of Engineering, Nihon University	Professor, Department of Mechanical Engineering
3		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

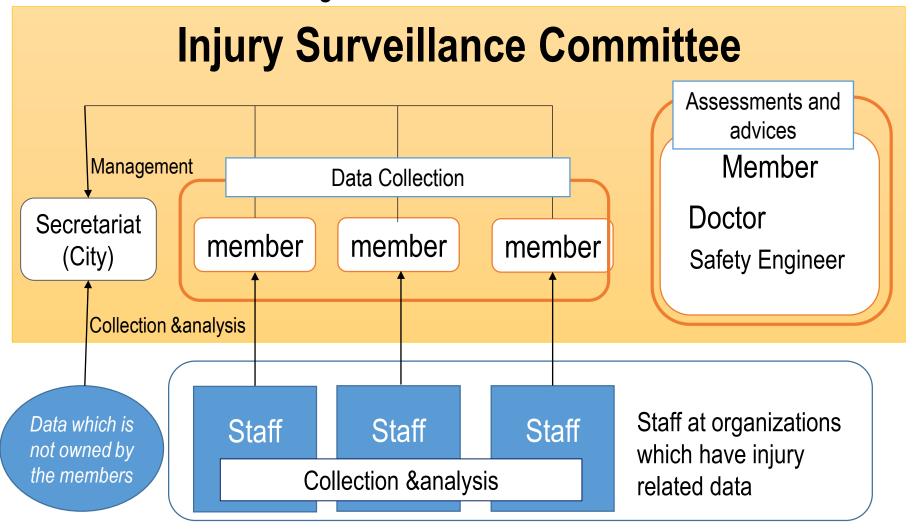




4 Structure of Injury Surveillance Committee

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

Fig.5





Correlation diagram

Fig.6

Injury Surveillance Committee

Practitioner team
(Data
collection)

Advisory team (Assessment and advice)

- Data collection & analysis
- Examination of Evaluation index
 - Report about programs
 - Request data

- Inform policies
- Request data

- Report achievements
 - Advice for improvement

- Advice on programs
- Assessment of evaluation index

Steering Committee

- Decision of the policies
- Dissemination of programs

- Inform policies
- Assign members
- Report programs

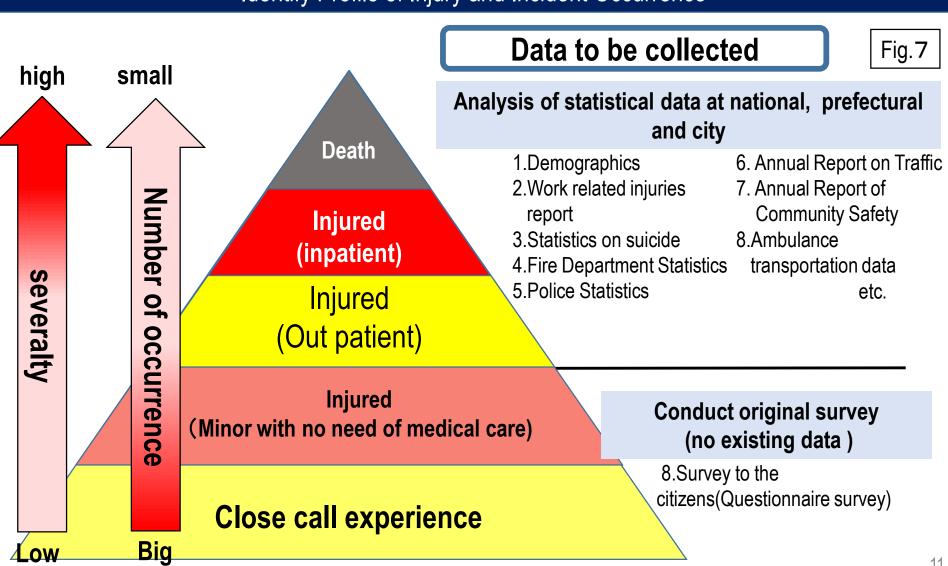
Six Taskforce Committees

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



5 Data Collection

Identify Profile of Injury and Incident Occurrence





Main data used by taskforce committees

Frequen cy	Data	Traffic Safety	Child Safety	Elderly Safety	Suicide Prevention	Crime Prevention	Disaster management and Environment
	1 Demographics			•			
	2 Work related injuries report						
Yearly	3 Fire Department Statistics			•			
	4 Police Statistics					•	
	5 Ambulance transportation data		•	•	•		
biannually	6 Questionnaire surrey on citizens' attitudes						



Data used by taskforce committees(except injuries)

Frequency	Data	Traffic Safety	Child Safety	Elderly Safety	Suicide Preventi on	Crime Preventi on	Disaster management and Environment
Monthly Survey on illegal barkers							
	Survey on support services to the elderly						
Yearly	Record on consultation on elderly abuse			•			
	Record on consultation on child abuse		•				
	Record on consultation on abuse by intimate partners						



Medical Data

∼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.

	date definition by programs which aims to make the city where an oldzens 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				
.	Information about the insured of the Medical Care System for Older Senior Citizen	14	Breast cancer screening				
/I	medical prescription of the Medical Care System for Older Senior Citizen	15	Cervical cancer screening				
ר	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		-				



			labie
#	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 4 th questionnaire survey for community diagnosis	
5	Oct., 29, 2020	Judge for Safe Community Awards	



Table 7 **Contents of the meetings Date** April 14, Assessment of the programs by the taskforce committees 6 Analysis of the 4th Community Diagnosis 2021 May 24, Confirmation of the taskforce committees 2021 Aug., 19, Confirmation about the evaluation methods of the programs by 8 2021 the taskforce committees Oct. 20, Discussion on the structure of the steering committee and new 9 2021 problems or challenges Nov. 9, 10 Judgement of the Safe Community Awards 2021 March 18, Discussion on contents of the 5th questionnaire survey for Community safety diagnosis 2022

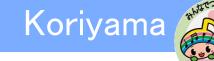
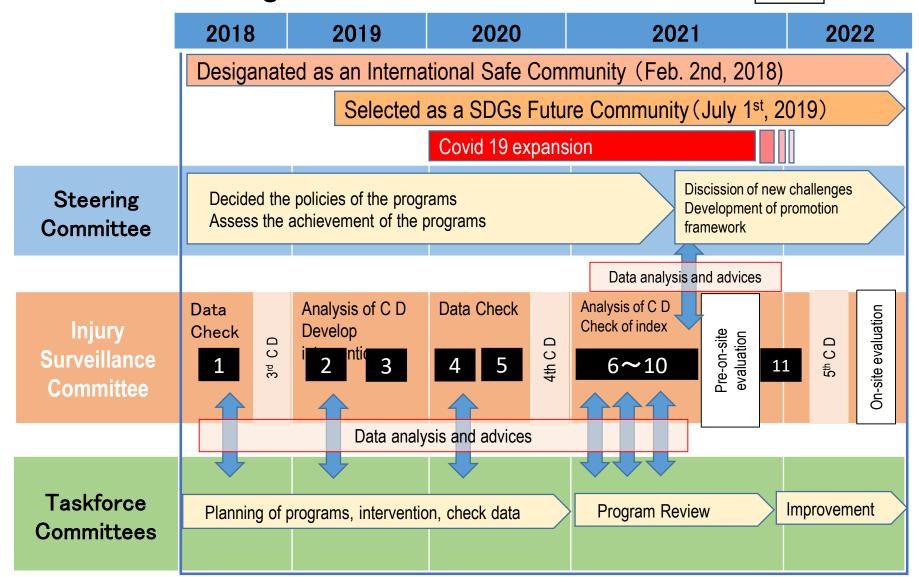


Fig.8





1 Revision of questionnaire sheets for community diagnosis L

[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.



6 Efforts after the previous designation

1 Revision of questionnaire Survey for community diagnosis

[Challenges revealed by questionnaire survey to the citizens]

- Difference in the number of response since the answer sheets are divided to individuals and households
- Complication of mailing out the questionnaire sheets and analysis because of big scale of sampling group and having two kinds of questionnaire sheets to individuals and households

[Questionnaire Survey to Citizens in 2022]

Table 9

■No Change in questions but being sent to only individuals, not to the household s to improve efficiency

Survey subject	Questions
40, 000 citizens	49 questions to individual citizens Basic info., injury occurrence at home, traffic safety, child and senior safety, suicide prevention, crime prevention,
Introduced on-line response in 2020	disaster preparedness.

For efficient data collection, further revisions will be considered





③ Proposals to taskforce committees based on community diagnosis

[Advices to the taskforce committees]

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.





[Advices to the taskforce committees (Continued from the previous slide]

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



[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)

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

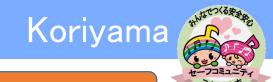
Fig. 9



V-RESAS https://v-resas.go.jp

出典:株式会社Agoo **Response**

Keep close eyes on impacts of Covid 19



[Response by the taskforce committee of Traffic Safety]

Table 12

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

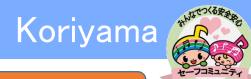
Proposal

- 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 as 13.1%, 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.



[Response by the taskforce committee of Traffic Safety]

Fig.10



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.lq.jp



[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

D	anulation of	2016		2017		2018		2019			2020					
Population of the elderly		65~79	80~89	90~	65 ~ 79	80~89	90~									
	ile eluerly	54,337	19,439	4,159	55,455	19,683	4,48	56,677	20,085	4,747	57,765	20,156	5,01	58,824	20,018	5,37 <mark>6</mark>
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%
ıffocati	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%	_	_	_

[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

- Distribution of Leaflets about counseling services
 - -Focused on work places and educational facilities
 - -Conducted questionnaire survey with QR code to make response by on-oline available
- Panel Exhibition for suicide prevention at shopping centers
- Conducted questionnaire survey by asking citizens to response by putting slickers on the answer board.

Proportion of citizens who don't know about counseling services for suicide prevention was 30.3% (result of community diagnosis in 2022)



[Response by Taskforce of Disaster Management and Environment]

Table14

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.

Respnse

- Demae-Koza (Visiting lectures) for disaster management
 Upon the condition of the applicants, on-line classes is available
- Disaster preparation drills

In 2021, upon Covid 19 pandemics, on-line drills focusing on training of information collection at disasters were conducted



On-line class at Jr. High School 27

Koriyama

5 Discussion about direction of the programs

Dutantitas		Table 15			
Priorities	Comparison from the last designation	Possible risks			
Child abuse	Counseling related to abuses in Koriyama 44 in 2017 → 23 cases in 2021	Change of life style by Covid 19 pandemic and isolation of children			
Falls of the elderly	Mortality among the elderly from falls 14 people in 2017 → 21 people in 2020	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 → 9.6% in 2022	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→ 30.3% in 2022	Change of life style and isolation by Covid			
Domestic Violence	Counseling about DV in Koriyama 68 cases in2017→ 72 cases in 2021	19 pandemic			
Disaster management	Citizens who never participate to disaster management drills 75.3% in 2018 → 77.1% in 2022	Weekended relation with others Disasters caused by the climate changes			

6 Judge of Safe Community Awards



Fig.11



Safe Community activies 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





7 Achievements and Challenges

Achievements

- 1) Set up priorities and index for activity evaluation upon data analysis
- ②Set 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**
- ②Promotion 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





Thank you for your attention

Injury Surveillance Committee