

Unintentional Injury

2021-2026

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(originally from Casper, WY)
Big Sky

“The memory is burned into my mind. I know where I was, what I was doing, and how I fell apart when I got the call that my best friend had died in a car accident. Nothing can prepare you for the shock of death, of a life lost far too early.”

Elizabeth turned to painting to help her cope. It was meditative, repetitive, and healing. *Big Sky* reflects the journey of overcoming loss and transitioning into new growth.



Desired Future

A system that produces a reduction in preventable deaths and hospitalizations due to unintentional injury, especially for those at highest risk; timely emergency response and injury rehabilitation services; superb workplace safety measures, and a shift away from social acceptability of risky behaviors that contribute to preventable injury.

Existing Efforts

Residents across the state acknowledge unintentional injury as a health priority.

Ongoing state and community-level efforts are aimed at reducing impaired and distracted driving, improving seat belt use, and reducing drug poisoning and falls, especially for residents that experience a greater burden of injury.

Emergency medical services and trauma systems are continually working to provide and improve services.

Industry-led and coalition-based efforts to address workplace safety are ongoing, as are efforts to expand technical assistance to employers and workers.

What Else Can be Done

Continue and enhance efforts that address:

- The leading causes of unintentional injuries and deaths
- Modifiable behaviors (e.g., distracted driving)
- Emergency and trauma services
- Workplace safety
- Policy and system changes, such as best-practice motor vehicle safety policies

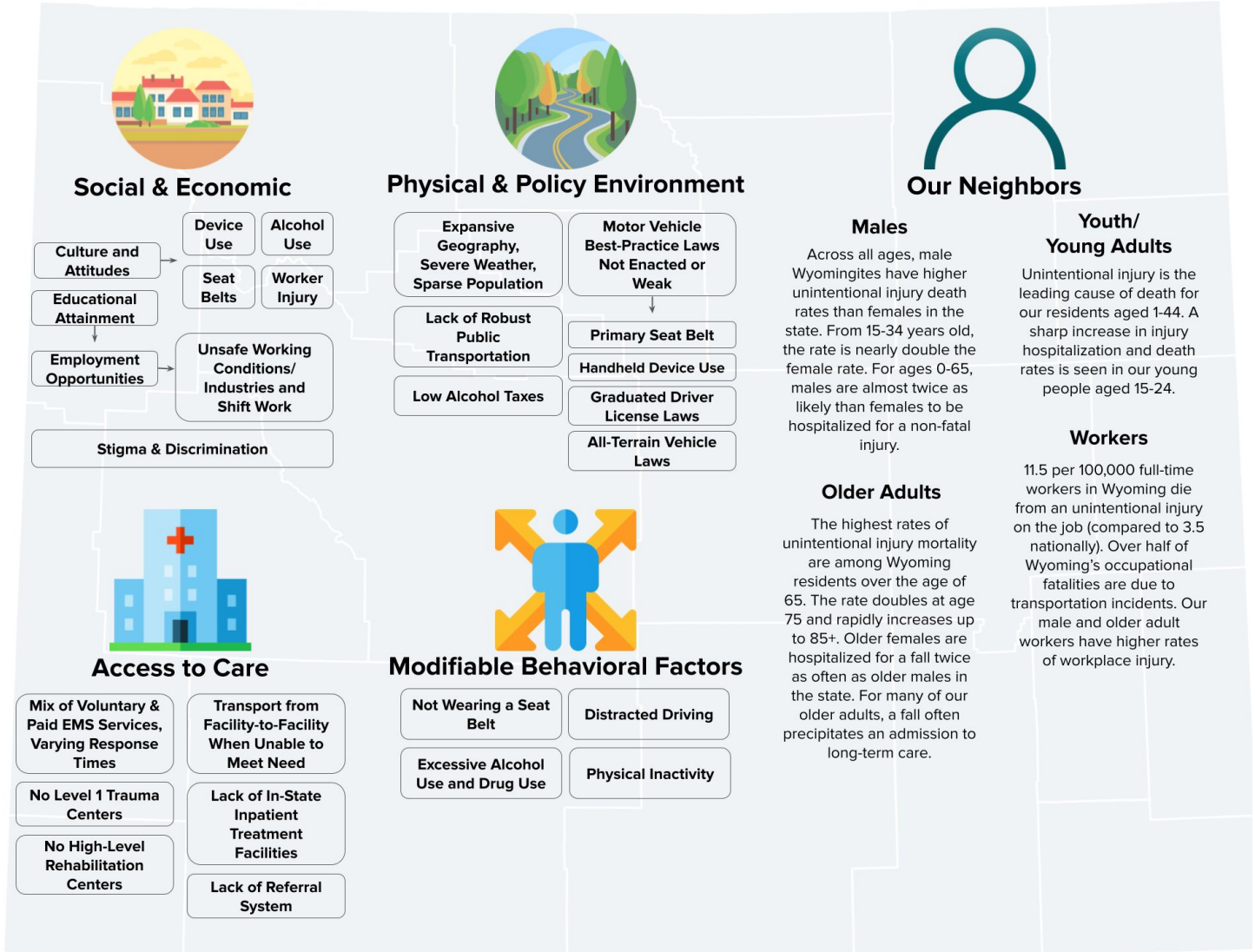
Further, shifting cultural norms and attitudes can reduce risk for injury.

Together, we can work toward a healthier future for all Wyomingites. Using our collective experiences and working together for change will help us get there.

What Influences Unintentional Injury in Wyoming?

Unintentional injuries are a leading cause of death. From 2007-2017, the leading mechanisms of unintentional injury deaths in Wyoming were motor vehicle crashes (1,153 deaths), unintentional poisoning (852), and falls (651). Falls are the leading cause of unintentional injury hospitalizations, followed by motor vehicle crashes. Additionally, Wyoming's occupational injury fatality rate is the highest in the country (2018).

The below graphic highlights some of the common factors that influence unintentional injury in Wyoming. This view allows us to see the social, economic, environmental, and access-to-care factors that may contribute to both fatal and nonfatal unintentional injuries, in addition to modifiable behavioral factors. Some populations experience a greater burden of or risk for unintentional injury. Those are also noted.



The contributing factors and populations were determined using the best available Wyoming data, scientific literature, and expert opinion.

Priority-Setting Process

To learn more about the priority-setting process and overall priority recommendations, please view the [Priority Recommendations document](#).

Contact

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State Health Improvement
Steering Committee



Wyoming
Department
of Health



What Should We Do?

We do better together. Everyone has insight to contribute, experience to share, and knowledge to guide the path toward improving population health in our state. When we work together, we develop better processes, make better decisions, and build partnerships for collective action to improve health.

How can we **reduce transportation- and fall-related injuries and deaths**? How can we **reduce occupational fatalities**? What can we do to **change the social acceptability of risky behavior**?

In this guide, we share three possible approaches/options are shared. They could be used in whole or in part, individually or in combination, to produce better health outcomes. Deliberating these approaches/options helps us find common ground on what we should do.

1

Address Transportation-Related Challenges

Transportation-related injuries and deaths are a key driver in Wyoming’s unintentional injury rates. This approach focuses on reducing some of the risk factors associated with transportation.

Examples of what could be done	Some challenges or considerations
Promote and enhance public transit options - public transit systems can reduce motor vehicle crashes, air pollution, and support more physical activity, in addition to increasing access to transportation.	Costly mass media may be required to improve the social acceptability of those options, and even with greater promotion and acceptability, public transit still may not be an option for all who experience transportation barriers. In most communities public transit is still rather limited.
Enforce impaired and distracted driving laws - this is a known way to change the social acceptability and associated behaviors related to impaired or distracted driving, and can thus reduce motor vehicle crashes and injuries.	Enhanced enforcement could cause an increased demand on law enforcement resources. Distracted driving laws are not uniform across communities and may lead to challenges in enforcement from one community to the next. Additionally, this works best when paired with community-wide information to raise awareness of enhanced enforcement.

2

Improve Safety and Risk Reduction

This approach addresses known risks associated with unintentional injury across disproportionately impacted populations and in high-risk settings in Wyoming.

Examples of what could be done	Some challenges or considerations
Improve workplace safety in high-risk industries/settings by improving safety conditions in the construction, energy, agriculture, and healthcare industries - focusing on industries with a high burden or severity of occupational injuries can lead to targeted safety improvements that reduce risk for and negative outcomes related to injury.	Industry support is necessary to successfully improve workplace safety. Employers may be burdened by improvement efforts, and it may require shifts in attitudes about worker safety. Additionally, employers may experience competing priorities during times of economic uncertainty that might delay or derail their investments in safety programs. Policymakers and employees also have a role in workplace safety. It will require a collaborative approach.
Reduce worker shortages in high-risk industries - improving the number of skilled and available workers in high-risk industries reduces pressure on the workforce to do more with less thus reducing risk for serious injury or death. A robust labor pool also allows employers and industry organizations to focus on workforce and business development, rather than labor shortage issues.	Reducing worker shortages could limit opportunities for overtime or other income opportunities for existing workers. With more competition for jobs, employers may not need to raise wages or improve working conditions to retain qualified and skilled workers. This action may also require legislative action (such as expanding employment eligibility or increasing state minimum wage). There may also be imbalances between the training needs and resources or funding available to meet them.



What Should We Do?

2

Improve Safety and Risk Reduction, Continued

This approach addresses known risks associated with unintentional injury across disproportionately impacted populations and in high-risk settings in Wyoming.

Examples of what could be done	Some challenges or considerations
<p>Expand training and career pathways in safety-sensitive occupations - this can allow workers to receive relevant and necessary safety training as well as allow workers to participate in training to advance their technical and safety skills. This benefits workers in greater job and income opportunities and can reduce worker shortages, while also improving safety practices.</p>	<p>This may require legislation, such as expanding employer requirements or state services for safety training. Additionally, employers may experience competing priorities during times of economic uncertainty that might delay or derail their investments in safety programs.</p>
<p>Prevent falls in populations with higher risk by expanding multicomponent fall prevention interventions focused on construction workers and older and disabled adults - focusing prevention where risk is greatest will allow for meaningful opportunities to reduce injuries and deaths in populations most impacted. For older populations, this can also reduce long-term care admissions and keep people in their homes and communities.</p>	<p>For high-risk workers, universal implementation of minimum-required fall prevention strategies in the workplace remains a challenge. Even with existing programs, reaching enough older adults and workers to make a meaningful difference may be difficult.</p>

3

Change Policy and Systems

This approach prioritizes changes in policies or systems, which can reduce risk factors or enhance protective factors at organizational, community, or societal levels.

Examples of what could be done	Some challenges or considerations
<p>Improve referral systems between and among health care systems and social services providers - social and economic barriers are interconnected with ability to access care and maintain basic needs. Strengthening referral systems and supports can help people meet those needs and provide more holistic care.</p>	<p>This could be time and resource-intensive. Which system or how each system is responsible for improvements requires more investigation, and that could delay our ability to improve the referral systems. If both systems commit to this, it may mean shifting resources away from other critical priorities.</p>
<p>Enact or improve best-practice motor vehicle laws such as a primary seatbelt law, statewide handheld device use restrictions, existing all-terrain vehicle [ATV] laws, and existing graduated driver license [GDL] laws - these best-practice laws have been shown to reduce motor vehicle injuries and deaths when implemented and enforced.</p>	<p>This would require legislative action and could be viewed as government overreach. Any enhanced enforcement resulting from new or improved laws may increase demand on law enforcement resources. Additionally, this works best when paired with community-wide information to raise awareness of the laws and/or enhanced enforcement, which may be costly to implement.</p>



What Should We Do?

3

Change Policy and Systems, Continued

This approach prioritizes changes in policies or systems, which can reduce risk factors or enhance protective factors at organizational, community, or societal levels.

Examples of what could be done	Some challenges or considerations
<p>Leverage and strengthen state EMS system by improving use of EMS data, expanding community paramedicine/EMS adoption and use, positioning EMS as a leader to help build other systems of care for time-sensitive emergencies, and utilizing regulatory functions to improve safety and quality of services - this has the potential to improve patient outcomes, measure system stress, and react to emerging trends before the effects are felt; lessen the burden on our rural hospital system by reducing readmissions, increase patient access to specialty (telehealth), primary, and follow-up care, and serve as an extension of the healthcare system; as well build infrastructure, support and enable agencies/providers, and drive change in the system.</p>	<p>Without steadfast and collaborative state and local-level leadership and action, political will, and an investment of resources to produce better outcomes for injury and other patients receiving care and care coordination through these systems, this will not be as effective.</p>
<p>Leverage and strengthen state Trauma system by improving use of Trauma data to inform strategic decisions, assuring hospital designation and standards for trauma care in hospitals and rural emergency hospitals, improving telehealth access and use for trauma patients and for provider access to trauma specialists, and branding and communicating the value of the trauma system - this has the potential to improve patient outcomes and timeliness for care in emergency situations, improve access to trauma resources in rural communities, and strengthen public understanding of the trauma system.</p>	<p>Without steadfast and collaborative state and local-level leadership and action, political will, and an investment of resources to produce better outcomes for injury and other patients receiving care and care coordination through these systems, this will not be as effective.</p>

Questions and Considerations for Deliberation

There is a lot to consider about what we could do to positively affect change. As we deliberate what we should do, let's consider:

1. Which actions seem most relevant or attainable? And are those the same actions that would produce the greatest impact?
 - a. On the other hand, is there anything that seems irrelevant that should be removed?
2. Are any of the actions unclear or in need of further development?
3. Are there actions that are missing that should be added?
4. Do the actions adequately address the problem and community concerns?