



Prevention Quality Improvement: Using Data to Influence Local Public Health Efforts to Reduce the Impact of Unintentional Injuries

Injury Prevention Gap in Iowa's Public Health System

In 2011 the Iowa Department of Public Health published the Local Governmental Public Health Baseline Report. The survey that informed the report had a 71% response rate and was distributed to all local public health administrators and environmental health administrators.

The findings identified that only 15% of respondents provide intentional injury prevention services and only 42% of respondents provided unintentional injury prevention services.

In order to address this gap in Iowa's public health system the Iowa Department of Public Health developed a Request for Proposal for local health departments conduct a quality improvement project to improve their ability to meet standards related to unintentional and intentional injury prevention.



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Four Iowa counties, Calhoun, Mills, Sioux, and Washington were funded under that proposal. In order to complete their quality improvement projects counties requested injury data from IDPH. At the time of the request IDPH did not have standardized measures in place for injuries and the IDPH Office of Disability, Violence, and Injury prevention did not have access to injury surveillance data.



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How was Iowa Public Health Tracking Involved?

Iowa Public Health Tracking (IPHT) was initially consulted to determine what sources of data related to injury data were available, and assist in fulfilling the data request. IPHT staff worked with the IDPH Office of Disability, Violence, and Injury prevention to identify measures related to injury incidence that would be useful to the four counties.



In order to provide data at the county level in Iowa, the matrix of ICD-9-CM external cause of injury codes for presenting injury mortality and morbidity data used by the Web-based Injury Statistics Query and Reporting System (WISQARS) was identified as a standardized mechanism for classifying and reporting injury statistics. WISQARS is maintained by the CDC Injury and Violence Prevention and Control program for reporting injury related data at a National and State level.

What action was taken to solve the problem?



IPHT constructed a custom query of the Iowa Hospital Association Inpatient Discharge database to pull counts by injury cause and intent. Injury counts were then loaded into an Excel dashboard template developed by IPHT for self-contained interactive reporting and messaging of measures.

The injury dashboard was configured to calculate and display crude rates of injury hospitalizations by County for 2007-2011, and counts by age group, gender, and race/ethnicity. Data was provided to the four requesting counties, and the dashboard was made available to the IDPH Office of Disability, Violence, and Injury prevention to facilitate future requests from additional counties.

Iowa Public Health Tracking

For More Information Contact EPHT Program, epht@idph.iowa.gov