

# Application to Become a Member of the Safe Community Network

## Safe Community Kouvola

### CONTENTS

<b>1. INTRODUCTION .....</b>	<b>2</b>
<b>2. DESCRIPTION OF KOUVOLA .....</b>	<b>3</b>
<b>3. CROSS-SECTIONAL ORGANIZATION OF THE SAFETY PROMOTION WORK IN KOUVOLA - PARTNERSHIP AND COLLABORATION .....</b>	<b>3</b>
<b>4. PROGRAMMES THAT DOCUMENT THE FREQUENCY AND CAUSES OF INJURIES.....</b>	<b>5</b>
4.1 INJURY SITUATION IN KOUVOLA REGION –IDENTIFICATION OF RISK FACTORS AND RISK GROUPS .....	5
4.2 INJURIES AND RISKS BY AGE GROUPS .....	6
<b>5. KOUVOLA’S EFFORTS BASED ON THE INDICATORS SET BY INTERNATIONAL SAFE COMMUNITIES NETWORK .....</b>	<b>7</b>
5.1 LONG-TERM, SUSTAINABLE PROGRAMS COVERING BOTH SEXES AND ALL AGES, ENVIRONMENTS AND SITUATIONS .....	7
5.2 INJURY REGISTRATION AND PREVENTION PROJECT OF KOUVOLA REGION (START).....	9
<b>6. PROGRAMS THAT TARGET HIGH-RISK GROUPS AND ENVIRONMENTS, AND PROGRAMS PROMOTING SAFETY FOR VULNERABLE GROUPS .....</b>	<b>11</b>
<b>7. EVALUATION MEASURES TO ASSESS PROGRAMS, PROCESSES AND THE EFFECTS OF CHANGE .....</b>	<b>14</b>
<b>8. ONGOING PARTICIPATION IN NATIONAL AND INTERNATIONAL NETWORKS OF SAFE COMMUNITIES .....</b>	<b>15</b>
<b>REFERENCES .....</b>	<b>16</b>
<b>APPENDIX 1: STATISTICS.....</b>	<b>18</b>
APPENDIX 1.1: CYCLING ACCIDENTS IN KOUVOLA 2001-2006.....	18
APPENDIX 1.2: MAP SHOWING TRAFFIC ACCIDENTS IN KOUVOLA .....	18
APPENDIX 1.3: SUICIDES IN KOUVOLA COMPARED TO SITUATION IN THE WHOLE COUNTRY BY PYLL INDEX/ MALES AND FEMALES.....	19
APPENDIX 1.4: INJURY SITUATION IN KOUVOLA 2004-2006.....	20
APPENDIX 1.5: CRIMES BY TYPE IN KOUVOLA 1990-2005.....	21
<b>APPENDIX 2: SAFE SCHOOL -CONCEPT .....</b>	<b>22</b>
<b>APPENDIX 3: STAKEHOLDERS OF SAFE COMMUNITY KOUVOLA.....</b>	<b>30</b>
<b>APPENDIX 4: WORK PROGRAM FOR SAFE COMMUNITY KOUVOLA 2008-2013.....</b>	<b>31</b>
<b>APPENDIX 5: INJURY REGISTRATION AND PREVENTION PROJECT OF KOUVOLA REGION (START) – CONCEPT AND TAPE© -TOOL.....</b>	<b>33</b>
APPENDIX 5.1: SHORT DESCRIPTION OF TAPE©-TOOL AND VARIABLES USED .....	34

# 1. Introduction

In Kouvola safety promotion is seen as a comprehensive and target-oriented concept to improve wellbeing of the citizens, to decrease costs of healthcare and to develop new activities and business opportunities connected to injury prevention. The focus and targets of the safety work are set on one hand on the basis of the injury data and on the other hand based on strategic goals of the municipality.

The corner stone of the Kouvola's injury and accident prevention work is the comprehensive collection of statistical data on injuries in health centre, regional hospital and in day-care centres, schools and institutions for the elderly. This work has been going on under the Injury Registration and Prevention Project of Kouvola Region (Start) since 2002. The focus of the project has been in creating a permanent basis for collection of information on causes of injuries in order to effectively plan and implement actions to prevent and mitigate accidents. The concept of the project is described in Appendix 5.

An important strategic value of the City of Kouvola is to develop as a family and child friendly city. As statistics indicate, children and youth are exposed to injuries in Kouvola with a frequency comparable to many other regions. For children traffic accidents and accidents at free time play a central role and for the youth in addition to this come injuries connected to alcohol abuse and self harm.

In improving the safety of children and the youth the safeguarding of surroundings of schools and daycare centres, as well as routes to these, play an important role. Traffic safety has been taken as a special focus of development of systematic safety work at schools. Other development target is improvement of playground safety and safety of playground equipment. In this field Kouvola is developing co-operation with equipment producers and the research community.

Kouvola has been nominated as a city of cyclists of the year in 2005 and as a city of lively city centre in 2003. These nominations manifest Kouvola's strategy on improving the traffic safety, which is based on separating cars from pedestrians and cyclists by developing the pedestrian areas in the centre and well-planned routes for cyclists all over the city. Traffic safety development has been followed up in Kouvola since 1990's by systematic collection of accident information. This information is reported once a year to the city council.

Special efforts for safety are program for planning the urban environment taking into account the needs of the disabled. In schools systematic and program based safety work has been going on since 1990's.

Since the beginning of the new millennium city of Kouvola as part of the Kouvola Region has recognized the strategic importance of the wide based safety work both for the every day life of the citizens and for safe guarding the long term interests of the business life. Since 2005 City of Kouvola has systematically developed strategy to enhance growing of safety based businesses in the region. This has been done in keen co operation with the Kymenlaakso university of applied sciences and its departments for design and for health and social security.

Kouvola seeks actively international partnerships for its safety promotion activities. Important for this is network of Kouvola's twin cities in Sweden, Denmark, Germany, Hungary and Russia and in future also in China. A special agreement on co-operation in development and exchange of experiences in safe community issues has been signed between Kouvola and Lidköping, Sweden. This is extremely valuable taking into account Lidköping's long experience on municipal safety promotion work.

## **2. Description of Kouvola**

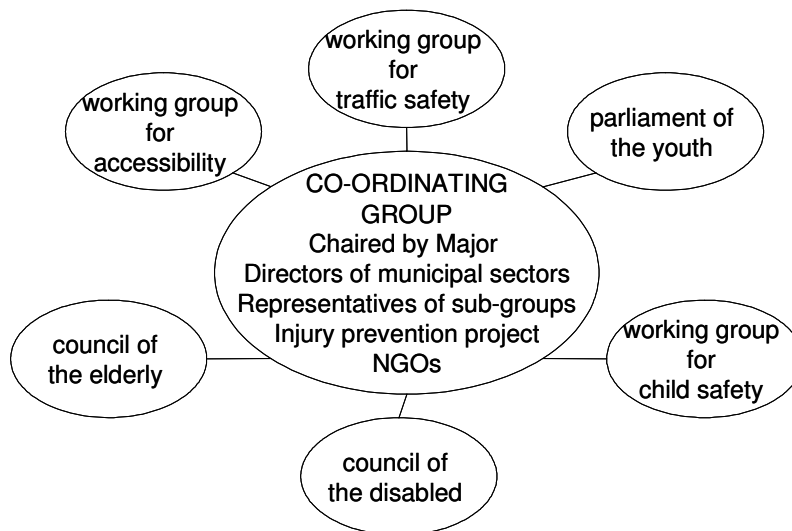
City of Kouvola with its 32 000 inhabitants is centre for Kouvola region of 100 000 inhabitants. Kouvola's history is keenly connected to railroads as it is an important crossing for railway lines to St Petersburg and to eastern parts of Finland. Kouvola has all its history been a lively centre for trade and administration in South Eastern Finland. Many regional state offices are situated in Kouvola and Finnish national railroad company has for decades been one of the most important employers in town. In recent years an important international co-operation has been created around the Trans Siperian Railroad connection and it has resulted in lively trading contacts between Kouvola region and Russian and Chinese provinces.

In Kouvola region co-operation between the municipalities is organized through a voluntary organization, Kouvola Region Federation of Municipalities. Under this organization, regional safety work is coordinated through a working group of safety and security. Participants of this working group are different authorities and representatives of the NGOs. In a long term, creation of a regional Safe Community program for Kouvola region based on this cooperation is a realistic goal.

## **3. Cross-sectional organization of the safety promotion work in Kouvola - partnership and collaboration**

In Kouvola many groups actively work with safety and injury prevention issues. Such actors are: the working group for accessibility, the working group for traffic safety, the parliament of the youth, the council of the elderly, the council of the disabled. A new working group for co-ordination of child safety will be founded.

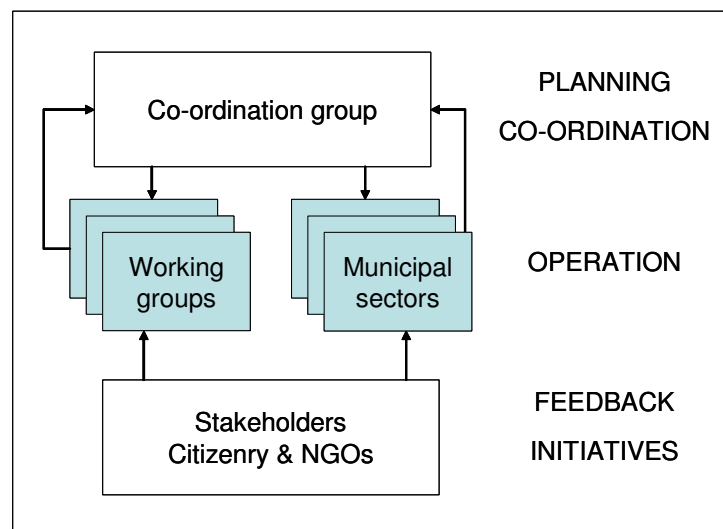
For implementation of the Safe Community work a co- ordination group is founded. This group is led by the major of City of Kouvola and its participants are directors of different sectors of City administration (technical sector; social security; education, culture and sports), representatives of all above mentioned working groups, representative of Kouvola Region's Health Centre (Injury prevention project) and representatives of relevant NGOs (traffic safety, entrepreneurs of the city centre, Red Cross). The organization is described in picture 1.



**Picture 1.** Organization of the Safe Community Kouvola

The co-ordination group is responsible for decision making on planning and allocation of resources for safety work as well as follow-up of the work of different working groups and other partners. Separate working groups are responsible for operational work of different sectors, organizing campaigns and participating in relevant safety promotion activities locally, nationally and internationally. The running of Safe Community work and responsibilities of different parties is described in picture 2.

The citizenry is involved in safety promotion through work of separate working groups and their campaigns. A forum for safety promotion to present new developments of local safe community activities will be organized once a year. First such forum will take place 13.6.2008, when the main event of the national injury prevention day will be organized in Kouvola.



**Picture 2.** Running and division of responsibilities in Safe Community work Kouvola

Politicians are involved in organization of Safe Community Kouvola via ordinary decision making structures in the municipality. The co-ordination group is reporting of planning and progress to city government and city council and municipal committees are leading the work at different municipal sectors.

## **4. Programmes that document the frequency and causes of injuries**

### ***4.1 Injury situation in Kouvola region –identification of risk factors and risk groups***

#### PYLL (Potential Years of Life Lost)

The PYLL (Potential Years of Life Lost) rate is one of the most frequently used measures for monitoring the health of a population. It is calculated on the basis of the differences between the age at death and the expected length of life and it is determined to by cause of death according to the ICD-10. According to PYLL calculated for the population of Kouvola, the most important risk factors for premature death among males in Kouvola region are traffic accidents, accidental falls, alcohol related accidents and self-harm. Prevention interventions should be focused on those prone to these problems. The most important challenge among females, correspondingly, is the prevention of traffic accidents and alcohol related accidents.

#### Risk groups and risk factors recognized in the injury data and research

Risk groups and risk factors have been analyzed here on the basis of the the injury data produced by the Injury registration and prevention project of Kouvola region (Start). In addition, previous injury research that has been carried out in Kouvola region is referred here as well.

The Start injury data here consist injuries occurred among the inhabitants of Kouvola. A total of 1776 first attendances due to an acute injury took place in Kuusankoski regional hospital (special health care). Correspondingly, a total of 2256 first attendances due to an acute injury took place in Kouvola Region's Health Centre (primary health care). Unfortunately, no comparison data from other regions in Finland are available.

Previous injury research has been focused on the injury risks of the aged population in Kouvola region. Several studies on the accidents, injuries and injury related factors (e.g. survival, costs, treatment, medication, alcohol) among aged in Kouvola region have been carried out (see references) and some results from these studies are referred here.

## **4.2 Injuries and risks by age groups**

**Age group 0-13 years:** Boys were at the highest injury risk. Injuries were mostly occurring in leisure time and in schools. Boys also represented a majority in sport injuries, especially in bicycle injuries.

**Age group 13 -17 years:** As in the younger age group, boys were at the highest injury risk. Injuries occurring among boys were sport injuries, other leisure time injuries and school injuries. Injuries due to self-harm increased especially in females. Driving on a moped seemed to cause accidents in this age group. Nearly one fifth of all accidents in this age group were alcohol related.

**Age group 18-24 years:** Boys were injured in schools and during sport activities, and girls in home and leisure time accidents. Violence was frequent among boys, and self-harm and traffic accidents among girls. 35-40% of the cases were alcohol related, especially those due to self-harm and violence.

**Age group 25-44 years:** More injuries occurred among men than among women in this age group. Occupational injuries, sport injuries, self-harm and violence were more frequent in men than in women, and about 10 % of injuries were due to self-harm. In the total data, violence was more frequent in men and self-harm in women. However, in this age group self-harm seemed to be men's problem. 35% of the cases were alcohol related and no difference between the genders was found in this respect. Alcohol was strongly associated with the injuries due to self-harm and violence. Of the traffic accidents, 14% were alcohol related. None of the occupational injuries was alcohol related.

**Age group 45-64 years:** The proportion of falls increased. One third of the injuries were alcohol related. Injuries occurring in men were more often alcohol related than those in women, and most of the injuries occurred during leisure time. The proportion of inanimate environment as a cause of the injury (e.g.occupational injuries) increased in men. In the near future the increase or decrease of alcohol related injuries among aged in Kouvola is dependent on the alcohol consumption of the 55-64-year -olds, that is, of the oldest people in this age group.

**Age group 65 years and older:** Fall on the same level was the most important external cause of injury. Number of falls in homes and in institutions increased by age. 15 % of the falls in those over 80 years, requiring treatment in special health care, took place in institutions. The role of alcohol in injuries remained unclear in this age group because of the insufficient use of breathalyzer. It has been investigated, however, that hip fracture patients in Kouvola region (mean age 80 years) were more often (28%) alcohol positive on admission to the hospital than the corresponding patients in Lahti region (7%). Thus, the breathalyzer should be used among aged injury patients, as well, and, if necessary, those with drinking problems should be guided to mini-intervention.

**The sex- and age-adjusted incidences of injuries and fractures by gender** per 100 000 inhabitants were analyzed in the injury data of special health care. The incidence of injuries was higher in men than in women until the age of 70 years and after that the situation turned

quite the opposite. The incidence of fractures was highest among men aged 10 to 19 years as well as over 80 years, and among women over 70 years. The incidence of osteoporotic fractures increased rapidly among women over 60 years and among men, correspondingly, over 80 years.

## **5. Kouvola's efforts based on the indicators set by international Safe Communities network**

### ***5.1 Long-term, sustainable programs covering both sexes and all ages, environments and situations***

In Kouvola the most important long term injury prevention work has been carried out in traffic safety and development of the infrastructure to increase the accessibility of all citizens.

A new **traffic safety plan** has been created in 2007, which covers whole of the Kouvola region. The targets of traffic safety work till 2015 in the region include:

- decreasing the amount of moped accidents and accidents of the youth
- decreasing the speed to the main target of planning of the traffic environment
- special attention in the planning of the traffic environment is paid to protect the vulnerable groups i.e. children and the elderly
- improving the safety of light traffic by small adjustments
- improving the safety of heavy transports by affecting the driving culture
- increasing the cross sectoral co-operation in traffic safety
- improving the respect for traffic safety work

Traffic safety development has been followed up in Kouvola since 1990's by systematic collection of accident information. This information is reported once a year to the city council and to different committees. Part of the report is a map where the places of all accidents are shown (Appendix 1.1). The consequences of the long term efforts on traffic safety can be seen e.g. in the decrease of cyclist accidents (Appendix 1).

The systematic work to increase **accessibility of all citizens** has a long history in Kouvola. Mapping of elements of hindrance in the city has been carried out since 1979. Kouvola's program for accessibility was accepted in 2006. The creation of this program is based on a long term work to improve accessibility in the city. The most important steps in this long term work are:

- 1979 the mapping of hinders in the city environment
- 1982 program to improve accessibility in the city of Kouvola
- 1996 Update of map of hinders in the city environment
- 1997 Mapping the houses lacking elevators and study on the need for a service bus line
- 2001 Policy program for the disabled

- 2004 Studies on improvement needs for taking into account the kuulovammaiset in the city facilities and public places
- 2004 Building of Salpauisto, a park designed taking into account the needs of the disabled
- 2004 Plan for improvement of lightning in the city center
- 2005 Questionnaire in the home services on accessibility problems
- 2005 Study on the need for elevators
- 2005 Questionnaire on the elderly need for improvement of traffic safety

Kouvola **program for welfare policy** was compiled in 2003. On of the basic values behind this program is security, which is defined as follows: “Security is perception of health by the citizen. It is feeling of safety and relaxedness in living and working environment. Important elements of security are also trust and belief in the future.” The program sets targets and guidelines to improve welfare in different age and social groups (children, youth, families, elderly and the disabled). As a basic principal it stresses the points of view of participation and prevention. The program targets to improve safety of different age groups with special focus on prevention of social exclusion and alcohol abuse. The program is an important tool in affecting the ground causes of violence and self-harm. Based on this umbrella program, the sector programs for the elderly and the disabled have been compiled. The child and family policy program is still missing.

Based on **policy program for the elderly** and **policy program for the disabled** a council for the elderly and council for the disabled have been nominated in 2004. Both councils have wide representation among central stakeholders and they also have representatives set by political parties of the city council (Appendix 3). Councils decide on their own programs and can make initiatives to the city council and city committees.

In **schools long term safety work** is based on a special “Safe School” concept which is developed in Kouvola Kaunisnurmi School. This approach to safety draws attention as well to safety of physical environment as mental wellbeing of schoolchildren and teachers. An important part of this tool is matrix formed tables to assist documentation and follow up of safety development in different fields. City of Kouvola has been an active participant in the national program to improve traffic safety among schoolchildren “Safeguard child’s way to school”. Mental wellbeing is followed up by regular questionnaires and with systematic work to prevent harassment. A safety education plan will be formed to all schools in Kouvola in 2008.

An important tool to enhance participation of the youth in the decision making of the city of Kouvola is **Parliament of the youth**, whose participants are elected once a year in elections organized in schools, grades 10-11. Representative of the parliament of the youth is present in every municipal committee. Parliament of the youth is free to pick up the issues to be considered in its meetings.

An important tool in tackling the alcohol and drugs abuse and their side effects and in planning the preventive measures is **the intoxication policy strategy** from 2006. One of the concrete measures taken based on this strategy is the new praxis of intervention to alcohol abuse in Kouvola Region’s Health Centre which was started from the beginning of



2007. This new approach plays an important role in future in prevention of alcohol based injuries in Kouvola region.

The frequency of injuries and injury related factors are systematically followed –up by TAPE©-software in children’s day care, schools and in hospital in patient care as well as in home care and in residential and institutional care for the elderly. This tool for injury follow-up supports especially injury prevention as well as safety management of those in charge in these units.

Programming for **security planning** has been carried out in regional co-operation under the security working group of Kouvola region. This work, which initiated in 2003, has focused on improving the situation of prevention of crime and violence. The working group has gathered different authorities and stakeholders dealing with the security issues (see Appendix 3). As a basis of this work a common social worker for police and the municipality is hired to the Kouvola police station. This measure has been invaluable in long term tackling with the issues of **domestic violence** and in enabling early intervention to social problems and thus **preventing the crime and violence**.

The **prevention of suicide** in the Kouvola region is carried out by voluntary actors. Active actors in this field are federation for those who’s nearest have committed suicide (Surunauha ry) and the society for mental health in Kymenlaakso (Kymenlaakson mielenterveysseura). The long term programming for prevention of suicide and research focusing on suicide prevention is so far missing in Kouvola. Preventive work in the municipality is responsibility of the mental health care in Kouvola Regional Health Care Center. In schools the safety work in general and as part of it the prevention of harassment in schools are important tools also to prevent self harm and suicides in long term perspective. Programmatic work for prevention of suicide needs to be developed in the city of Kouvola. In injury registration the frequency of self harm cases is identified. The analysis of this data and planning the preventive work based on this information is of importance in prevention of suicide. The present situation of suicide in Kouvola compared to the whole country is presented in Appendix 1.

An important long term activity playing an important role in practically preventing suicide and other mental problems is **crisis help** offered by local federation of voluntary actors (VAPEPA) which is co-ordinated in the region by Red Cross in South Eastern Finland. This activity involves organization of voluntary groups for mental crisis help in different situations both during catastrophic events and in every day life support for those living through personal crisis.

## ***5.2 Injury Registration and Prevention Project of Kouvola Region (Start)***

The aim of the Injury Registration and Prevention Project of Kouvola Region (Start) is to use the injury data for injury prevention. Injuries are recorded and followed in two different levels and ways. Information technology has been developed for this purpose. The idea of the project is presented in a poster (attached).

### **1) Start: Injury follow -up on population level**

Injuries on the population level were recorded by patient record systems. Data bases for systematic, prospective injury registration were planned and implemented in special health care and in primary health care. Injuries included also attendances caused by self-harm and violence (WHO). The data were collected from the first attendances due to an acute injury in the emergency departments of special health care and primary health care. Thus, the incidence of injuries could be calculated. In addition, acute dental injuries in municipal dental care were recorded. The external cause of injury, type of injury and the diagnoses were recorded by using the ICD-10 (tenth revision) classification. In addition, the patients were inquired whether, at the time of the accident, they had used a bicycle helmet, hip protectors or other equipments, which may have protected them from the injuries. The blood alcohol concentration (BAC) was tested with breathalyzer.

Today, the previous patient record systems in special health care and primary health care (three different patient record systems) have been replaced by a new patient record system which is for the most part tai mostly the same in all EDs. However, implementing the injury data base in the new patient record system has turned out to be complicated, and the work still in process.

### **2) Start-project: injury follow –up in hospital inpatient care, childrens’ day care, elderly care and schools**

In Start project a web-based tool for injury follow-up -TAPE©- was created. Data bases for injuries taking place in hospital inpatient care, elderly care, children’s day care and schools were planned with the professionals of these fields. Consequently, in co-operation with a Finnish software company, Amlti Ltd, TAPE© software was developed. TAPE© was adopted in other above mentioned units in April 2006 and in schools in the beginning of 2007. With the use of TAPE©, details on injuries and injury related factors are prospectively recorded by the staffs in question. TAPE© is in real time: all the recorded injury information can be viewed immediately as graphics and numbers.

Today, TAPE© is used in more than 150 units in the Kouvola region. On the basis of TAPE injury information, prevention interventions have been implemented in hospital inpatient care, elderly care and children’s day care.

### **3) Start-project: Training**

An important part of the Start- project is training that has been arranged during the years. The contents of the training have varied from university level training as regards the substance (injuries, their consequences and prevention etc.) to training where the information technology has been taught in practice (the use of the injury databases in patient record systems and of the TAPE© software). The number of participants and trainees has varied from hundreds to groups of about ten people.

### **4) The use of the Start injury data for injury prevention and research**

Population level: This data will be used for research in order to gain important information for national purposes. Consequently, patients at highest injury risk can be identified in the injury data in order to implement injury prevention interventions. Those at highest risk are e.g. patients who are frequently visiting ED because of an acute injury and frequently being

under the influence of alcohol, aged patients who are attending to ED due to frequent falls, patients visiting ED due to self-harm incidents etc. Adequate prevention interventions should be focused on these patients. Interventions should be planned and implemented in co-operation with special health care, primary health care, social care and other relevant fields e.g. psychiatry and geriatrics. In addition, the data will be used for scientific research.

In conclusion, Start injury data are used and published on many levels from everyday practice to national and international scientific research.

## **6. Programs that target high-risk groups and environments, and programs promoting safety for vulnerable groups**

**Children and the youth** are an important focus group of Kouvola's traffic safety work. A special, web-based traffic safety game has been developed for schools and traffic safety events are organized at schools on yearly basis. A very useful tool for traffic safety education is traffic park where children can practice traffic rules in a realistic environment. Development of traffic park and its surrounding park area is planned for years 2009-2010. This means also involvement of different activities of different age groups in the surrounding park area and use of new technologies their activation.

The improvement of planning for **child safe environment** will be one central focus area of Kouvola's Safe Community work. In order to reach this target, a pilot project was carried out in Kouvola in spring 2007 for improving the participation of the children in planning for their living environment. In this pilot project children from the daycare and school were photographing their environment and after that explaining their pictures freely following a "tell tale" –methodology. This pilot project served as a basis for development of the methodology which will in future be applied in other environments in a more systematic way. One obvious conclusion from this project was that planning the use and safety of the playground environments can be much more effectively and focus-oriented done when we have more detailed information on children's ways of looking at their environment and on their habits of using different equipment.

The **Kouvola's Safe School toolkit** and the **TAPE©-software** for collection of injury data will be taken into operative use in every school in the city till the end of 2007. The matrix for follow up the development of the safety work will be used to set targets for school safety work in every school on yearly basis. Special attention will be paid to developing the methods to increase participation of schoolchildren and their families at safety work. Similar type of follow up matrix as in Safe School material will be developed for use of also other sectors in education, culture and sports. In Appendix 2 is a short description of Safe School toolkit and examples of the follow up matrixes.

Good practices have been created to improve the safety of the youth. One such is the organization of **street patrolling to safeguard the youth** in the city center during weekend evenings and nights. The running of this activity is organized in co-operation between city of

Kouvola youth office, Red Cross of Kouvola and the Kouvola Parish. Those doing the foot work are voluntary persons, including professionals as well as ordinary people like parents. The method is to offer presence of adults, discussion partners and help to those in trouble. This has been experienced to be very effective way of preventing violence and crime.

The meeting and information point for the youth “Majakka” is situated in the city center, at Hansakeskus Shopping Mall. In Majakka youth can meet freely and also get advice and information from the worker in duty. A special project is to organize support for the youth to help them finalize their educational duty. This project is organized in co-operation between social work, youth work and school.

**Kouvola’s program for accessibility** is from year 2006. As a basis for this program an extensive evaluation of infrastructure and buildings was carried out in order to find out deficiencies and best practice examples. Program includes timetable and plan for improvement of the city environment from the accessibility point of view.

**The program for accessibility includes following steps to improve** the situation:

1. The demand for accessibility will be included in strategic goals of the city of Kouvola. A basic level of accessibility should be reached in every part of the city. An increased level of accessibility will be set as a goal in areas of housing for the elderly and around the institutions for the elderly, in pedestrian routes, in pedestrian area in the city centre and in service regions plus near schools and children’s daycare centers.
2. In planning for land use, building and maintenance as well as in implementation and supervision concerning the regulations and orders for accessibility are taken more carefully into account. The co-operative planning practices are favored.
3. The deficiencies in accessibility noticed in connection to compiling the program will be fixed till 2015. Resources will be allocated in the budget for fixing certain flaws every year. Guidance, advice and lobbying will be improved in order to enhance the fixing of those flaws of accessibility which are responsibility of other parties than city of Kouvola.
4. A special group will be called together to follow up the development of overall situation of accessibility. The participants of this group will be representatives from all sectors of the municipality as well as from different interest groups. The responsibility of this group will also be the guidance and education on accessibility related issues. One important target group for the guidance will be the planners, builders and those responsible for maintenance. Best practices solutions will be collected as well as information on deficiencies in accessibility from the citizens.
5. A special guidance will be written to help to plan, build and maintain the public places, parks and streets from the point of view of promotion of accessibility.

Kouvola has an active council of the disabled, which has enhanced studies of the urban environment and **public places from the point of view of the disabled**. Public buildings and outdoor environments have been mapped in 2004 from the point of view of persons with impaired hearing as well as those having defect of vision. On basis of this work the lighting of the city centre has been improved and public places have been equipped with hearing aid. Salpauisto park at city centre has been constructed especially to serve the needs of disabled persons. In this park e.g. flower arrangements have been planned to utilize the scent of the plants in order to offer experiences to persons having defect of vision.

Development of the Salpauisto and other parks in the city center to better serve the needs of the disabled is planned for the coming years.

The safety of public places in Kouvola is a central focus of Kouvola's safety promotion work. Special effort has been put to **improve safety at parks and in street environment**. Work to develop "Lively city centre" and to improve the pedestrian area in the centre of Kouvola plays an important part in this. Practical actions to improve safety of public places are improvement of prevention of slippery conditions in streets and lighting as well as work focused on improving the playground safety and safe structures at sports places. As part of the traffic safety program, the **traffic environment is improved especially by improving the safe circumstances for pedestrians and cyclists**. For this, long-term development work, Kouvola has received a nomination for cycling city of the year in 2005.

An important part of safety promotion work is carried out via Kouvola city centre association, which members are the entrepreneurs and real estate owners in the city centre. The association is responsible for arrangements of all public events which take place in the city centre and also for their safety. The association follows up the **safety developments in the city centre** continuously and it plays a crucial role in linking citizens and their needs for safety and nuisance to everyday work of the authorities and other responsible parties. The association organizes regularly safety promotion events in the city centre.

**Among the adults** especially problematic are men's injuries in free time, both deliberate self-harm and unintentional accidents. In this age-group alcohol plays a clear role in accidents among both sexes. To decrease home-, leisure time and sports injuries, well focused campaigns are needed, which should also take into account alcohol abuse. One part of the solution to decrease the amount of home accidents is to develop and effectively market safety equipments for renovation work at home.

**Prevention of injuries among the elderly** is an important target. In older age groups falls are typical injuries. Systematic development of information and advice concerning **prevention of injuries at home** and **prevention of traffic accidents** is going on as part of activities served by the meeting point of the elderly (Ikäasema) at city centre and as part of the work of the council of the elderly. The elderly participate also to the follow-up of the accessibility program. An important focus area is to develop preventive visits at home to assist the elderly living at home to understand the importance of preventive measures. The TAPE©-software is a crucial tool to collect information and develop follow-up of the injury situation of those living at home as well.

An important way to prevent these injuries is to increase exercise in all age groups. Organizing exercise for the elderly is an important focus of Kouvola's clubs and associations for the elderly. Of crucial importance is to encourage the elderly to move among the other people and to prevent displacement and isolation. In this respect the plans to develop the city infrastructure and especially parks to enhance activation of different age groups is an important approach.

In the follow up and prevention of injuries the web-based TAPE© tool plays an important role. **Hospital wards, nursing homes, residential homes, kindergartens, schools** etc. which are using TAPE©-software can view and follow-up their injury situation in real time

as has been described earlier. The information is meant to be used immediately for future injury prevention. This is the main purpose of TAPE©- software. However, TAPE© is also an excellent everyday tool for safety management and promotion for those in charge in the units. The basic structure of the TAPE©-tool on general level is presented in the Appendix 3.

**Prevention of hazards and injuries caused by alcohol** is an important issue in all age groups, also among the elderly. The active discussion policy concerning alcohol problems is taken to regular use as an intervention method in Kouvola Region's health centre. A crucial issue is to develop follow up methods and evaluation of effects of such interventions concerning alcohol hazards as part of the injury research.

The ministry of the interior has given guidance for municipalities to encourage them in developing **safety planning** as an approach in local co-operation between authorities and other stakeholders in safety work. In Kouvola Region the association of municipalities of the region is co-ordinating common effort to create a regional wide-based safety plan. In injury prevention the regional co-operation in safety work is very valuable. It enables e.g. the creation and implementation of regional innovations for effective action models in injury prevention and in evaluating the effects of preventive measures. Such innovative approaches will be encouraged in the development project focusing at creating a cluster for safety innovation and business based on the injury prevention approach to the Kouvola region.

The mental health issues to **prevent exclusion, self harm and suicide** especially among youth and the middle aged group needs to be developed in Kouvola region.

## **7. Evaluation measures to assess programs, processes and the effects of change**

The commitment to Safe Community –work is a strategic choice for the City of Kouvola. This means that to the city it is of crucial importance to be able to quantify the results of the work and the resources allocated to it. One of the first challenges of the Safe Community work is to create and choose the suitable indicators to ease the follow up of the work.

The central tool for follow-up and evaluation the effects of injury prevention is the registration and analysis of injury data in institutions and through the TAPE©-software. The challenge and also a research task is to develop action models and other tools to enable prevention of injuries and to evaluate effectiveness of these measures.

An important part of the Kouvola's Safe Community work is to develop action models and tools to enhance children's safety and to involve children in planning and giving feed back to planning of their own living environment. The research on usability and safety of playground equipments will be part of this entity. This will be part of the research field to be developed together with Kymenlaakso University of Applied Sciences and other research institutions.

The responsibility in follow-up and evaluation of the effects of implementation of preventive measures is divided between parties responsible for implementing those measures in different sectors. The evaluation of the progress of the entity of injury prevention in Kouvola is the responsibility of the Safe Community coordinating group. The report of the progress is produced on yearly basis and it will be delivered to the city board and the city council. The summary of these progress reports will form one part of the application of continuation of Safe Community to be produced in 2013.

The co-operation between Kouvola and Lidköping in further developing their Safe Community work respectively creates a good opportunity to compare and learn from each other's best practices and effective working models. Thus "bench marking" with Lidköping is an important tool for evaluation of the progress of Safe Community work in Kouvola.

## **8. Ongoing participation in national and international networks of Safe Communities**

The Injury registration and prevention project of Kouvola region has been presented in international occasions, e.g. at the Safe Community Conference in Helsinki in 2003, at the 7th World Conference on Injury Prevention and Control in Vienna in 2004 and in the 8th – Japanese-Finnish Seminar on Hospital and Welfare Architecture in Helsinki in 2004. The first results of the Start injury data have been presented in the IOF World Congress on Osteoporosis in Toronto, Canada in 2006.

In Finland the Start project has been presented in several congresses, symposiums, seminars and other occasions. The project is conducted in co-operation with the National Public Health Institute, Ministry of social affairs and health, Ministry of the interior, Ministry of transport and communications and several other national organisations as regards safety in different environments. The research in the project is done in co-operation with universities and high schools.

Kouvola is taking actively part in developing the concept of national injury prevention day from the point of view of the local participation. The main event of the national injury prevention day will take place in Kouvola 13.6.2008. This event is an important mile-stone for city of Kouvola in deepening its cooperation with different national institutions dealing with injury prevention issues.

## REFERENCES

- Airaksinen Noora (2007). Pyöräilijöiden, mopoilijoiden ja moottoripyöräilijöiden liikennetapaturmat Pohjois-Kymenlaaksossa. Väkiraportti ensimmäisen vuoden tutkimustuloksista. Liikenneturvallisuuden pitkän aikavälin tutkimus- ja kehittämisohjelma. LINTU-julkaisuja n/2007 ([www.lintu.info.fi](http://www.lintu.info.fi))
- Kaukonen JP, Nurmi-Lüthje I, Lüthje P, Naboulsi H, Tanninen S, Kataja M, Kallio ML, M.Leppilampi. Acute alcohol use among patients with acute hip fractures: a descriptive incidence study in southeastern Finland. *Alcohol & Alcoholism* 2006 May-Jun; 41(3):345-348.
- Kouvolan seudun tapaturmahanke (Start). Väestötason tapaturma-aineisto erikoissairaanhoidon potilastietojärjestelmästä ajalta 1.6.2004-31.5.2006
- Kouvolan seudun tapaturmahanke (Start). Väestötason tapaturma-aineisto perusterveydenhuollon potilastietojärjestelmästä ajalta 15.6.2005-31.10.2006.
- Nurmi I, Narinen A, Lüthje P, Tanninen S. Cost analysis of hip fracture treatment among the elderly for the public health services. A prospective study in 106 consecutive patients. *Arch Orthop Trauma Surg* 2003; 123: 551-554.
- Nurmi Ilona. Injury registration and prevention project (START) in Finland, 27.9.2003. 5<sup>th</sup> Safe Community Conference, Helsinki, 26.-29.8.2003. (oral presentation)
- Nurmi Ilona. Use of continuous, prospective injury data for injury prevention. Regional injury registration and prevention project in south-eastern Finland. International Seminar on Injury Research Methods, organised by ECOSA, Vienna, Austria, 10.6.2004.(oral presentation)
- Nurmi Ilona. Falls among elderly - what can be done to prevent them? The 8th – Japanese-Finnish Seminar on Hospital and Welfare Architecture 11.-14.10.2004. General Theme: "Take Care- Architectural Means for Risk Management in Care Facilities". Käpylä Rehabilitation Centre, Helsinki 13.10.2004.(oral presentation)
- Nurmi-Lüthje, I. & P.Lüthje, J.Hinkkurinen, L. Lundell, K.Salmio, K.Karjalainen, M.Salminen and A.Kajander. One year accident and injury profile among aged in southeastern Finland in an area of 100 000 inhabitants. IOF World Congress on Osteoporosis 2-6 June, 2006, Toronto, Canada. (poster presentation)  
*Osteoporosis International* (2006) Volume 17 Supplement 2; S62.(abstract)
- Nurmi-Lüthje I, Karjalainen K, Hinkkurinen J, Salmio K, Lundell L, Salminen M, Pelkonen J, Kajander A, Lüthje P. Erikoissairaanhoidon tapaturmaensikäynnit Kuusankosken aluesairaalassa kahden vuoden aikana. (Suomen lääkirilehti, hyväksytty julkaistavaksi) (First attendances due to an acute injury in Regional Hospital Kuusankoski –a two-year prospective study in Kouvola region, Finland (Suomen Lääkirilehti, accepted for publication)



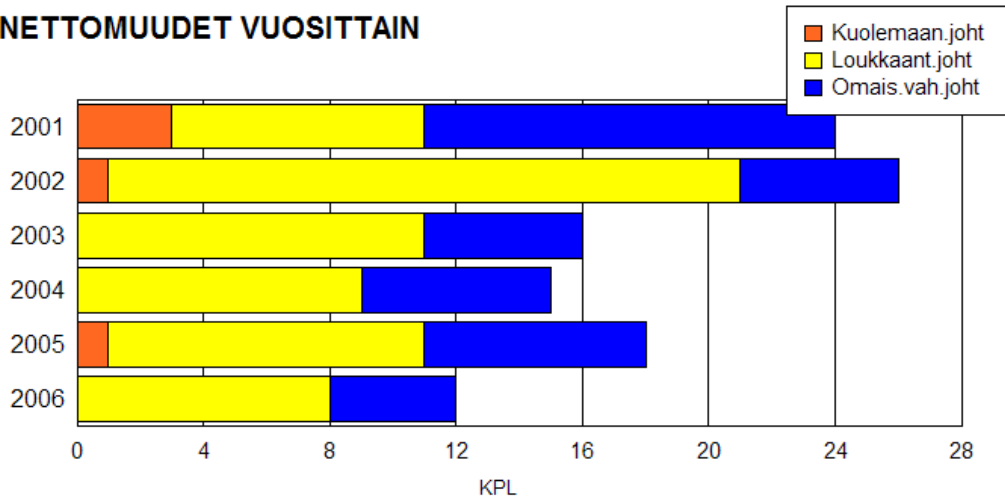
Nurmi-Lüthje Ilona. Alkoholi ja vanhusten tapaturmat -voimistuva yhteys. Suomen Lääkärilehti 2006; 35: 3433.

Vohlonen I, Bäckmand H, Korhonen J. Menetetyt elinvuodet. PYLL-indeksi väestön hyvinvoinnin mittana. Suomen lääkäri-lehti 2007; 62: 305-3309.

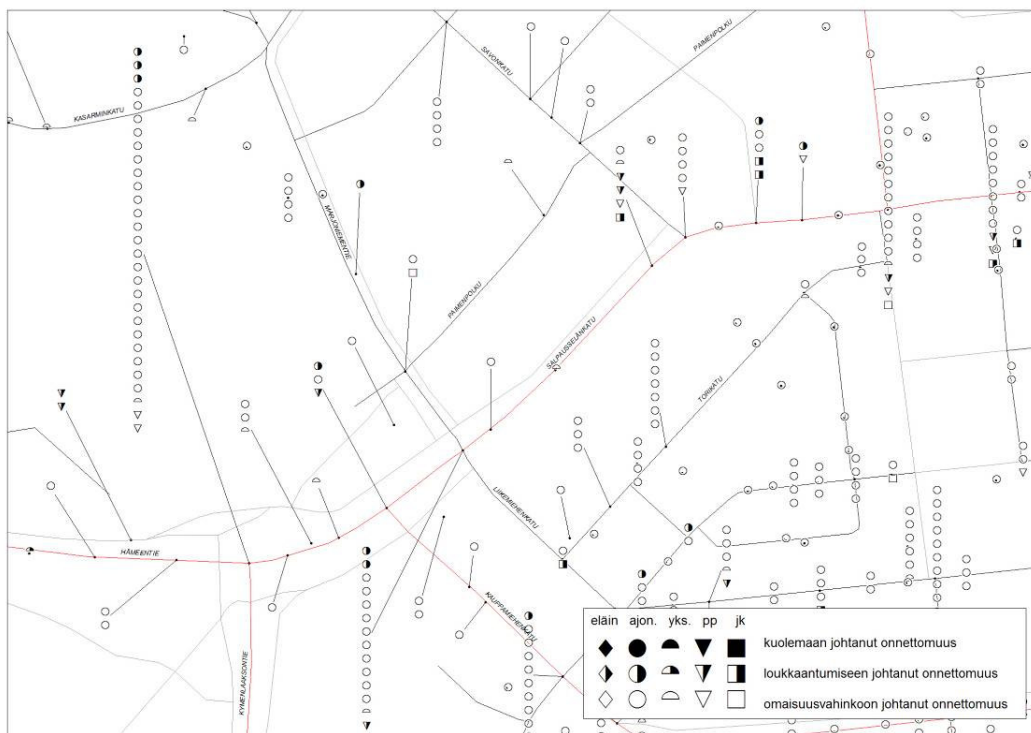
Vohlonen Ilkka ja Bäckmand Heli. Kouvolan seudun PYLL-tulokset. Esitys Kouvolan seudun seminaarissa: Ennenaikaisesti menetetty elinvuosi maksaa. 8.2.2006 Kuusankoskitalo, Kuusankoski.

# APPENDIX 1: Statistics

## ONNETTOMUUDET VUOSITTAIN



**Appendix 1.1: Cycling accidents in Kouvola 2001-2006**



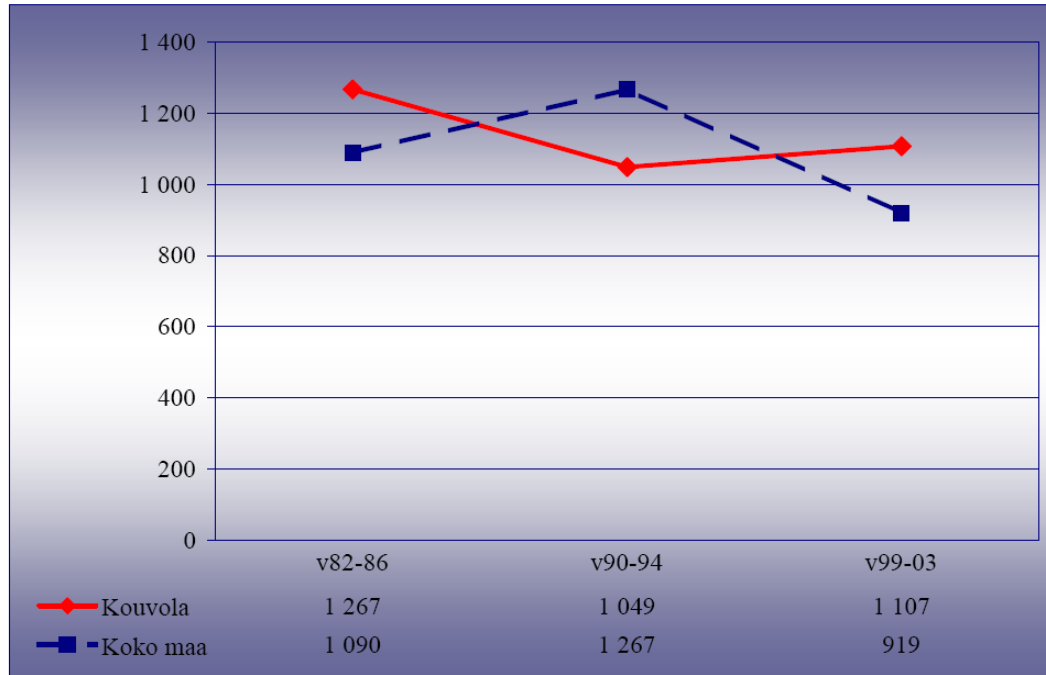
**Appendix 1.2: Map showing traffic accidents in Kouvola**

### Appendix 1.3: Suicides in Kouvola compared to situation in the whole country by PYLL index/ males and females

#### Kouvola

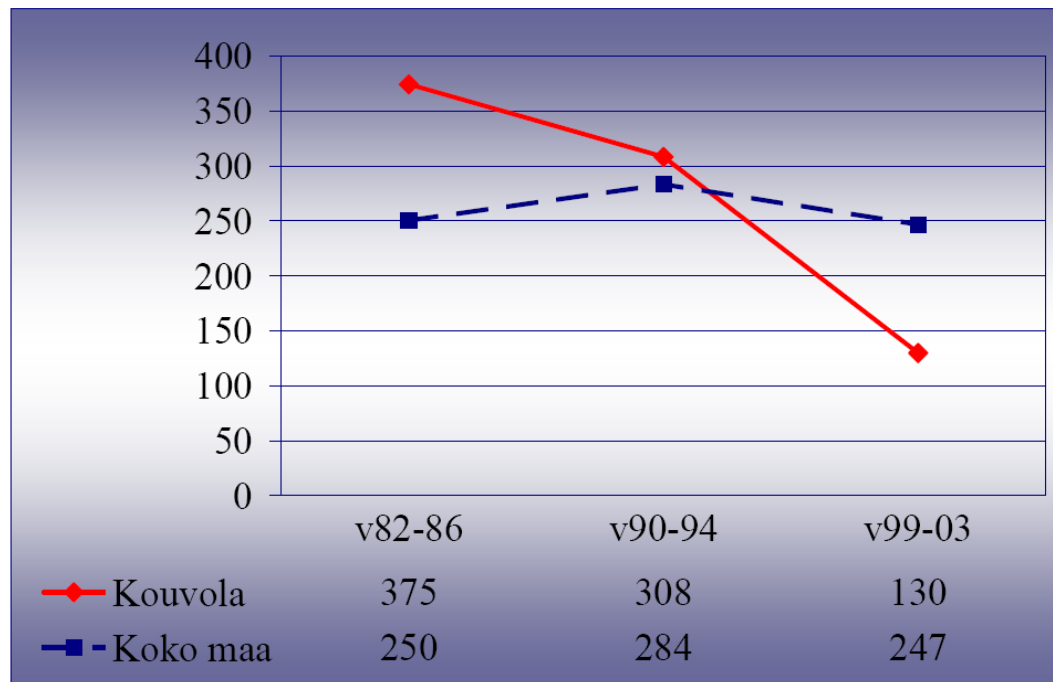
Miehet

Suicide (X60-X84,Y870)



Naiset

Suicide (X60-X84,Y870)



### Appendix 1.4: Injury situation in Kouvola 2004-2006

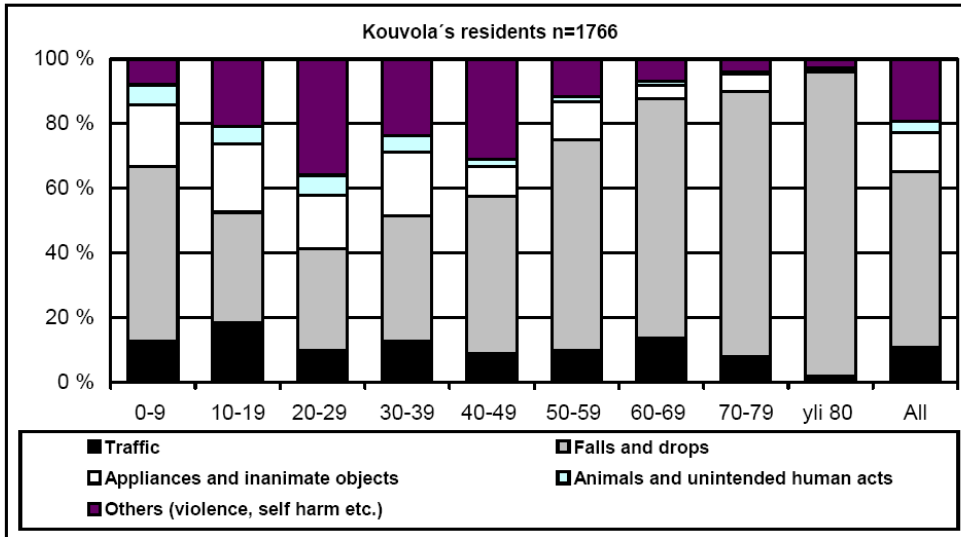


Table 1. External causes of injury by age in Kuusankoski regional hospital in 2004-2006 for Kouvola's residents.

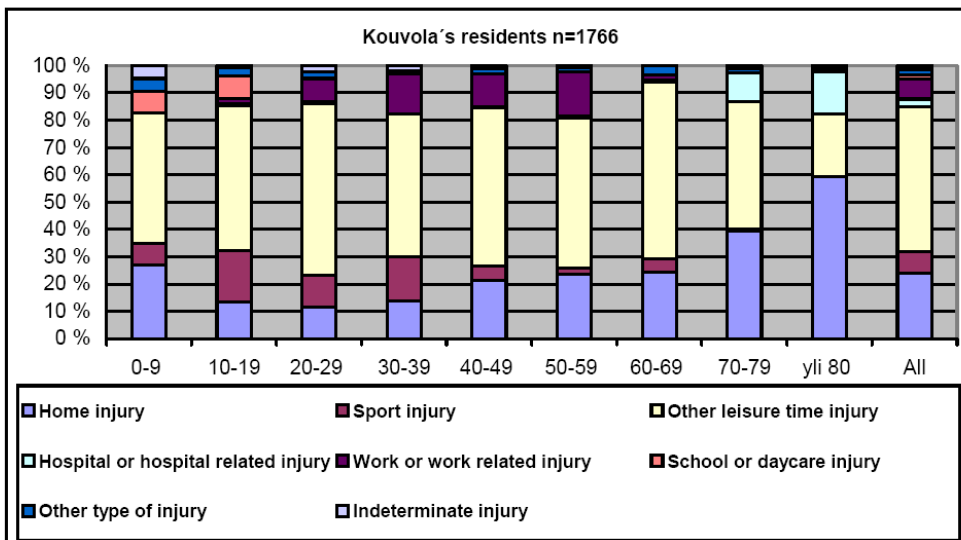


Table 2. Type of injury by age in Kuusankoski regional hospital in 2004-2006 for Kouvola's residents.

**Appendix 1.5: Crimes by type in Kouvola 1990-2005**

District	Year	Crime against property	Crime against person or health/ 1000 inhabitants
Kouvola	1990	134,1	7,5
	1991	102,6	4,4
	1992	96	6,9
	1993	104,8	6,4
	1994	98,9	6,9
	1995	89,1	7,9
	1996	80,9	8,2
	1997	85,5	6,4
	1998	81,3	7
	1999	84,1	6,8
	2000	93,6	6,9
	2001	92,6	5,8
	2002	93,1	7,2
	2003	90,7	6,2
	2004	99,6	9,6
	2005	80,1	7,1

## **APPENDIX 2: Safe School -concept**

### **SCHOOL SAFETY IN KOUVOLA**

The values of the comprehensive school curriculum of Kouvola are justice, responsibility, the ability to co-operate, respect for nature and the environment. Above all is the most important value - safety. Safety as a comprehensive concept is the cornerstone, which is meant to be reinforced by all the other values, which, in turn, are also based on it.

The subject of evaluation of the curriculum of the school year 2007-2008 is safety in everyday school work. Schools are instructed to consider safety through three questions: Why is your school a safe palace? Are there any defects in the safety of your school? How do you plan to improve the safety of your school? The results obtained are put together and necessary, common measures are agreed upon. In addition, the schools carry out their own goals.

#### The Safe School File

A Safe School File is used to reinforce the implementation of the comprehensive school and upper secondary school curricula in Kouvola. The file describes the characteristics of a safe school. It includes various procedures connected with safety, which have been carried out at schools, and which are prerequisite to the realization of a safe school environment. The goal of the file is to collect various instructions and operation models into a single entity, which is regularly updated at schools, and new employees are familiarized with it. The requirements of the school laws, the basic principles of the curriculum and regulations of the city of Kouvola have all been taken into account in the instructions, adapting them to the needs and situation of each school. Thus, the Safe School File is a natural implement of everyday school work. Naturally, the file gives instructions on critical situations, which rarely occur at schools, but the schools have to be prepared for them.

The goal of the file is to be a basic package, like the municipal curriculum, various sections of which the schools are able to update according to their own circumstances, plans and implementations.

An important, concrete implement of the safety file, is the checking matrix, which enables the schools to follow the condition and state of the various sectors. A matrix easily defines which measures must be taken at school and who is responsible for them. By means of a matrix, goals can be set, among other things, in connection with discussions on development in order to correct defects.

#### The Safety from Preschool Education to Upper Secondary School Program

The Educational and Cultural services of Kouvola are planning a program on safety education as a cooperation of the day care section and school services. The goal is to create versatile and logical contents for safety education ranging from day care to the upper secondary school. An additional goal is to standardize and articulate safety education

between different schools, and to give the teachers an implement for clarifying education to a systematic entity. The safety education programme will also be clarified in a form of a matrix, which easily shows the goals of various age groups and the progress made in different sections of safety education.

### Participatory approach

The subjects of school safety are the children and the youths, but also children's parents and people of the municipality.

Parents participate in school safety, among other things, by organizing and helping in organizing events. In parents' meetings, parents have taken part in planning common rules for educational principles etc.

The city of Kouvola home pages include a traffic game, which is based on pupils' ideas on situations from the immediate surroundings of schools. The pupils have also contributed to the description of situations. The game is regularly updated. The Kouvola home pages include a similar game for adults, as well. Everyone can, naturally, play both the games. The idea of the game is to get the pupils and all the other inhabitants of Kouvola, to participate in the process, in which a familiar traffic environment and proper behaviour in traffic are being studied and developed. Especially as a support for schools' traffic education, this kind of process gives an excellent implement to approach these themes from a traffic environment which is familiar to the pupils.

**Safety frame 28.11.07 Early childhood education and grades 1-2**

	Early childhood education	Preschool education	1st grade	2nd grade
<b>TRAFFIC</b>				
Traffic education: Traffic game, e.g. from 2nd to 3rd grade onward, update: task for the whole school, certain class as a model, e.g. 4th grade (the school decides on course of action), <b>process emphasized!</b> Assessment of traffic safety on foot, e.g. during biology or environmental education lessons Children in traffic files: In rural areas and in public transport	Home area and nearby excursions Reflector usage  Safety vests  Visit of police, fire brigade, an ambulance  Safe/Cautious movement >>>	Home area and nearby excursions Moving around alone Cycling and helmet usage  Safety vests  Visit of police, fire brigade, an ambulance  >>>>	Visitors, e.g. Police, Education organization of road traffic safety  Age group matters  "Traffic net" game    Safe schoolway	driving school,  Age group matters  "Traffic net" game
Water safety/ swimming Children in traffic file: Boating safety Safe behaviour in a boat	Dangers of water	Swimming schools	"Water grouping"  life jackets	Swimming school  moving on ice
<b>PROTECTION</b>				
Fire safety education Fire safety exercise Up-to-date information for the Educational Materials Centre	The phenomenon of fire  Lighting and putting out a candle	The phenomenon of fire  Lighting an putting out a candle		Visit from a fireman



Home area excursions connected with - fire brigade - electricity board - railway yard Physical violence				
Drug education Matters connected with dangerous substances, pharmaceuticals	Danger of pharmaceuticals etc. Drug needles		Danger of pharmaceuticals etc. Drug needles	
Preventing accidents - First aid Finnish Red Cross	"Help Eppu" file Electricity usage	"Help Eppu" file Electricity usage	Education in manners= noticing other child when moving around and playing  Reality and films	Education in manners= Noticing other child when moving around and playing  Reality and films
Media safety Age-adjusted contents (Internet safety)		Introducing the subject; discussion	on the content of media	At which age can children be introduced to the Internet?
External threat				
<b>PSYCHIC WELL-BEING</b>				
Bullying Update from KOHO-group	"A good pal"			
<b>MISCELLANEOUS</b>				
Sexual safety	Me and my body's limits		Pedophiles >>	
Where to get help/ group of experts			Telephone counselling service for children>>	

Safety frame 28.11.07

Age groups 3-9

	3rd grade	4th grade	5th grade	6th grade	7th grade	8th grade	9th grade
<b>TRAFFIC</b>							
Traffic education: Traffic game e.g. 2nd to 3rd grade onward, update: task for the whole school, certain class as a model, e.g. 4th grade (the school decides on course of action) <b>process emphasized!</b> Assessment of traffic safety on foot, e.g. during biology lesson Children in traffic files: In rural areas and in public transport	Visitors: Police, driving school, Education organization for road traffic safety  Age group matters  Updating "Traffic net" game, e.g. every second or third year	Age group matters  Updating "Traffic net" game, e.g. every second or third year	Visitors: Police, driving school, Education organization for road traffic safety Age group matters  Updating "Traffic net" game, e.g. every second or third year	Age group matters  Updating "Traffic net" game, e.g. every second or third year	Visitors, Police, driving school, Education organization for road traffic safety Age group matters  Updating "Traffic net" game, e.g. every second or third year	Age group matters  Updating "Traffic net" game, e.g. every second or third year  Moped courses	Age group matters  Updating "Traffic net" game, e.g. every second or third year
Water safety/ swimming Children in traffic file: Boating safety Safe behaviour in a boat	Swimming school	Swimming on PE classes > grades 3-9  Water traffic	E.g. with the help of swimming	clubs, life saving	societies etc.		
<b>PROTECTION</b>							
Fire safety education Fire safety exercise Up-to-date information for the Educational Material Centre		Visit from a fireman <	Visit to a fire station >		Visit from a fireman	No problem	
Home area excursions connected with - fire brigade, electricity board, - railway yard Lessons on violence grades 1-9		Legal education			Legal studies grades 7-9		

Drug education Matters connected with dangerous substances, pharmaceuticals	Danger of pharmaceuticals			Sidetrack	How to behave if you meet an intoxicated person? How to say "No" politely to someone who offers you drugs?		A-clinic fund
Preventing accidents - First aid Finnish Red Cross First aid courses on upper grades Self-protection  Electricity usage  Fireworks grades 3-5	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils	Education in manners= noticing the other child when moving around and playing  Reality and films  Assessment of safety made by the pupils
Media safety (Internet safety)	At which age can children be introduced to the Internet?		Chat, what information do you	give out about yourself?	Responsibility for behaviour in the Internet >> legality	"Legal studies on the media">>>	
External threat							
<b>PSYCHIC WELL-BEING</b>							
Bullying Update from KOHO- group							
Prefect class activities School prefect activities				Prefect class activities ( 6th graders as prefects for 1st graders)	School prefect activities, grades 7-9 Legal education		
<b>MISCELLANEOUS</b>							
Sexual safety	Pedophiles >>>>		Terveystieteiden tunnit >				
Where to get help/ group of experts	Telephone counselling service for children>				Telephone counselling service for youths>		

Safety frame 28.11.2007

Upper secondary school

	1st age group	2nd age group	3rd age group
<b>TRAFFIC</b>			
Traffic education:	Driving without a driver's licence - tuning the engine	Driver's licence/attitudes Majority (applied course)	Driver's licence/attitudes Majority (applied course)
Water safety/ swimming	Alcohol>>>>>		
<b>PROTECTION</b>			
Fire safety education Fire safety exercise Up-to-date information for the Educational Material Centre	Rescue strategy, presented by experts	Rescue strategy, presented by experts	Rescue strategy, presented by experts
Home area excursions connected with safety education  Lessons on violence grades 1-3			
Drug education Matters connected with dangerous substances, pharmaceuticals	Alcohol, health education	Alcohol/drugs, health education	Alcohol/drugs, health education
Preventing accidents - First aid Finnish Red Cross First aid courses adapted to the upper secondary school	Physical education  Correct sports technique and equipment	Physical education  Correct sports technique and equipment	Physical education  Correct sports technique and equipment
Media safety (Internet safety)	Giving out information about yourself, "dates"	Giving out information about yourself, "dates"	Giving out information about yourself, "dates"

External threat			
<b>PSYCHIC WELL-BEING</b>			
Update from KOHO group	Bullying in the Internet (pictures...)	Bullying in the Internet (pictures...)	Bullying in the Internet (pictures...)
Prefect class activities School prefect activities			
<b>MISCELLANEOUS</b>			
Sexual safety	Diseases, health education	Diseases/pregnancy, health education	Diseases/pregnancy, health education
Where to get help/ group of experts			

Safety work group:

Sami Arponen, Marjo Hienonen, Jari Moberg, Johanna Paronen/Helena Suojalehto/Marjut Viantie, Juha Uutela, Sakari Viinikainen and Osmo Ylönen (chairman)

## **APPENDIX 3: Stakeholders of Safe Community Kouvola**

### Partners of Regional Safety working group

City of Anjalankoski  
Municipality of Elimäki  
Municipality Iitti  
Municipality of Jaala  
City of Kouvola  
City of Kuusankoski  
Municipality of Valkeala  
Health Centre of Kouvola Region, Environmental Protection Unit  
Health Centre of Kouvola Region, Health Promotion Unit  
Kouvola Jurisdictional District  
Federation for Probation and Aftercare  
Crime victims' service  
Federation for Traffic Safety  
Red Cross in Southeastern Finland  
Kymi Military County  
Rescue Services of Kymenlaakso  
Road Administration  
State Railway Company VR Cargo Oyj

### Partners of Council for the Elderly

Pensioners' organizations  
All sectors of city administration

### Partners of Council for the disabled

Organizations of the disabled  
Political groups represented in the City Council  
All sectors of city administration

Neighborhood associations

Manski federation of the Kouvola City Centre

Parents' associations

Mannerheimin lastensuojeluliitto

VAPEPA/Red Cross in Southeastern Finland

Society for Mental Health in Kouvola

Surunauha ry

Sports organizations

## APPENDIX 4: Work program for Safe Community Kouvola 2008-2013

Risk Group	Action	2008-2010	2011-2013	Responsibility
Children	Safe Daycare program and follow up	Compiling phase	Implementation and follow-up	Education sector & children's safety working group
	Further development of planning praxis involving the children in planning their own safe environment	Continuing from the pilot and creating indicators for follow up	Evaluation of the results and usefulness of the indicators	
	Policy program for children and families	Compiling phase	Implementation and follow-up	Social sector & children's safety working group
Youth	Safe School	Program to all schools & Implementation	Evaluation of progress	Education sector
	Involving the parliament of the youth in safety work	Creating the working model & implementation	Evaluation of the progress	Youth work
	Campaigns for safe evenings and weekends & prevention of intoxicant abuse	Developing the present working models	Evaluation of the progress	Youth work & voluntary actors
Families	Policy program for children and families	Compiling phase	Implementation and follow-up	Social sector & children's safety working group
	Action program to prevent domestic violence	Compiling phase	Implementation and follow-up	Social sector, police & voluntary actors
Work aged	Campaigns to prevent alcohol abuse	Intoxicant strategy	Implementing the intoxicant strategy	Social sector & Health care center
	Campaigns to safeguard renovation work in leisure time	Working models to be created	Working models to be implemented	Health care center

	Prevention of suicides	Work models to be created	Working models to be implemented	Social sector, Health care center & voluntary groups
Elderly	Follow up of the accessibility program  Campaigns for home safety  Campaigns for exercise  Creation of 3G parks in Kouvola	Continuation of the work  Planning, realization and follow up  Planning, realization and follow up  Participation in a development project	Continuation of the work  Planning, realization and follow up  Planning, realization and follow up  Construction of the parks and follow up	Council for the elderly  Council for the elderly, health care, rescue services  Council for the elderly, health care, sports organizations Council for the elderly, all sectors and sports organizations
Disabled	Follow up of the accessibility program  Creation of parks suitable for the disabled	Continuation of the work  Planning and construction	Continuation of the work  Follow up	Council for the disabled  Council for the disabled, all sectors and sports organizations
All groups	Creation of suitable set of indicators to follow up the safety development  Enhancing participation of the citizenry in the safety work, creating the feed back systems	Collecting data and development of indicators  Developing the working models and implementation	Implementation and evaluation  Evaluation and recognition of further development needs	Coordinating group and all sectors  Coordinating group and all sectors



# APPENDIX 5: Injury Registration and Prevention Project of Kouvola Region (Start) – Concept and TAPE© -tool

## INJURY REGISTRATION AND PREVENTION PROJECT IN FINLAND

Contact information: Ilona Nurmi-Lüthje, Ph.D., Project Manager, ilona.nurmi-luthje@kstk.fi

### BACKGROUND AND AIM

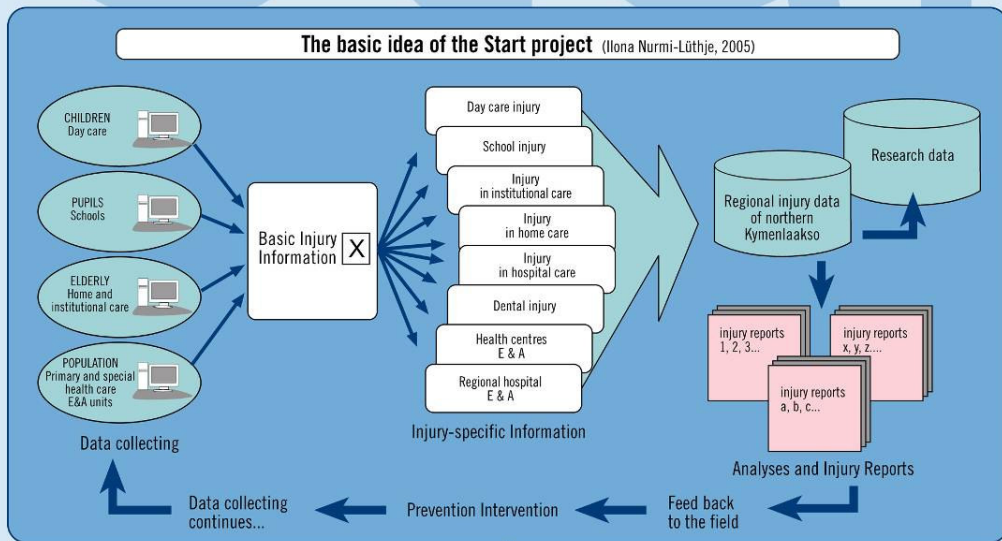
A worrying amount of injuries takes place in Finland every year. However, systematic injury registration is mainly lacking. Injuries cause remarkable suffering for the victims and costs for the society. The estimated cost of home and leisure injuries alone were 2.5 to 4 billion euros in 2001 (Salomaa 2003).

More detailed information of to whom, how, when and where the injuries take place as well as of the effectiveness of the interventions is needed in order to prevent the injuries. A tool for this purpose will be developed in the present Start project. No previous corresponding projects have been accomplished in Finland.

The project takes place in Kouvola Region, south-eastern Finland

### GOALS

- to create a regional IT-based system for collecting and reporting injury data, in order to
  - enable the evaluation of the effectiveness of the prevention interventions
  - enable the use of the data for injury research
- to create, in a long run, a national reference center for injury information in Kouvola Region



### PROJECT FIELDS

- primary health care (including dental care), special health care, social care and schools

### PROJECT ADMINISTRATION

- Health Centre of Kouvola Region

### FINANCIAL SUPPORT

see below

### EFFECTIVENESS

**EFFECTIVENESS OF INTERVENTION IS MEASURABLE**

= changes (decrease/increase) in

- number of injuries
- prevalence of injuries
- incidence of injuries
- injury profiles

### RESULT

- an IT-system that produces information prospectively about injuries which occur in different units and areas in Kouvola Region
- a tool for systematic injury prevention
- Kouvola Region is a reference region in injury statistics in Finland



## **Appendix 5.1: Short description of TAPE<sup>®</sup>-tool and variables used**

TAPE- a web based software for injury registration and prevention: Variables that are recorded on the accidents in different environments

### ACCIDENT VARIABLES IN THE INSTITUTIONAL OR HOSPITAL CARE

Gender, age; date of accident; time of accident; staffs working shift; brief description of accident; type of accident (in case of a fall, direction of falling); did the accident take place indoors or outdoors; scene of the accident; activity of the patient or inhabitant at the time of the accident; was the patient or inhabitant wearing hip protectors at the time of the accident; internal cause or causes of the accident; external cause or causes of the accident; were other persons present when the accident took place; classification of the patient or inhabitant according to his/her length of stay in the institution or hospital; did the patient or inhabitant sustain an injury or pain (if yes, the anatomical location of the injury and the type of injury); did the injuries require additional or further medical examinations; where was the injury treated; for how long was the patient or inhabitant waiting for help after the accident; was the accident caused by another patient or inhabitant

### ACCIDENT VARIABLES IN THE RESIDENTIAL CARE AND HOME CARE

In addition to those used in institutional or hospital care:

How did the inhabitant get help after the accident

### ACCIDENT VARIABLES IN THE CHILDREN'S DAY CARE

Gender, age, date of accident; time of accident; brief description of accident; type of accident; did the accident take place indoors or outdoors; factors related to indoor accident; factors related to outdoor accident; accident situation; scene of the accident; number of children at the accident scene; number of educational staff at the accident scene; children to staff ratio; was the day care unit staffed according to the regulation; did the child sustain an injury or pain (if yes, the anatomical location of the injury and the type of injury); where was the injury treated; was the accident caused by another child

### ACCIDENT VARIABLES IN COMPREHENSIVE SCHOOL AND HIGH SCHOOL (variables vary according to the grade in question)

Gender, age, date of accident; time of accident; brief description of accident; grade; type of accident; did the accident take place indoors or outdoors; scene of the accident; factors connected to indoor accident; factors connected to outdoor accident; accident situation (if the accident took place on the way to/from school, was the pupil/student wearing a helmet and other protective equipments when skating or roller skating ; was a pupil/student wearing a helmet when bicycling, motorcycling or driving a moped); did the pupil/student sustain an injury or pain (if yes, the anatomical location of the injury and the type of injury); immediate treatment of the injury; further treatment of the injury; was the accident caused by another pupil/student

All the variables are structured (except the brief accident description).