

Conclusions The research revealed that OHSAS 18001 certification contributes strongly to formal safety elements. However – its contribution to the real safety elements was partial, e.g., to such elements as top management commitment to the safety policy, dissemination of safety policy and resources. For many real safety elements strong demands from corporations influence safety activities more than requirements derived from OHSAS 18001 standard, for example suggestions for improvements; general communication procedures; promotion, rewards and career planning and safety knowledge among supervisors, line managers and top managers. Concerning combined elements, many of them – such as workplace hazards analysis, assessments of working environment, evaluation of safety training needs are dependent on OHSAS 18001 certification.

421 COALITION BUILDING TO ADVOCATE FOR SAFER PASSAGE TO AND FROM SCHOOL IN KENYA

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Background In Kenya, many of the crashes involving children occur as they are travelling to and from school. The number of children who have died in the last five years is the equivalent to the loss of two entire primary schools. The legal framework in Kenya is insufficient to address this problem.

Description of the problem Multiple organisations in Kenya worked on improving the safety of children going to and from school, but from different angles. Usalama Watch Initiative focused on creating crosswalks, ASIRT Kenya educated school children on road safety, Gertrude's Children's Hospital treated victims, and Handicap International worked to enforce speed laws. A cohesive voice was needed to tackle the root problem—speed reduction to 30 km/h as recommended by the World Health Organisation and United Nations Economic Commission for Europe.

Results In 2014, the various civil society groups working on road safety joined to form the Kenya Road Safety Taskforce, and began advocating for the Traffic (Amendment) Bill, 2014. The bill would reduce speeds around schools to 30 km/h, create designated crosswalks, and set school transport standards. The Taskforce created a joint strategy to garner political and public support for the bill, tapping into each organisations' strengths and network. As a Taskforce, they received the support of key government entities, including the National Transport Safety Authority, Kenya Parliamentary Human Rights Association, and Kenya Women Parliamentary Association.

Conclusions By creating a coalition, organisations were able to mobilise each other's resources, including political and media contacts, to advocate for the bill's passage.

422 SCOTLAND'S BIG BOOK OF ACCIDENT PREVENTION

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Background The over-arching goal of the Scottish Government is to 'make Scotland a better place to live and a more prosperous and successful country'. Subtitled 'Accident Prevention- a leading

priority for Scotland' this document highlights the better outcomes for the health of Scotland's population that can be achieved by partnership working in the areas of accident prevention and safety awareness.

Description The document acts as a touchstone for practitioners providing useful insights into 'what works' and a manifesto for RoSPA in Scotland delineating the role the charity plays in setting the unintentional harm prevention agenda in Scotland and the wider United Kingdom.

Results Endorsed by leaders within Scotland's Accident Prevention community the document clearly identifies why accident prevention should be the top priority for public health. Approximately 30% of Accident and Emergency attendances in Scotland are due to accidental injuries, the financial burden associated with this burden is unsustainable, requiring more resources, a challenge in a period of austerity or early intervention, accident prevention being the easiest and cheapest way to save a life. Scotland's Big Book of Accident Prevention presents case studies linked to the positive benefits of early intervention which can be easily adapted and adopted by organisations across the globe to reduce the burden of injury on the global economy.

Conclusions In Scotland, accidents cost Society more than £12.4 billion per annum, of which Accident & Emergency attendances cost the NHS £1.48 billion. Accident prevention strategies as outlined in Scotland's Big Book of Accident Prevention are clearly identified as being 'low cost and high impact' contrasted with the expense of healthcare linked to unintentional injury.

423 STRENGTHENING LEGISLATION FOR IMPROVED ROAD SAFETY IN THAILAND

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Background Following the United Nations General Assembly resolution 64/255 proclaiming a "Decade of Action for Road Safety 2010–2020", Thailand developed a Road Safety Master Plan and established an inter-ministerial coordinating mechanism. Road safety legislation and proper enforcement are essential for achievement of the Road Safety Master Plan. Half way through the Decade, it is vital to review the established road safety management structures and existing legislation to identify areas of further improvement.

Methods An institutional and legislative assessment was conducted outlining institutions involved in national road safety activities, their roles and responsibilities. The legislative review explained the steps and timeframes of road safety legislation and specified parliamentary committees and other institutions involved in the process. A preliminary review of national road safety laws and regulations was conducted, taking into account previous analyses and reviews.

Results Thailand has a lead institution and a national structure to drive the Road Safety Master Plan. It is complemented by sub-committees following the UN's Five Pillars. Despite these mechanisms, the structures rely mainly on politicians who are members to hundreds other committees, resulting in sporadic meetings and dysfunctional operation. Evidences suggest that mismanagement of manpower, ineffective enforcement and the public awareness of road safety laws contributed to the status quo. The review shows that Thailand has most of the necessary laws, yet road traffic fatalities remain high. Several areas for new legislation and

amendments were identified along with the need for clearer regulations for strengthened enforcement.

Conclusions To achieve the Master Plan Thailand needs to improve its road safety management system, make coordination at all levels more effective, strengthen law enforcement including heavier penalties, amend several road safety laws and promulgate new laws.

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IMPROVING STATE DRUG OVERDOSE FATALITY (DOF) SURVEILLANCE USING POLICY AND EPIDEMIOLOGICAL TOOLS

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Background Kentucky (Ky) had the 2nd highest DOF rate in the U.S. in 2012 (25/100,000) mainly due to prescription drug (PD) overdose (PDO). In response, Ky enacted comprehensive PDO prevention laws. The law evaluation required death certificates (DCs) with accurate drug overdose data.

Methods In KY, DCs are completed by elected county coroners. In 2011, 30% of the Ky DCs did not list any drugs contributing to DOFs, underestimating the burden of PDO deaths. DOF reporting based on a DC data alone didn't allow monitoring of PDO by specific drugs and identifying sources of diversion.

Results To improve the completeness of DOF data Ky enacted a law in 2013 (KRS72.026) requiring the coroners to test for controlled substances postmortem if a cause of death was not clearly established; the toxicology testing is performed by an accredited national laboratory, and is paid by the Kentucky Medical Examiner Office (MEO). KY's Chief Medical Examiner reviews all of the test results, and follows up with a review of DCs, and consultation with coroners on a case-by-case basis. Two years after law implementation, there is a significant increase in completeness of DOF data. To further improve the quality of DOF data, the MEO expanded coroners' education and supplemented autopsy reports with DC cause of death completion suggestions. The OME and Ky Injury Prevention and Research Centre expanded the KyDOF surveillance, incorporating DC, death investigation, autopsy, toxicology, and prescription drug monitoring data. New epi tools were introduced to analyse the comprehensive KyDOF data. Data showed the PDO prevention laws contributed to better prescribing and decreased diversion of historically abused medications (e.g., oxycodone, alprazolam); and identified heroin and fentanyl (mostly illicitly manufactured) as emerging drugs of abuse.

Conclusions Quality DOF data are critical to inform targeted policy interventions and evaluate effectiveness.

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CHILD INJURY PREVENTION IN CHINA, EVIDENCE BASED POLICY DEVELOPMENT

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Background As infectious diseases have well controlled and become less common, death due to injury has become the leading cause of mortality among children aged between one and 18 years in China. Every year, more than 80,000 Chinese children

die due to unintentional injury, and at least 10 million under the age of 18 are injured, of whom 8 million are treated in hospitals.

Methods In recognition of this, UNICEF has developed country program on child injury prevention (CIP) and strategic support on advocating government policy and implementation of CIP. The evidence of child injury issues has been presented to the government through population based child injury survey in Beijing City (2003) and Jiangxi Province (2005), and it has been confirmed that injury is the leading cause of death for children in China. As requested by government, the CIP project in China aiming on policy advocacy and CIP intervention have been developed in UNICEF cooperated project with government of China.

Results National policy on CIP developed by National Working Committee for Children and Women through China National Program for Child Development (2011–2020). One sixth reduction of child injury mortality target goal set up in this national plan. Child injury prevention pilots supported by UNICEF developed through implementation safe home, safe school, and safe community activities. The CIP implementation sites has increased from beginning 3 counties supported by UNICEF to 29 counties by both government and UNICEF so far.

Conclusions The results of CIP project show that it is feasible to implementing child injury prevention through established government service system from health, education, community, and public security and safety etc. The evidence for advocating CIP development, demonstration of CIP implementation, and technical support on guidance of safe home, safe school, safe community, and monitoring system needed to help government building CIP system.

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COMMUNITY PARTICIPATION IN LAW ENFORCEMENT IN ROAD SAFETY – YANGON, MYANMAR

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Background Myanmar is expressing escalating level of fatalities as motorization increases. Agencies acknowledged the existing weakness in proper data system, weakness in legislation, insufficient funding, a need for measurable road safety targets and lack of effective and scalable implementation to address risk behaviour.

Police commanders and road safety professionals have a responsibility to think strategically about traffic policing and enforcement. Police must actively work with partners and the community, working together for common aims. Myanmar Traffic Police, Yangon division introduced OCC (Online Complaint Centre) where the police and community share a partnership in the broadest sense for responsibility and accountability for road safety.

Methods From the mobile phones social application 'Viber' is used to upload photo and reports of those who broke the traffic rules or commenced risky behaviour to Yangon Traffic Police on hotline number.

The traffic police interact transparently and appropriately with alleged citizens, advertise the vehicle numbers in daily newspapers and weekly journals and penalise according to the existing laws together with Road Transport Administrative Department, City Development Committee and multi bus line control committee.