1041

## EFFECTIVE INFORMATION CAMPAIGN FOR MANEAGEMENT OF EXPOSURE TO HAND-ARM VIRRATION

<sup>1</sup>Riitta Sauni, <sup>1</sup>Pauliina Toivio, <sup>2</sup>Esko Toppila, <sup>1</sup>Rauno Pääkkönen, <sup>1,3</sup>Jukka Uitti. <sup>1</sup>Finnish Institute of Occupational Health, Tampere, Finland; <sup>2</sup>Finnish Institute of Occupational Health, Helsinki, Finland; <sup>3</sup>Clinic of Occupational Medicine, Tampere University Hospital, Tampere, Finland

10.1136/injuryprev-2016-042156.1041

Background European Directive 2002/44/EC defines employers' responsibilities in the risk management of hand-arm vibration (HAV). However, the directive is still not completely implemented in all risk industries.

Methods The aim of our study was to determine whether it is possible to improve the recognition and management of the risks of HAV at workplaces with a one-year information campaign. A questionnaire on opinions and measures for controlling HAV exposure at workplaces was sent to all occupational safety representatives and occupational safety managers in the construction and metal industry in Finland (n=1887) and once again to those who responded to the first questionnaire (n=961) one year after the campaign.

Results The campaign increased recognition of HAV in risk assessment from 57.0% to 68.3% (p = 0.001), increased measures to decrease exposure to HAV from 54.6% to 64.2% (p = 0.006), and increased the number of programmes to control the risks due to HAV (p < 0.001).

Conclusions The information campaign, which focuses on the construction and metal industries, proved to be effective in increasing the awareness of the risks of HAV and the measures needed to control exposure to HAV. A similar campaign can be recommended in the case of risks specific to certain occupations.

1042

## SAFETY CARD TRAINING FOR SOCIAL AND HEALTH SERVICES

Camilla Volanen. The Finnish Association of Fire Officers, Finland

10.1136/injuryprev-2016-042156.1042

Background First Safety forum for social and health services was organised in 2005. It brought together safety authorities and professionals in social and health services to discuss safety issues. The forum awoke need for national safety training for social and health services. The Finnish Association of Fire Officers started developing Safety card training for social and health services immediately and first trainings were held in 2006.

Board for safety in social and health services develops the training material constantly. President of the board is safety manager Anna Tamminen from the Joint Municipal Authority of the Pirkanmaa Hospital District. The board also has members from:

- The Finnish Association of Fire Officers
- The Finnish National Rescue Association SPEK
- · Ministry of Social Affairs and Health
- · National Institute for Health and Welfare
- · rescue departments
- The Finnish Union of Practical Nurses SuPer
- Tehy The Union of Health and Social Care Professionals in Finland
- the Association of Finnish Local and Regional Authorities

Methods The Safety card training for social and health services is meant for all employees and students in social and health services. It gives the employee tools for accident prevention and how to act in a case of an emergency. Duration of the training is one day and people who have completed the course receive a certificate card that is valid for five years. The training emphasises role of employee in risk prevention and includes theory, group work and optional practical exercise.

Results Safety card training for social and health services has been regarded very good training and you can emphasise different things depending on the target group. It is a basic safety training which guarantees employers certain basic level of safety training. There are nearly 30.000 people who have taken the safety card training.

**Conclusions** Safety of the social and health services should still be developed and the training material should be updated according to needs from the field. National safety training should be adopted even more widely and it should be a mandatory part of education in social and health services. There could also be international potential in safety card concept.

1043

THE DISTRICT LEVEL -ROAD TRAFFIC ACCIDENT INVESTIGATION TEAM DEVELOPMENT FOR SOLVING PROBLEM SYSTEM IN 9 TH REGIONAL HEALTH OFFICE, THAILAND, 2013 – 2014

<u>Kanjana Yangkao</u>, Kanyarat Srakaew. *The Office of Disease Prevention and Control 9 ,Th Nakhonratchasima Province,Thailand* 

10.1136/injuryprev-2016-042156.1043

Background In 2013, Thailand ranked the world's third in highest road fatalities. To solve the problem, A data collection should be collected systematically including person, place, time, risk behaviour, risk factor and process of working. So, a development program should be held in order to enhance investigation and data analysis skills for creating specific measures.

Methods This project was purpose for enhancing the team investigation-skill efficiency in order to solve the road traffic accident problem by using the investigated data. The action research is used for developing the mutidisciplinary field road traffic investigation teams. The program is provided in 46 district in 9 th Regional Health Office from October 2013 to September 2014. Results Two teams from 46 teams can create two specific measures, Firstly the 97 community checkpoints manage by the villagers at Phutthaisong district in Burirum province. In Songkran festival 2014, They prohibited 325 drunken villagers from driving. The result showed that the injury from road traffic accidents decrease 72% from last year. The other measure is rest area on

**Conclusions** As the result of the project every district should have the road traffic accident investigation with intensively training to analyse the data, investigate the cause of accident and suggest the way to solve problem to the related local government office.

main road in order to prevent drawsy driving by network co-

operation at Kaengkhro district in Chaiyaphum province.

1044

## COLLECTING LEISURE TIME ACCIDENT INFORMATION FROM EMPLOYEES

Toni Hyytinen, Jouni Kivistö-Rahnasto. Tampere University of Technology

10.1136/injuryprev-2016-042156.1044

Background Most accidents occur during leisure time and therefore advanced companies have started to promote leisure time safety at the workplaces. Problem has arisen that employers do not know how much and what kind of leisure time accidents occur to their staff. Therefore, comprehensive leisure time accident information would be important when companies target promoting to right areas of leisure time safety. The aim of this study was to find out effective methods to collect information of leisure time accidents from employees.

Methods Methods for collecting leisure time accident information were contructed and tested in four case companies. In total, five different kind of collecting methods was planned, implemented and validated in cooperation with the case companies.

Results Collecting leisure time accident information was successful with three of the five tested methods. In total, 324 leisure time accident cases were reported by employees with tested methods in four case companies.

Conclusions Experiences of this study suggest that informing and marketing are more important factors in successful collecting of leisure time accident information than actual method to collect. Adding collecting to already existing method rather than creating a totally new one could also improve chances of successful collecting.

#### 1045

## DETERMINANTS OF TREATMENT SEEKING BEHAVIOUR FOLLOWING INJURY IN MARINGÁ, BRAZIL

<sup>1</sup>Nicole Toomey, <sup>1,2</sup>João Ricardo Vissoci, <sup>1,3</sup>Michael Haglund, <sup>1,3</sup>Catherine Staton. <sup>1</sup>Duke Global Health Institute; <sup>2</sup>Faculdade Ingá; <sup>3</sup>Duke University Medical Centre

10.1136/injuryprev-2016-042156.1045

Background Injury accounts for 6% of all disability adjusted life years lost. Current research on access to care and injury does not account for injury severity or levels of health care. Our project aims to determine what barriers to injury care arise in Brazil's universal health care system.

Methods Households were randomly selected in Maringá between May 2015 and September 2015. Demographic information was collected for the household; one individual was randomly selected to provide injury history. A chi-square analysis found the association between care-seeking and demographic variables. A preliminary significance level of  $\alpha=0.20$  was used for inclusion of variables. A full multivariate logistic regression model and thirty reduced models were run. Mean squared estimate and Akaike Information Criterion were calculated to find the best predictive model.

Results Of the 2678 households and individuals sampled, 30.3% of individuals reported a lifetime injury. The univariate analysis found that gender (p = 0.034), injury cause (p < 0.001), race (p = 0.051), severity (p = 0.103) and insurance status (p = 0.026) were predictors of seeking care. Income, and age were included in the multivariate model due to significance in the literature. Based on this model, Burn victims had an increased odds of 7.92 of not seeking care compared to road traffic incident victims; this increased odds was also seen when stratifying by gender (OR = 9.49 for women, OR = 8.23 for males). For all injuries, being male had a protective effect on seeking care

(OR = 0.64); women had higher odds of not seeking care (OR = 1.30)

Conclusions Cause of injury and socioeconomic status factors are a major predictor for seeking care, as are factors related to socioeconomic status. Cause potentially masked the effects of gender on care seeking. More research needs to be done on specific causes of injuries, the role of gender, and why socioeconomic status is still a barrier to care in a universal access system.

#### 1046

# THE CANADIAN INJURY PREVENTION TRAINEE NETWORK: BUILDING CAPACITY FOR THE FUTURE OF INJURY PREVENTION RESEARCH

1-2.3 Sarah A Richmond, <sup>1</sup> Amanda M Black, <sup>2</sup> Liraz Fridman, <sup>4</sup> Allison Ezzat, <sup>2</sup> Tessa Clemens, <sup>5</sup> Ian Pike, <sup>2</sup> Alison Macpherson. <sup>1</sup> Sport Injury Prevention Research Centre, Faculty of Kinesiology, University of Calgary, Canada; <sup>2</sup> Faculty of Kinesiology and Health Sciences, York University, Canada; <sup>3</sup> Child Health Evaluative Sciences, Hospital for Sick Children, Canada; <sup>4</sup> School of Population and Public Health, University of British Columbia, Canada; <sup>5</sup> Department of Paediatrics, University of British Columbia and BC Injury Research and Prevention Unit, Child and Family Research Institute, Canada

10.1136/injuryprev-2016-042156.1046

Background Injuries are a serious but preventable health concern in Canada and a growing field of research, attracting a large number of graduate students and other trainees across Canada to identify injury prevention as their field of study. In 2009, the Canadian Institute for Health Research funded a team in Child and Youth (C&Y) Injury Prevention. With this support, the team was able to develop a model of practice involving researchers, stakeholders, knowledge users, and trainees as part of a multidisciplinary approach to reducing the burden of injury in youth. The C&Y team was successful at supporting and highlighting the work of over 40 team trainees. The efforts of this trainee team have resulted in the formation of the Canadian Injury Prevention Trainee Network (CIPTN).

Objective The CIPTN aims to build a network of trainees interested in the science and practice of injury prevention (IP) from a multi-disciplinary perspective. Specifically, the goals include increasing opportunities for collaboration, professional development, mentorship and networking.

Results The CIPTN has worked to develop a list of learning and research oriented catalyst activities for trainee members. The CIPTN has successfully collaborated with IP experts and organisations from across Canada in the development of a comprehensive IP resource, as well as updating the Canadian Injury Prevention Curriculum, a course for IP practitioners across Canada. Further, an executive board and governance structure has facilitated the identification of future collaborative activities (e.g., bi-monthly seminars, grant writing, and evaluating an injury methods workshop).

Conclusions The CIPTN increases opportunities for junior researchers and trainees to work within a network of colleagues to share research, build collaborative projects, expand capacity, and provide training opportunities. This in turn, will develop the quantity and quality of IP science and practice across Canada for future generations.