

### 3C.005 BUS PASSENGER INJURY – A DIFFICULT PROBLEM TO ANALYSE

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**Background** Recently in Great Britain, there has been a general decrease in the number of incidents resulting in injuries to bus passengers. However, in London the numbers of bus passenger casualties have increased since 2012, rising from a 31% share of the GB total in 2012 to 44% in 2016.

**Methods** Two datasets were analysed to explore the problem of bus passenger injury on London buses over a five-year period (2012–2016 inclusive); the STATS19 police collision data for Greater London and the Transport for London (TfL), Incident Reporting Information System (IRIS) containing bus operator reported passenger incident data.

**Results** In total 5,699 incidents were reported in STATS19 where at least one bus or coach passenger was injured and 7,043 reported casualties. In contrast the IRIS data reported 20,490 incidents and 21,998 injured passengers. In STATS19 non-collision incidents predominated (81%), and ‘slip, trip, fall’ was the main injury event (58%) in the IRIS data. STATS19 data classified injury severity as ‘slight’ (93%), ‘serious’ (7%) or ‘fatal’ (<0.1%). of the IRIS data only 6967 (32%) records contained useful injury description data, described as ‘minor’ or cuts, abrasions or bruises. However, 35% of the useful records reported injury mechanisms, e.g. ‘bump’ or ‘crush’ and not an injury descriptor.

**Conclusion** The lack of detailed injury information is a problem to understanding the severity of bus passenger injuries. High level severity information is collected in STATS19, but the IRIS dataset would benefit from better use of the ‘language’ of injury to differentiate description from mechanism.

### 3C.006 ENABLING JOURNALISTS TO CONTRIBUTE TO THE ROAD SAFETY SYSTEM: EXPERIENCE FROM NEPAL

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**Context** There are daily media/news reports of road traffic crashes in Nepal mostly focusing on the number of people killed or injured. Few consider the causes, impacts or preventability. Media is recognised as a major stakeholder in road safety. We aimed to engage journalists in Nepal to improve the quality of their reports.

**Process** We conducted three road safety reporting workshops for journalists over a period of 9 months. WHO Guidelines, translated into Nepali, were used to explore writing stories using different ‘story ideas.’ We evaluated participant response to the training using a questionnaire after the third workshop and monitoring new media reports through a closed Facebook group.

**Analysis** 31 participants representing 23 media outlets attended at least 2 workshops. 13/31(42%) completed the evaluation questionnaire; 10/13 (69%) found the reporting checklist and

stories from other journalists inspirational; 12/13 (92%) spoke to their Editors about using the resources. Journalists working for Nepali media were more likely to respond positively than from English language outlets.

**Outcomes** Monitoring the Facebook group revealed that the WHO guidelines have (i) been implemented across multiple types of media (print, online, audio, photography) (ii) helped raise the profile of road safety by increasing the space allocated to the subject (iii) 15/31 (48%) participants have adopted at least one of the WHO ‘16 story ideas.’

**Learning Outcomes** It is possible to engage journalists to improve road safety reporting in Nepal. Participant selection for workshops should be through engagement of Editors to maximise application of learning.

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### 3D.001 POST-CRASH TRAUMA CARE: FIRST-RESPONDER TRAINING FOR THE TRAFFIC POLICE IN MAKWANPUR, NEPAL

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**Context** Road crashes are the 7th leading cause of mortality in Nepal, but there are poorly developed nationwide emergency medical services. Contributing to achieving SDG 3.6 to reduce deaths from road crashes, we designed and evaluated the feasibility of a bespoke first-responder training programme for traffic police in Nepal.

**Process** Interviews with traffic police informed course design. 29 officers in Makwanpur District completed before and after knowledge and confidence assessments prior to a 3-day first-response course. Police teams were supplied with first response packs and asked to complete report forms when first-responder skills were used. Follow-up assessments and interviews at 6-months explored retention and experiences of applying first-response skills.

**Analysis** Pre-course assessments showed that although 97% of participants believed giving first-aid was their responsibility, knowledge and confidence levels were low and minimal training was reported. 95% had experience of transporting road crash victims to hospital. Post-test knowledge scores improved by 40% to 75%. Confidence levels improved post-course and remained high at 6-months.

**Outcomes** During 6-months follow up, 27 participants attended 303 crashes where people were injured. 44% of participants used at least one first-response skill from the course; applying skills on 92 occasions, however only 3 report-forms were completed. Barriers to providing at-scene treatment included; patients already transported to hospital prior to police arrival; resistance from relatives/bystanders and competing police duties.

**Learning Outcomes** Delivering the first-response programme for the traffic-police is feasible and knowledge and confidence can be retained. Barriers to using and reporting first-response skills need to be addressed.