

## Trauma systems

### 0057 EVALUATION OF TRAUMA INFORMED CARE TRAINING AT A LEVEL I PEDIATRIC TRAUMA CENTER (PTC)

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**Statement of purpose** To evaluate baseline attitudes and confidence related to providing Trauma Informed Care (TIC) and quality of professional life of Emergency Department (ED) Staff at a Level I PTC, and to examine pre-post changes after a training session. We hypothesize that TIC training will improve attitudes and confidence in delivering TIC.

**Methods/Approach** A total of 76 healthcare professionals completed a pre-post survey as part of a TIC training at an urban, midwestern Level I PTC. The training consisted of one 3-hour session covering the impact and pervasive nature of trauma, recognizing traumatic stress, and benefits of providing a healing environment. The survey included demographic questions, the Attitudes Related to Trauma-Informed Care Scale (ARTIC) measuring trauma-informed knowledge and attitudes, and the Professional Quality of Life Scale (ProQOL) measuring burnout and secondary trauma.

**Results** Overall, participants demonstrated relatively high compassion levels, and over half of the participants indicated low levels of burnout and secondary trauma. Compared with pre-training (n=76), participants demonstrated a statistically significant increase (p <0.05) in TIC knowledge and attitudes post-training (n = 35).

**Conclusions** Though ED staff began with relatively high levels of trauma-informed attitudes and beliefs, the training yielded a positive increase in those attitudes. Given the small sample size and the fact that less than half of all participants who received training completed the survey, the attitudes captured may be skewed towards participants who had higher baseline attitudes and were more motivated to deliver TIC. This provides an opportunity to adjust the training to improve engagement.

**Significance** Applying TIC has the potential to benefit patients who experience traumatic injuries as well as healthcare professionals who may experience secondary traumatic stress through providing care. Improvement in staff attitudes after the training session suggests possible benefits of continued TIC training.

## Prescription drug overdose/opioids

### 0058 CHANGES IN SUSPECTED OVERDOSES FOLLOWING THE START OF THE COVID-19 PANDEMIC: RESULTS FROM THE MICHIGAN SYSTEM FOR OPIOID OVERDOSE SURVEILLANCE

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**Statement of purpose** To use data from a state-wide opioid overdose surveillance system in Michigan to evaluate changes

in opioid overdose frequency during the COVID-19 pandemic.

**Methods/Approach** The System for Opioid Overdose Surveillance (SOS) is a near real-time overdose surveillance system in the state of Michigan run out of the University of Michigan Injury Prevention Center, in collaboration with the Michigan HIDTA. SOS receives daily data feeds containing all EMS encounters involving naloxone administration, and daily data on suspected fatal overdoses from medical examiners covering ~80% of the state's population. We used SOS data to compare spatial and temporal changes in suspected opioid overdoses after 3/1/20, the approximate timing of the intensification of the COVID-19 pandemic, and compared those changes to those seen at the same time in 2019.

**Results** From 3/1/20–9/16/20, suspected fatal overdoses were 15.0% higher than during the same time in 2019, and naloxone administrations by EMS were 28.8% higher; a majority of counties and cities saw analogous changes, though the magnitude varied. Rates of both suspected fatal overdoses and EMS naloxone administrations were higher in 2020 prior to March, but the difference increased following the start of the pandemic. By late August, rates of suspected fatal overdoses returned to 2019 levels, but EMS naloxone administration rates remained nearly 40% higher than the same time in 2019.

**Conclusions** Evidence suggests that overdose and the COVID-19 pandemic are interwoven crises, and resources are required to address both the isolation and stress of the pandemic, and the medical system excess burdens, which all may intensify substance use, and reduce the likelihood of seeking treatment.

**Significance** Overdose remains a leading cause of death, and that burden has increased during the pandemic in Michigan. Approaches are needed to address secondary effects of the COVID-19 pandemic.

## Occupational safety

### 0059 DEVELOPMENT AND USE OF A HIGH-FIDELITY TRACTOR DRIVING SIMULATOR TO EXAMINE THE EFFECT OF AGE ON CRASH RISK

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**Statement of purpose** The purpose of this research was to build a tractor-driving miniSim, describe its perceived realism, and use it to examine associations between age and tractor-driving performance among farm-equipment operators (FEOs).

**Methods/Approach** FEOs completed a simulated drive and a survey scoring four realism domains (i.e., appearance, user interface, control, and sound) of the tractor simulator using a Likert scale (from 0 = not at all realistic to 6 = completely realistic). Overall realism and domain scores were calculated. FEOs provided suggestions for improving the simulator before completing a second drive where they encountered a driving hazard. Driver's perception response time was analyzed for association with age and selected covariates.