

Whangarei

*Application for Accreditation as a
World Health Organisation
Safe Community*



**Whangarei
Northland
New Zealand**

November 2005

***Working towards a safe and injury free Whangarei District
Creating the ultimate living environment***

In 2001, Northland (Te Tai Tokerau) launched its own Community Injury Prevention Programme (CIPP) in recognition of the high injury rates recorded in the district. Founding members recognised the value in a programme which brought key stakeholders together in order to share resources and, more importantly, to share the responsibility of becoming a safer community.

With a goal to “work collectively to reduce the current number and severity of injuries to people in Tai Tokerau”, Northland’s CIPP based itself on the World Health Organisation ‘safe communities’ model, which allows communities to simultaneously address different types and causes of injury across various age groups and contexts within a community.

The CIPP is also guided by several other key reference documents – the Treaty of Waitangi, the Ottawa Charter, and the New Zealand Injury Prevention Strategy and Implementation Plan.

Since its conception, the programme has been well supported by all its founding partners, and continues to expand and grow as different projects require collaboration and support from other groups or representatives of the community. From the outset it was also agreed to initially concentrate the programme’s work in the Whangarei District, due to the broad geographic expanse of the Northland region. This application therefore relates specifically to the Whangarei District, with the intention that in the future, this concept can be widened to cover the whole of Northland.

The programme is co-ordinated by a Programme Advisory Group, with individual projects being assigned to the most relevant stakeholders, with underlying support from the CIPP as a whole. While the programme is designed to support the community as a whole, special focus has been placed on those groups within the community who are at higher risk of injury, such as young children and the elderly, and also in those areas where most injuries occur, for example, on our roads.

These key target areas were developed following evaluation of existing injury data for the Whangarei District, which highlighted the following areas:

- road safety
- falls
- workplace safety
- water safety
- child safety
- safer sports and recreation

While the CIPP is a relatively new initiative, an extraordinary amount of work has already been undertaken and completed, with many other projects continuing to grow and develop. The programme has proven its worth to the community, and will only continue to flourish as the founding members strengthen their commitment to reducing injury rates even further into the future.

While we acknowledge that injury prevention is an ongoing lifetime commitment, we have shown that we can and have made a difference, and are already closer to becoming a safer community.

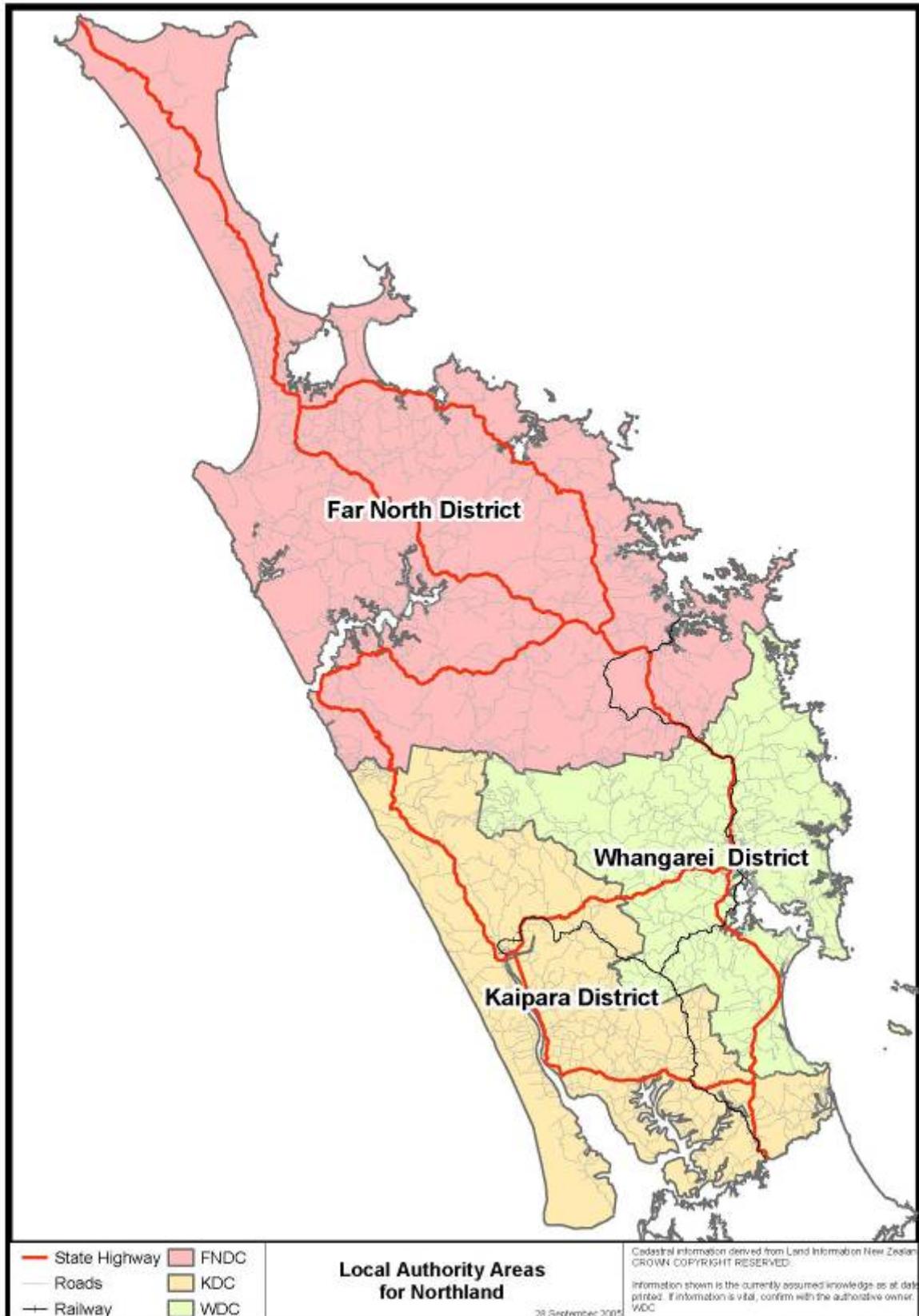
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Northland Community Injury Prevention Programme

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MAP OF NORTHLAND

(highlighting the Whangarei District area as covered by this application)



SNAPSHOT OF WHANGAREI AND NORTHLAND

Northland is the most northern area of the North Island of New Zealand, and has a population of approximately 145,000, spread through urban and rural communities on a land area of 13,800km².

The region is unique in its sparse communities, tropical climate, narrow geographical make-up and extensive coastline. The core industries in Northland are farming, horticulture, forestry and wood processing, and tourism. These industries are reflected in Northland's workplace injury statistics.

As New Zealand's warmest region, Northland enjoys warm weather throughout most of the year. This encourages a culture of outdoor living, including activities such as hunting, fishing, tramping, swimming, and sailing. This environment means water safety is a key component of injury prevention in the region.



The Whangarei District (pictured) covers a broad land base, and is made up of small communities surrounded by farmland, orchards, forests and coastline.

The District has a total population estimated at 71,400 (30 June 2003). This represents just under half of Northland's population, with an increasing shift in population to the Far North District of Northland.

Demographically, Northland's population is 'ageing'. The number of people in the 65+ age group grew 12.4% between 1996 and 2001 - 5.5 times faster than that of the overall population (2.2%) and 15 times faster than that of the 0-64 population (0.8%). Using population forecasts, the number of children is also decreasing.

Northland has a very high Maori population compared with most parts of the country, with about a third of Northland's population identifying as Maori. The Maori population in Northland also represents a much younger group than non-Maori.

Due to lower socio-economic conditions, Northland is also one of the most deprived areas in the country. 49% of our population is in the lowest 3 deciles (8-10), compared with the New Zealand figure of 30%. Often these low decile areas are very rural, and reflect poorer living standards, due to lack of income.

From an injury prevention perspective, these factors combine to produce a challenging environment. The District is over-represented with both young people and elderly, there is a strong culture of outdoor living where people are active year-round, and industries such as forestry and farming dominate, creating a strong need for injury prevention awareness-raising.

CRITERION ONE

An infrastructure based on partnership and collaborations, governed by a cross-sectoral group that is responsible for safety promotion in the community.

Injury Prevention Northland is an inter-agency committee and was launched in January 2001, in response to growing injury rates in the community. The CIPP is co-ordinated by a Programme Advisory Group which includes representatives from a cross-section of the community:

- ❖ Accident Compensation Corporation (ACC)
- ❖ Age Concern
- ❖ Hauora Whanui – Ngati Hine
- ❖ Kaumatua – Maunu Children’s Health Camp
- ❖ Land Transport New Zealand (LTNZ)
- ❖ New Zealand Fire Service
- ❖ New Zealand Police
- ❖ Northland Brain Injury Prevention
- ❖ Northland District Health Board (NDHB)
- ❖ Parents as First Teachers (PAFT)
- ❖ Roadsafes Northland
- ❖ Royal New Zealand Plunket Society
- ❖ Sport Northland
- ❖ Whangarei District Council (WDC)

The membership of this coalition is not exclusive, and is open to all agencies working in the field of injury prevention. This group also reflects the priority areas for injury prevention in the Whangarei community, with child safety being supported by groups like the Royal New Zealand Plunket Society and Parents as First Teachers, and road safety being supported by Land Transport New Zealand and Roadsafes Northland. Other organisations such as the Child Safety Foundation New Zealand and Strengthening Families need to be acknowledged as founding members of the CIPP whose roles have now lessened.

Our coalition meets monthly to discuss the effectiveness and progress of ongoing programmes, as well as looking to the future, in regards to new projects and ideas.

Within this coalition, there are also other unique relationships like that of the ACC and WDC, who have recently formalised a long-term partnership with the signing of a Memorandum of Understanding (Appendix 1).

The Memorandum is a three year commitment from ACC and WDC to work together to collaborate on safety initiatives, both in relation to Council workforce, and to safety in the wider community. Supporting the MOU is an annual Action Plan which specifies what ACC and WDC have agreed to do to improve safety in Whangarei, and examples of ‘Council Connections’ of work already undertaken (Appendix 2).



Some examples of these initiatives being undertaken by the WDC and ACC include:

- ❖ Workplace safety initiatives for Council staff
- ❖ Safety training for Contractors engaged by Council
- ❖ Road safety campaigns focussed on speed reduction and child restraints
- ❖ A Safe Summer programme
- ❖ A programme to reduce alcohol supply to youth
- ❖ Pool fencing safety
- ❖ Home safety checklists for Council housing
- ❖ Fatigue stops at Ruakaka for holiday weekends

Given the unique and specific nature of some projects, there is also a regular undertaking to expand this group to include all relevant community partners and stakeholders, including local authorities like the Northland Regional Council. This is also to ensure all ethnic and at risk populations have representation.

The coalition's terms of reference are attached (Appendix 3), as well as our latest Annual Report for 2004/2005, which gives a snapshot of the ongoing work of this group is seen in (Appendix 4).

To ensure sustainability of the safe community coalition, support has been secured by several key partners, including ACC, Northland Health and the WDC. To show their support, key figures in all three organisations have provided letters of support for this application (Appendix 5).

A community executive has also been formed, called Safer Whangarei Executive Team, which includes representatives from WDC, Northland Health, the Ministry of Education, Police, and the Chamber of Commerce.

This team is strongly supportive of this application, and will ensure the CIPP is included and recognised in ongoing strategic planning and decision making.

Other evidence of the sustainability of this coalition is included in this application, including the Northland Health Injury Prevention Service Plan for 2005/06 (Appendix 6) and the Northland Roadsafe Plan to 2010 (Appendix 7).



Holiday weekend Fatigue Stop at Ruakaka, south of Whangarei city – refreshing tired drivers with the support of local community groups to avoid road crashes

GLOSSARY OF KEY ORGANISATIONS

Northland District Health Board

Northland DHB was established in accordance with the NZ Public Health and Disability Act 2000 on January 1 2001, and is responsible for providing and buying Government funded health care services for the 145,000 people who live in Te Tai Tokerau (Northland).

Through this legislation NDHB is obliged to improve, promote and protect the health of all Northlanders. In achieving this goal it will promote the integration of health services, especially primary and secondary care services, and effective care or support for those in need of personal health services or disability support. The reduction of health disparities by improving health outcomes for Maori and other population groups, is a key function. Community participation in health improvement and in the planning for provision of health services is essential.

Accident Compensation Corporation

The Accident Compensation Corporation (ACC) administers New Zealand's accident compensation scheme, which provides personal injury cover for all New Zealand citizens, residents and temporary visitors to New Zealand.

ACC is a Crown entity responsible for: preventing injury; collecting personal injury cover levies; determining whether claims for injury are covered by the scheme and providing entitlements to those who are eligible; paying compensation; buying health and disability support services to treat, care for and rehabilitate injured people; advising the government; and providing accident cover, injury prevention services, case management, medical and other care and rehabilitation services.

Whangarei District Council

The Whangarei District Council is the local authority in place to enable democratic local decision-making to promote the well-being of the Whangarei District in the present and for the future.

The Whangarei District Council has a variety of roles including: facilitating solutions to local needs; advocacy on behalf of the local community with central government, other local authorities and other agencies; development of local resources; management of local infrastructure including network infrastructure (e.g. roads, sewage disposal, water, stormwater, flood and river control works) and community infrastructure (libraries, parks and recreational facilities); environmental management; and planning for the future needs of the local district.

Plunket

Plunket is New Zealand's leading provider of well child and family health services in New Zealand. It provides a unique mix of a professionally educated workforce working hand-in-hand with volunteers throughout New Zealand.

Plunket programmes aim to support families with young children by providing appropriate clinical and support programmes, educational activities and so on. They are the only non-profit organisation in New Zealand to provide these facilities to New Zealand families.

Land Transport New Zealand

Land Transport NZ is a new government agency formed on 1 December 2004 from the merger of Transfund New Zealand and the Land Transport Safety Authority by the Land Transport Management Amendment Act.

Land Transport NZ's objective is to contribute to an integrated, safe, responsive and sustainable land transport system. In order to achieve this, Land Transport NZ work in partnership with central, regional and local government and with many other stakeholders to help develop land transport solutions and maintain and improve safety standards on the roads.

Roadsafe Northland

The Northland Regional Council (NRC) contracts the Northland Road Safety Trust to manage the Community Road Safety Programme Funding which it receives from Land Transport New Zealand, together with funding from the four councils - Far North, Whangarei, and Kaipara District Councils and the NRC. The Trust employs two Road Safety Coordinators, one for the Far North District and one for Whangarei and Kaipara Districts.

The programmes funded under the Community Road Safety Programme (CRSP) for the 2005-06 year are road safety coordination restraints, fatal vision, fatigue, driver education, Safe with Age, speed, driver license assistance, and AMO (Alcohol Management Operation).

Sport Northland

Sport Northland is Northland's Regional Sports Trust and exists to get more Northlanders participating in physical activity.

The Trust is the delivery agent in Northland of SPARC (Sport and Recreation New Zealand) programmes including the Education Sector (Active Movement, Active Schools, SportFit), Participation (Push Play, 10,000 Steps Northland, Active Workplaces, Green Prescription), Sport Development (RSO Support, Coaching) and He Oranga Poutama (More Maori Active).

One of 17 Regional Sports Trusts throughout New Zealand, Sport Northland is a charitable trust and works closely with many key stakeholders in getting 'More Northlanders Active':

Age Concern

Age Concern New Zealand is a not-for-profit, charitable organisation, dedicated to promoting the quality of life and well-being of older people, and advocating positive healthy ageing for people of all ages.

Age Concern New Zealand is a federation of local Age Concern Councils, which each provide information and services in cities and most major provincial centres around the country.

Parents as First Teachers

The Parents as First Teachers (PAFT) programme in New Zealand is a parent education and support programme that helps parents understand how their infant develops and learns and how best they can help their child reach his or her full potential.

PAFT provides free, practical support and guidance to families with young children. This support lasts from before birth to three years.

CRITERION TWO

Long term sustainable programmes covering both genders and all ages, environments and situations.

The long term programmes undertaken by the CIPP reflect the national injury prevention priority areas as outlined in the New Zealand Injury Prevention Strategy, as well as those key areas of injury prevention specific to Whangarei and Northland.

The sustainability of such projects is crucial to their success, as well as to the success of the group's work as a whole, because they create a 'face' for injury prevention in the community, and become the trademark of a group like the CIPP. To this end, these long term programmes are about changing behaviour in individuals to support the creation of a safer environment, both socially and physically, for our community.

Once again, these projects also reflect the key areas of need in our district. The information provided by both ACC, NDHB, LTNZ and other local authorities showed Whangarei was over-represented in several areas, including accidents involving water, falls, children and on roads.

The programmes below reflect a commitment to both genders, as well as all ages, environments and situations. Within Whangarei, this means a wide variety of peoples and settings, with a focus on our young and elderly populations, and also our Maori families, who make up a large part of the local population:

- ❖ Child safety – teaching injury prevention messages to children in kindergartens throughout the community, and then supporting these messages with resources and education for these children and those caring for them (Child Safety Foundation Updates).
- ❖ Plunket Well Child Project – this is a key example of a long term project within our programme. Plunket nurses are visited by approximately 90% of mothers with young babies, and in collaboration with these nurses, Northland children now receive safety messages about falls, fire safety, road safety and water safety at various visits from age six weeks to five months.
- ❖ Prevention of falls – awareness raising in the community regarding falls in the home including funding of Step Ahead programmes; establishment of a number of Tai Chi exercise classes in several Northland communities, including Whangarei, for those over 65; delivery of falls workshops to parents and caregivers focusing on children under 5; playground falls prevention workshops for schools; Falls prevention kit taught to children in early childhood environments.
- ❖ Road safety – 'Shattered Dreams' video and presentation into schools to highlight over-representation of young people in motor vehicle accidents, supported by Fatal Vision programme; road safety display at Dargaville Field Days; 'Fatigue stop' providing refreshment and road safety information to drivers during peak holiday times; speed reduction campaign; Safe 2 Go programme enforcing correct use of child restraints.
- ❖ Water safety – awareness raising for pool owners with the support of local businesses and the Whangarei District Council; supporting by-laws ensuring boat passengers are using personal flotation devices; support for a water safety programme delivered to

intermediate schools (children aged 10-13) across Northland; support and promotion of local coastguard services.

- ❖ Workplace safety – Workplace Safety Management Practices programme, which is currently in place for 63 Northland businesses, including some of our larger employees; ACC Accredited Employer (Partnership) Programme, encouraging organisations to self-manage workplace health and safety and injury management under the guidance of ACC; workplace safety evaluation programme which identifies employers with high injury rates and offers free consultation to educate organisations and identify and remove or manage hazards.
- ❖ Safer Sports and Recreation – support for education programmes into workplaces and training institutions, and sports injury prevention seminars for training institutions.

An extended summary of these programmes follows, showing who developed and partnered the programmes, what programmes addressed, the population targeted, the length of the project / campaign and any results.

Some key examples within this summary of projects include the water safety programme in schools, our child safety updates and the fatigue and child restraint / seatbelt campaigns on our roads.

It is important to note that the success of some of these projects is largely due to strong support and commitment from local communities, such as the Bream Bay Over 60's group, who provided phenomenal volunteer support for a fatigue campaign running in their area.

The recently signed Memorandum of Understanding (MOU) between ACC and the Whangarei District Council is another example of the long term commitment the community has to creating a safer environment to work, live and play.

As outlined in Criteria One, the MOU is valid for the next three years, and in that time, both parties have committed to working in many areas of the community, including:

- Workplace safety initiatives for Council staff
- Safety training for Contractors engaged by Council
- Road safety campaigns focussed on speed reduction and child restraints
- A Safe Summer programme
- A programme to reduce alcohol supply to youth
- Pool fencing safety
- Home safety checklists for Council housing
- Fatigue stops at Ruakaka for holiday weekends

These projects reflect ongoing injury concerns within our community, and while there is a strong focus on children, they reflect the values and interests of the entire community. The results of these programmes may not be seen today or tomorrow, but they are sustainable, and will therefore all have a positive impact in preventing injuries in the long-term.

Criterion Two - Long term sustainable programmes covering both genders and all ages, environments, and situations

Programme Name and Developer	What Programme Addresses	Population Targeted	Length of Operation	Reach of Programme	Results	Partners
Child Safety Foundation Updates - CIPP	Teaching injury prevention messages to children in kindergartens throughout the community	Early childhood education	Ongoing	Most early childhood centres throughout Northland	Favourably evaluated externally -November 2004	Child Safety Foundation
Plunket Well Child Project – Northland Health	Educating parents of new babies in Northland with safety messages about falls, fire safety, road safety and water safety	All new babies in Northland aged between six weeks and five months, and their whanau	1 st July 2004 – March 2006	Approximately 90% of mothers with young babies seen as part of their Plunket visit	Process and impact evaluation to be completed	Plunket, ACC, Northland Health, Fire Service
Step Ahead Programme – ACC	Falls prevention, goal setting and exercises	Over 65's	Contracted Age Concern to 30 th June 2005. May be ongoing	Open to all older persons in Whangarei District	Target is to run 5 courses with 50 people completing it	ACC's contract is with Age Concern
Tai Chi Classes - ACC	Falls prevention, increasing strength and balance	Over 65's	Ongoing at this stage	Open to all older persons over 65 years in Whangarei District	Target is 270 persons over 65 do a course in Tai Chi during the year	ACC's contract is with Tai Chi tutors
Falls Workshops - ACC	Falls prevention for children under 5 years	Parents and caregivers focusing on children under 5	Ongoing at this stage	Open to all parents/caregivers of children under 5 years in Whangarei District	Target is 317 parents/caregivers by 30 th June 2005	ACC's contract is with 2 private providers
Playground Falls Prevention Workshops - ACC	Falls prevention in school playgrounds	School age children, teachers, school caretakers and BOT's	To 30 th June 2005	Open to primary and intermediate schools in Whangarei District	Target is 30% or 17 schools by 30 th June 2005	ACC's contract is with a private provider in Auckland
Fatal Vision Programme – RoadSafe Northland	Drink driving crashes and the effects of alcohol on judgment and dexterity	All drivers, and at risk young males and older males	3 years	Schools, young offenders, driver retraining programmes, learner licence assistance programmes, events	Over 80% change in attitude reported after involvement in the programme	Roadsafe Northland, Brain Injury Association Northland, St John's Driving Academy

Programme Name and Developer	What Programme Addresses	Population Targeted	Length of Operation	Reach of Programme	Results	Partners
Shattered Dreams – Northland Health	Over-representation of young people in motor vehicle accidents	Secondary school students	Pilot was held in 2002. Roll out of project 2003-04	All secondary school students in the Northland region	External evaluation very favourable	Roadsafe Northland, ACC, Northland Health, Turanga Health, Fire Service, Northland Public Health Nurses, Far North REAP
Fatigue Stops – Roadsafe Northland / ACC	High incidence of fatigue crashes occurring on SH1 on the 50km stretch from Brynderwyns to Whangarei during afternoons in the summer months	Drivers on Northland roads at peak holidays periods (locals and visitors)	5 + years	Travelling public both local and visitors during peak long distance travelling periods in the summer months	Good support of local community, awareness of fatigue as an issue in crashes, demonstrated reduction in fatigue crashes in 5 year Land Transport rolling statistics	Northland Road Safety Assn, Roadsafe Northland, Police, Northland Health, ACC, Ruakaka 60s up, St John Ambulance, Fire, local business community, State Insurance
Speed Reduction Campaigns - ACC	High rate of speeding drivers caught in Northland, coupled with high incidence of speed-related crashes	Northland drivers	Ongoing, with annual campaigns in specific target areas	Travelling public, with particularly high risk areas targeted – awareness raising also through media and via local schools / school children	Positive results in regards to awareness raising	Northland Health, Roadsafe Northland, WDC, Police, schools
Safe 2 Go - ACC	Incorrect and lack of use of child restraints	Parents in high traffic areas, such as pre-schools, supermarkets etc	Ongoing, with specifically targeted campaigns each year	Parents / caregivers travelling with young children	Results very positive, with high numbers of out-dated carseats replaced with new ones, and very successful awareness raising, with restraint use now much higher than in the past	Northland Health, Roadsafe Northland, WDC, Police, pre-schools

Programme Name and Developer	What Programme Addresses	Population Targeted	Length of Operation	Reach of Programme	Results	Partners
Pool Safety / Fencing – Northland Health	Pool fencing that complies with the legislation	Spa and pool owners in Whangarei District	Summer - Ongoing	Spa and pool owners in Whangarei District	Public awareness campaign where pool owners are encouraged to audit their own pool. Enforcement & inspection by WDC	ACC/WDC, pool retailers, pool fencing contractors
AMO (alcohol Management Operation – Northland Health/ RoadSafe Northland	Drink driving related to sports clubs	Sports club players members, supporters and visitors	4 years	Sports clubs operating bar facilities over a range of codes	High uptake and demand. Process involves change in behaviour as a result of the process	Roadsafe Northland, Northland Rugby Referees
Safe With Age - Land Transport New Zealand	Issues facing mature drivers as they age	Mature drivers facing issues of confidence and also approaching their 80+ driving test	5 + years	Clients of Age Concern and 50+ age group in the community	Strong uptake of the programme. Workshops run at Age Concern Monthly with Peer facilitator	Roadsafe Northland Land Transport New Zealand, Age Concern
Driver Licence Assistance Courses Land Transport New Zealand	Unlicensed and disqualified drivers pose a risk as they are over represented in crash statistics	Courses delivered by community groups to assist unlicensed drivers to obtain learner licences	5 + years	Run in conjunction with the Bream Bay Community Trust and Otangarei Sports and Education Trust targets at risk driving populations in the Ruakaka and Otangarei areas	Usually 100% pass rate	Bream Bay Community Trust, Otangarei Sports and Education Trust, Roadsafe Northland, St Johns Driving Academy
Personal Flotation Devices – Northland Health	Recreational water users	Boaties in Whangarei District	Summer 2003 – summer 05	Boaties and 1 x community based fishing contest p/a	Awareness raising project to encourage recreational water users to wear personal floatation devices whilst on the water	Northland Health, ACC, Fire Service, Coastguard

Programme Name and Developer	What Programme Addresses	Population Targeted	Length of Operation	Reach of Programme	Results	Partners
Water Safety Programme – Northland Health	Water Safety education for year 7 & 8 students + teacher in-service	Northland children aged 10-13	On-going since 1 st June 2003	Delivered to 3 intermediate schools in the Whangarei District	All year 7 & 8 pupils attending Intermediate school in Whangarei receive consistent water safety instruction. Teachers receive consistent, professional water safety education	Sport Northland, WaterSafe Auckland, Northland Health
Workplace Safety Management Practices programme - ACC	Health and safety systems, standards and practices of employers	Predominantly medium to large employers, but under certain circumstances, the small employers as well	1 July 2000	Employers nationally. Record is kept according to the registered address of businesses. At last count there were 63 employers in Whangarei that were participating in the WSMP programme	Reduces injuries and claim/rehab duration	
ACC Accredited Employer (Partnership) Programme - ACC	Employers self-manage workplace health and safety and injury management	Largest employers that are able to meet robust criteria set for the programme	1 July 2000	Employers nationally. Currently there are three Partnership Programme employers with registered addresses in Whangarei. These three employers employ around 2600 staff from the Whangarei region		
Workplace Safety Evaluation Programme - ACC	Identifies employers with high and costly injury/claim rates	Any employer that meets and/or exceeds claim frequency and claim cost criteria.	Since 2003	Around 420 employers nationally for 2005. This varies from year to year and region to region		Department of Labour

Programme Name and Developer	What Programme Addresses	Population Targeted	Length of Operation	Reach of Programme	Results	Partners
Restraints Campaigns RoadSafe Northland	Incidence of unrestrained and incorrectly restrained children	Parents / caregivers of all children travelling in motor vehicles	3 years	Activity usually occurs inc car parks close to child facilities such as day care, preschool facilities	Well attended with many faults fixed on the spot. Includes a mechanic to carry out on the spot tether bolt anchor point installation	Roadsafe Northland (Northland Health ACC Plunket Fire, Police plus Ringa Atawhai and other interested parties
Sports Injury Prevention Seminars	Sports injury prevention – Sportsmart, RICED / Concussion	Training institutions eg. Polytech and University, workplaces	Year contract to 30 th June 2005. Probably ongoing	All students completing sports certificates, diplomas or training to be a teacher, employers who are registered with ACC's Sphere of Influence project	Target is to run 6 full Sportsmart courses and 10 mini courses for employers	ACC's contract is with Sport Northland to run these workshops
Alcohol Accord – 'Think Before You Supply Under 18's Drink' – WDC with some ACC funding	1. Reducing inappropriate alcohol supply to under aged youth targeting 'off licences' (programme to be run around school ball season). WDC Compliance Officers and police reports identified a local issue of youth, alcohol and inappropriate supply. 2. Barskills training for bar staff in sports clubs	1. Under 18 year olds and parents / caregivers of under 18 year olds in Whangarei District. 2. Training was targeted at bar staff in sports clubs in Whangarei District	Project completed. Ran over 2 - 3 months, however enforcement initiatives are ongoing, as well as collaboration with 'off licences' through the Alcohol Accord	1. Parents/Caregivers of under 18 year olds in Whangarei District, as well as all 'off licence' premises throughout the Whangarei District. 2. It has also included an HSI Accredited training Course of 30 'Door and Bar Staff' targeting those working at sport clubs. Due to the large number of young people participating in sport and 'after match' socialising. In the Bream Bay area, surveys were also carried out by the local YATA group with parents with co-operation from the local Bream Bay College	There has been very good feed back from Licensees, Police and Council staff. Successful awareness raising was achieved via the media. A recent 'Pseudo Patron Survey' carried out throughout the district and the mid north highlighted an ongoing need for improvement regarding 'Off Licences' asking for Identification.	Alcohol Accord Group – consists of representatives from – WDC, DLA, Police, Licensees ('On & Off' Licensees), HANZ, Northland Health, Road Safety, Fire Service, Training Providers, Legal fraternity the local YATA group, Bream Bay College, approximately 20 Sports Clubs and ACC who sponsored the training course

CRITERION THREE

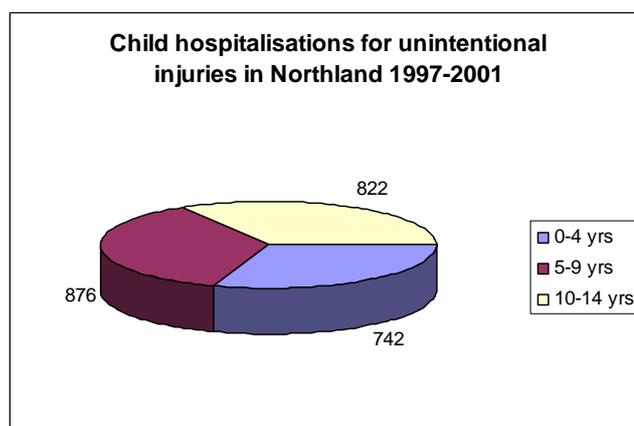
Programmes that target high-risk groups and environments, and programmes that promote safety for vulnerable groups.

As well as ensuring the viability of long-term projects promoting injury prevention across the entire district, the CIPP has also placed special emphasis on high risk groups in the community, such as children under 5, and drivers under the age of 24.

PLUNKET WELL CHILD PROJECT (July 2004 – December 2005)

Children in Northland are badly over-represented in a wide range of injury statistics, involving water, roads, and falls, both at home and in the community.

As the graph below shows, there were 742 children under 5 hospitalised in Northland due to unintentional injuries from 1997-2001. Many of these injuries occurred in and around the home, supporting the campaign by the CIPP to focus resources into this age group. The graph also highlights a further 1,698 Northland children aged between 5-14 who were hospitalised due to unintentional injuries in the same period. These figures contribute to Northland's claim to the second highest rate for such injuries per head of population, throughout New Zealand.



Plunket has been a defining influence on this campaign, given their unique relationship with families with young children, and their existing advisory role within the community. This project involved three key agencies – ACC, the Northern Region Fire Service, and Plunket, as well as support from the CIPP.

The aim of the project was to deliver practical resources to caregivers conveying child age related safety messages in combination with the Plunket's existing role of providing core Well Child checks. These checks take place at several milestones throughout a child's first five years, including at 6 weeks, 3 months, 5 months and 9 months. Plunket nurses across Northland were supported and resourced to provide the following key safety messages:

- ❖ falls prevention messages for the caregivers encouraging changing on the floor and buckling the child into the carseat, highchair and pushchair;
- ❖ fire safety by way of smoke alarm installation and fire safety in the home
- ❖ road safety, ensuring caregivers knew how to appropriately restrain their children while travelling
- ❖ water safety, conveying the 'supervise at all times' message during bath time and in the pool / ocean.

Plunket see 90% of all new babies born in the region and there are approximately 1700 babies born each year in Northland. This means that during the project's 18 month time frame, well over 2000 new families will receive information and resources from the project.

Resources provided to Plunket included:

- ❖ bibs for new babies carrying child restraint messages
- ❖ stick-on bath toys carrying water safety messages
- ❖ baby change mats highlighting the prevention of falls by changing baby on the floor and always buckling into car seat, high chair or push chair;
- ❖ referral forms for smoke alarm installation.

This project has since been presented at a Safe Kids Conference, and resources developed for the project are also being reproduced for use in other regions by other district health boards. Below is a summary of the rationale for targeting these injury prevention messages with this programme:

Falls prevention – 6 week check

Falls are the leading cause of unintentional injury hospitalisations for the Whangarei District, accounting for 38% of injury hospitalisations. Latest figures show 44% of falls occurred in the home, and 40 of injury falls were children under 4 years of age.

Factors that are known to affect the risk of falling in this age group include the infant or child's quickly changing rate of development, the quality of caregiver supervision, environmental factors and the use of safety devices.



Smoke alarm referral / fire safety messages – 3 month check

From 1999 to 2002, 10 people perished in house fires in Northland. Six of these were children. As a result, the Northern Region Fire Service introduced the Te Kotahitanga programme, the aim of which is to reduce the number of deaths, injury and millions of dollars of property damage caused by fire in our region. To do this, the Fire

Service have selected and trained Fire Safety Ambassadors who install smoke alarms and disseminate fire safety information to the homes of people in 'at risk' areas in Whangarei and Northland.



Road safety messages – 5 month check

Motor vehicle crashes are a leading cause of morbidity and mortality in Northland, and are the leading cause of injury death for the Whangarei District, accounting for 34% of injury deaths.

Road accidents are also the second leading cause of injury hospitalisations, accounting for 14% of injury hospitalisations.

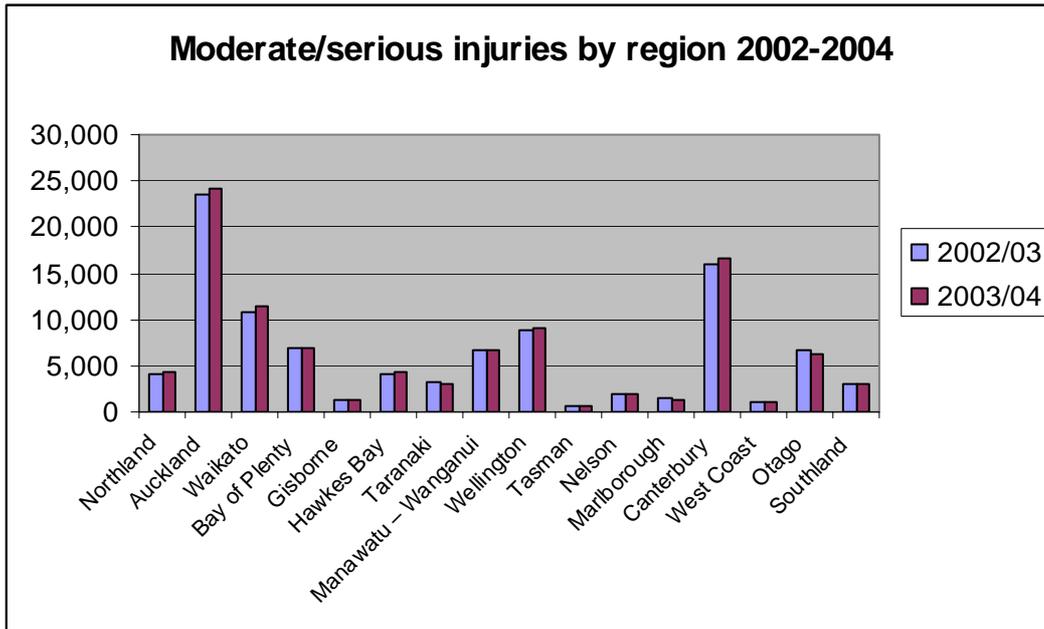
Child restraints and cycle helmet use is considerably lower in Northland compared to the rest of New Zealand, and research also shows that there was a relatively high proportion of incorrect use of child car seats among those who used them.

Water safety – 9 month check

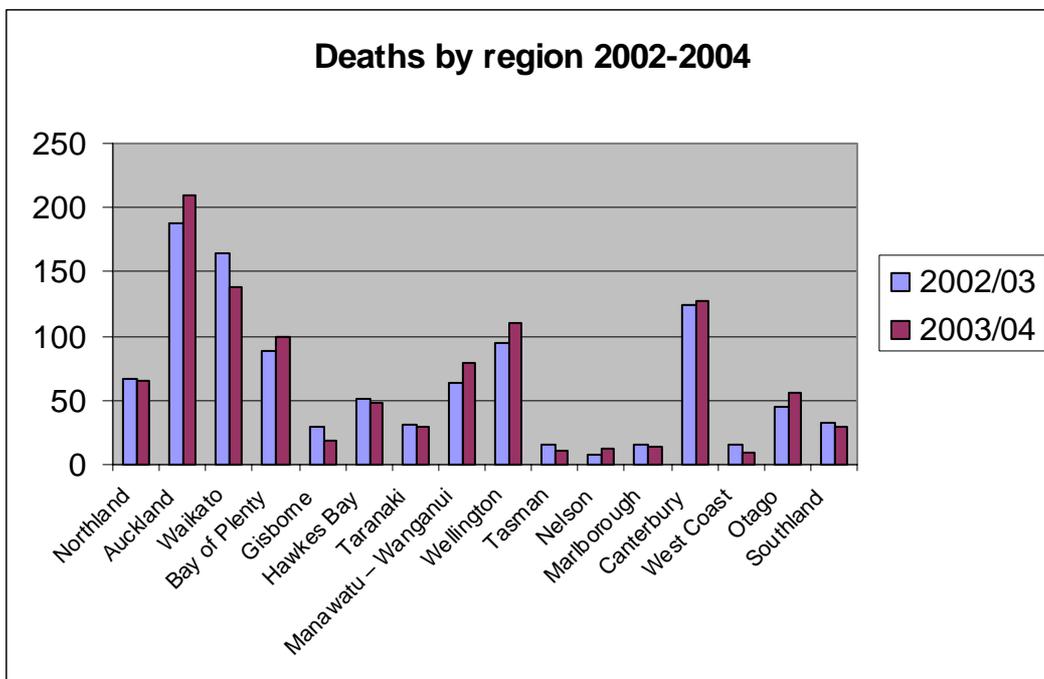
Drowning is the 4th leading cause of death for the Whangarei District, and is a significant cause of childhood death. Drowning is unique in that the case fatality rates are as high as 50% and medical care makes little difference for victims brought to emergency departments without spontaneous respirations. Most babies aged under 12 months that drown do so in the bath and further statistics indicate that almost all preschool drownings occur due to a lack of supervision.

Following the development of these bath toys (pictured), an additional 12,000 sets have been sold outside Whangarei and Northland since April 2004, to a range of organisations including public health units, injury prevention groups, district health boards, water safe programmes, and Plunket and ACC branches throughout the country.





Per head of population, Northland has one of the highest rates of unintentional injury and death across the whole of New Zealand.



SHATTERED DREAMS PROJECT (June 2003 – July 2004)

Shattered Dreams was a joint venture initiated by the CIPP and Te Runanga o Turanganui-a-kiwa, and funded by Roadsafte Northland, and was born out of a desire to reduce the over-representation of young drivers involved in motor vehicle crashes on Northland roads. While 15-24 year olds account for just 16% of registered drivers, this age group cause 28% of all injury crashes.



For Northland, in 2003 alone, the death toll was 33, with another 689 people injured in road crashes. Thirty-five percent of all road casualties are aged between 15 and 24, with crashes involving young people more likely to result in serious injury or death. Young adult road users in rural areas pose an even higher risk to themselves and others.

Nationally, of all young drivers involved in fatal crashes between 2001 and 2003, 77% were male. Males accounted for 70% of young drivers involved in serious injury crashes and 63% of those involved in minor injury crashes over the same period. The three leading causes for crashes involving drivers aged 15-24 are speed, alcohol or drug use, and losing control.

The total social cost of crashes in which 15-24 year old drivers were at fault was about \$1.05 billion, which is more than one quarter of the social cost associated with all injury crashes.

Of the 1540 crashes recorded for Northland in 2003, alcohol was a factor in 34% of serious injury and fatal crashes, compared with a national average of 21%. The age of alcohol affected drivers causing crashes in the region is most often between 16 and 22 years. From 1999-2003, there were 86 deaths and 978 injuries sustained on roads in the Whangarei District.

In 2003, ACC funded the development of a video resource, 'Shattered Dreams', which tells the story of Tamati Paul, and his involvement in a serious road crash, and his subsequent journey through life living with the injuries he sustained. Tamati has permanent disabilities as a result of the crash, and is also living with a brain injury. A pilot project was run in 2003, and owing to its success, it was felt the resource should be made more widely available to schools and young people in the region.



The aim was to deliver the ACC Shattered Dreams resource, in conjunction with Te Runanga o Turanganui-a-kiwa, to Northland youth, with the presence of the video subject, Tamati Paul, to enhance the impact. The presentation was made available to a number of schools throughout Northland, as well as to community sectors identified as high risk groups by LTNZ statistics for Northland, for example, Maori male aged 15-39.



The 'Shattered Dreams' presentation was delivered to a total of 3660 secondary school students throughout Northland – 930 in the Far North, 1000 in the Mid North and 1730 in Whangarei. It was also delivered to young people in alternative education, Corrections Department youth, and Youth Training Centres.

Tamati (left) and his powerful delivery and presence had a huge impact on those receiving the drink / drive message, evident in a sample of student's comments below:

- ❖ *"I was so moved by your presentation, your strength and courage";*
- ❖ *"You really have made a difference";*
- ❖ *"People always come into the schools with the same messages Don't Drink and Drive, but they never really give us a reason to believe them. You did";*
- ❖ *"The following night after your presentation I had a hard think about drinking and driving. But not only about me but about other people that drink and drive";*
- ❖ *"I couldn't believe how strong and motivated you were to get through such a tragedy";*
- ❖ *"It made me realise how precious life is and how easily it can be taken away and how simple it is to prevent crashes like the one in your video"; and*
- ❖ *"My Dad drinks and drives, and after seeing your story I have been trying to stop him. Maybe one day I will".*

Positive outcomes from the programme included the re-motivation of Students Against Drink Driving (SADD) activities and groups within the schools, and the fact that a video was given to every school / community, which has extended the length of the "audience" message time and also the times the drink drive message can be given. It has also allowed opportunity for teachers to use a resource in different ways.

CHILD RESTRAINT CAMPAIGNS (Ongoing)

Under the banner of road safety, child restraints is one area where awareness raising over the past ten years has seen a significant change in behaviour. However, in 2003, 17% of children in Northland were still unrestrained while in a vehicle, and among those who are restrained, pilot studies conducted by the University of Otago Injury Prevention Research Unit showed a relatively high proportion of incorrect use of child car seats among users. Errors were commonly found both in installing the car seat and placing the child in the car seat.



Four categories of potential incorrect use were included in the survey:

- ❖ Infant seat not facing to the rear
- ❖ Belt or harness not tight
- ❖ Tether strap present but not used
- ❖ Safety belt locking clip not used with infant or child seat.

Left: Child restraint campaigners raising publicity with a local paper while destroying out-dated car restraints discovered during a restraint campaign



Above and bottom right: Road safety display at Darqaville Field Days

This research was the motivation for a child restraint campaign, which focused on ensuring children were correctly restrained.

Under the banner of the ACC / LTNZ Safe 2 Go strategy, and with the support of ACC, Northland Health and Roadsafe Northland, the campaign held training sessions for those providing technical support and then worked with childcare centres across Northland. The target population for this project was parents and caregivers of pre-school from their pre-school centre.

In Whangarei, six clinics were run at childcare centres and Te Kohanga Reo. 68 vehicles and 100 child restraints were checked ranging from booster seats to rear and forward facing seats. Among these, 43 errors were found, with 25 of those corrected. 18 referrals were made to other primary care agencies. 15 new restraints were exchanged for old expired damaged child restraints, and 19 new seats were issued. 29 expired seats were handed in to us and subsequently destroyed.

In Whangaroa, five clinics were run at childcare centres and Te Kohanga Reo. 34 vehicles and 65 child restraints were checked with 57 errors found. 43 of these were corrected, and 14 referrals were made to other primary care agencies. 15 new restraints were exchanged for old expired damaged child restraints, and 20 expired seats were handed in to us and subsequently destroyed.



WORKPLACE SAFETY MANAGEMENT PRACTICES

Workplace safety is an ongoing concern in Northland, especially with the influence of industries such as forestry and farming in the region. For the 2002/03 year, 1462 injuries and eight deaths were recorded in Northland, and in 2003/04, another 1469 people were injured, and another four people killed while at work. These injury rates are even higher than those for accidents and home, and road accidents.

To improve workplace safety, ACC has developed a Workplace Safety Management Practices (WSMP) programme which employers can use to strengthen their safety systems and turn good safety intentions into concrete achievements. It also encourages the development of best-practice behaviours. The programme offers a wide range of benefits, including:

- ❖ An externally audited, national safety framework to work to
- ❖ Proof of safety commitment to staff
- ❖ Showing commitment to customers, the business community and the public
- ❖ Rewarding employers with ACC levy discounts
- ❖ Most importantly – it works to reduce injuries.

The auditing is done by an auditor external to, but approved by, ACC. ACC pays for the cost of the audit. The audit covers the following 10 aspects of health and safety of the business, including management commitment, hazard identification and reporting, training and supervision, and emergency planning and readiness.

With ACC Workplace Safety Management Practices, employers can be awarded one of three levels of ACC levy discount, depending on an audit of the overall health and safety standards of the workplace.

- ❖ Primary level – 10%. This discount recognises that a business meets the minimum performance standards across all aspects of workplace health and safety management.
- ❖ Secondary level – 15%. Recognising high standards of performance and good practice across all aspects of workplace health and safety management.
- ❖ Tertiary level – 20%. This recognises best practice across all aspects of workplace health and safety management and a commitment to continuous improvement.

The levy discount applies for a full 24 months after a successful audit, although the employer will need to undertake an annual self-assessment to ensure that their health and safety systems continue to meet the standards of the programme. At the end of the 24 months the employer must re-apply and be re-audited.

At last count, there were 63 employers in Whangarei that were participating in the WSMP programme (this excludes employers with a registered address outside Whangarei, but with business premises inside Whangarei).

Of the 63 employers, 19 (30%) were at Primary level, 19 (30%) were at Secondary level and 25 (40%) were at Tertiary level. These Whangarei employers represent an annual payroll of around \$110 million.

CRITERION FOUR

Programmes that document the frequency and cause of injuries.

Numerous government agencies dedicate time and resources to the collation and analysis of injury-related data in New Zealand. Below is a collection of figures which paint a picture of the current injury burden in New Zealand.

1,524	Deaths (2001)
43,632	Hospitalisations (2003)
250,419	Emergency Department Admissions (2003)
1.5 million	ACC injury claims (2002/03)
214,400	People living with long-term disability (2001)

Aside from the various Ministries within Central Government, organisations like the ACC, LTNZ and the New Zealand Police provide extensive, well-analysed data in a timely fashion to help guide groups like the CIPP who are committed to reducing injuries in their communities.

As an example, a recent project was launched in the Whangarei Central Business District (CBD), titled the CBD 600 Project. This is a three year crime reduction strategy, aimed at reducing general violence, theft of and from cars, and youth offending and re-offending in central Whangarei, with a range of initiatives, including new liquor accord initiatives, youth initiatives (CBD), Maori Warden patrols, CCTV (video camera) upgrades, hosting retail meetings, and surveys and audits.

The geographic area and crimes targeted by this project were identified by Police Intel NIA data and Northland District Crime Statistics (Appendix 8) which clearly identifies the Whangarei CBD as the major 'hotspot' for crime in the district. It is also an area that attracts a large number of youth both during the day and evenings. Previous community safety audits (Hungerford Hutchings – Perceptions of Crime Prevention & Safety In Whangarei April 1998, and also Sarah Glen's – 'Whangarei Inner City Safety Audit' compiled Dec 2000 - Jan 2001) also identified similar issues, and supported the need for such an initiative, as well as local media reports.

This Police Intel NIA data has also been the basis of numerous other projects to come out of the CIPP, including the Alcohol Accord and local speed reduction campaigns.

As another example, the Plunket Well Child project was developed out of the need to address a range of injury statistics, including falls, fire safety, road safety and water safety. ACC identified falls as the leading cause of unintentional injury hospitalisations for the Whangarei District, accounting for 38% of injury hospitalisations. Latest figures show 44% of falls occurred in the home, and 40 of injury falls were children under 4 years of age. The New Zealand Fire Service identified a need for fire safety, following the deaths of 10 people perished in house fires in Northland between 1999 to 2002. Six of these were children. Land Transport New Zealand statistics highlighted motor vehicle crashes as the leading cause of injury death for the Whangarei District, accounting for 34% of injury deaths. Coupled with this were statistics that showed child restraints and cycle helmet use was considerably lower in Northland compared to the rest of New Zealand. Water Safety New Zealand identified drowning as the 4th leading cause of death for the Whangarei District, and a significant cause of childhood death. Research from all of these organisations helped form the basis of the Well Child Project, in an effort to improve injury statistics for Whangarei children.

Such data provides the basis for the development of all programmes within the CIPP, with all programmes based on community need and available data from a wide range of sources. Long-term programmes are also constantly monitored and refined to ensure they continue to reflect changes in injury data. One such example is that of the emphasis on child restraints through the Safe2Go Programme. For several years this has been a high priority for the CIPP, and latest statistics show there has been a marked improvement in restraint use in Northland (as identified by Land Transport New Zealand in Appendix 9) which will allow the CIPP to take appropriate steps to continue monitoring in this area while diverting some resource into other more high need and ongoing areas, such as speed awareness.

On top of this, the CIPP has undertaken programmes of its own to provide more specific baseline data for the Whangarei District. The below report which was commissioned by the CIPP in 2001 is an example of this.

WHANGAREI DISTRICT COMMUNITY PROFILE: OPPORTUNITIES FOR PROMOTING A SAFER CULTURE

In 2002, a report was commissioned by Northland Health and the CIPP to assess the current injury rates in the Whangarei District, and find opportunities for promoting a culture of safety in the district.

It was researched and published by the Injury Prevention Research Centre, and has since been made available as a reference document to relevant organisations.

The document is a profile of the Whangarei District community, with particular attention given to both the injury burden and opportunities for injury prevention action with the district. This covers baseline data to identify injury prevention related needs and issues, a comparison of routinely collected data and a discussion of points for consideration when identifying opportunities for strategic community development action related to injury prevention in the district.

The document confirms that compared to the rest of New Zealand, Whangarei District is over-represented in injury deaths and injury hospitalisations. The injury data clearly shows that falls, motor vehicle crashes, drownings, and intentional injuries (e.g. suicide, attempted suicide, and assaults) are leading injury concerns for Whangarei. The data also concluded that those aged over 75 had the highest rates of injury hospitalisations and deaths. Other groups at high risk of injury hospitalisations and deaths were children and young people aged up to 24 years. Maori are also over-represented in injury hospitalisations and deaths, and in particular male Maori.

Following community consultation, there was general consensus of the value of, and need for, intersectoral collaboration to facilitate and foster the promotion of a culture of safety in the district. The majority of participants felt that a focus on the needs of families / whanau would reduce the injury and violence burden within the Whangarei District. In particular, children, youth and older adults were priorities for injury prevention action.

A summary of key areas for action highlighted the following areas:

1. Safer Homes

- ❖ Falls are the leading cause of injury hospitalisations for Whangarei District, accounting for 38% of injury hospitalisations.
- ❖ 44% of falls occur in the home.
- ❖ 40% of injury falls are children aged between 0-4 years.
- ❖ 33% of injury falls are adults aged 60+ years.
- ❖ Cuttings and piercings are the third leading cause of injury hospitalisations for Whangarei District, accounting for 9% of injury hospitalisations.
- ❖ The majority of cutting and piercing injuries occur in the home.
- ❖ Unintentional poisonings account for 4% of injury hospitalisations for Whangarei District.

Injuries which occur in the home account for a significant proportion of injury related hospitalisations and deaths for the residents of Whangarei District. Major causes of injuries in the home include falls, cutting and piercing, violence / intentional injury and unintentional poisonings. Children and older adults are most vulnerable to injuries which occur in the home.

With reference to fall related injuries, children and older adults are the most vulnerable groups. Trends appear to match those at a national level, which shows the most common circumstances of child injury falls are falls from shopping trolleys, tables, trampolines, falling off beds or chairs, and falling down steps /stairs while in a baby walker.

Causes of fall related injuries experienced by older adults (aged 60+) are frequently unspecified. However, for those specified at a national level, tripping is the leading identified cause (13%); followed by falls from ladders and/or scaffolding (10%); and falling down stairs and/or steps (10%). As age increases, so does incidence of tripping.

Cutting and piercing is a leading cause of injury hospitalisation, accounting for 10% of injury hospitalisations for Maori and 8% for non-Maori within the district. The majority of these injuries are likely to be the result of daily living. Activities associated with cutting and piercing include using chainsaws, operating lawnmowers, and preparing meals. Putting a limb through glass is also frequently cited as a cause of cutting and piercing injuries.

Unintentional poisonings usually occur in the home, and usually affect younger children (peak incidence between 1-2 years). National data indicated that medications and other drugs are the most common source of poisoning, and that young boys are slightly more likely to be poisoned compared to girls.

2. Safer Roads

- ❖ Leading cause of injury death for Whangarei District, accounting for 34% of injury deaths.
- ❖ Second leading cause of injury hospitalisations for Whangarei District, accounting for 14% of injury hospitalisations.
- ❖ Just over half of those killed in motor vehicle crashes were the driver of the vehicle.

Although LTNZ data under-represents the incidence of traffic crashes, data indicated that Whangarei has higher risk ratio than the whole of New Zealand for all driver factors, except speed. Male Maori, particularly those aged under 40 years, are substantially over represented in motor vehicle injury death and hospitalisation statistics. Child restraints and cycle helmet use is considerably lower in Northland compared to the rest of the country. Drivers of vehicles accounted for the majority of motor vehicle traffic crash fatalities.

3. Safer Sports and Recreation

- ❖ Drowning is the fourth leading cause of death in Whangarei District.
- ❖ Majority of injuries from striking an object or person occur during sport and recreation.
- ❖ A considerable number of falls are also attributable to sport and recreation activities.

Previous National Health surveys have identified injuries relating to sports and recreation as major public health problems, however this has largely been ignored as a setting for injury prevention programmes.

New Zealand data suggests that improvements in training and coaching techniques and protective devices are likely to have positive impacts on reducing the impact and rate of sports-related injuries. Sports-related injuries are also associated with the type of sport being played (rugby union has the highest injury mortality and hospitalisation rate); players previous injury experience; grade of play (higher grade players experience more injuries) and number of practices attended (additional practices result in a reduction on injury risk).

The aquatic environment presents various safety risks in, on and near the water. Given the large amount of coastline and attractive beaches in the Whangarei District, particular attention should be given to recreational swimmers, divers and people in watercraft.

4. Safer Relationships

- ❖ The combination of intentional injuries and violence accounted for a significant proportion of injury hospitalisations for Whangarei District.
- ❖ Suicide is the second leading cause of injury death for Whangarei District (28%).
- ❖ Assault and attempted suicide account for 8% of injury hospitalisations for the Whangarei District.

Although not a specific focus of the CIPP, injuries resulting from intentional intra- or inter-personal violence account for large proportions of injury deaths and hospitalisations in the Whangarei District. There is general agreement that violence is a complex problem and this has perhaps contributed to reluctance by the injury prevention sector to adopt it as a priority area.

A copy of the full document is attached (Appendix 10).

ACCIDENT COMPENSATION CORPORATION DATA

Regular statistics are gathered and made available by ACC, who monitor all reported injuries and categorise into areas which reflect the priorities of the New Zealand Injury Prevention Strategy and Implementation Plan.

ACC is an integral part of the CIPP, and regularly makes such data available for the group to help guide decision-making with regards to future projects and programme development.

When comparing Whangarei with all 73 local government areas in New Zealand, ACC's data shows Northland is consistently over-represented in injury statistics. Based on per 100,000 of the population, ACC ranks the Whangarei District against the other local government areas below, with 1 being best (lowest injury rate) and 73 being worst.

The below figures are from 2004:

LOCATION OF INJURY	NO. OF ENTITLEMENTS PER 100,000	NATIONAL RANKING
Home	1,197	73
Non work	2,123	68
Slips, trips and falls	1,401	68
Water	17	66
Motor vehicle	163	60
Sports	496	58
Work	1,171	47
Boating	3	40
Overall	3,467	65

Below is a comparison of injury and death rates for Northland for 2002/03 and 2003/04.

LOCATION	YEAR	INJURIES	DEATHS
Home	02/03	891	13
	03/04	1271	11
Road	02/03	230	31
	03/04	214	31
Work	02/03	1462	8
	03/04	1469	4
Sport	02/03	520	7
	03/04	608	7
Other	02/03	947	7
	03/04	679	12
Total	02/03	4,050	66
	03/04	4,241	65

ACC is aware of the shared burden of injuries, across communities, employers, families, individuals and the health system, and therefore contributes substantial resources into the prevention of injuries.

LAND TRANSPORT NEW ZEALAND DATA

LTNZ is also a key source of data for the CIPP. Reports are produced regularly for the Whangarei, Far North, and Kaipara areas as well as Northland overviews. These reports contain road safety statistics as well as analysis of those statistics, and a summary of key issues.

As an example, in 2004 the major road safety issues in Northland are outlined as loss of control on curves, alcohol, road and environmental factors and passenger casualties. These compared to national concerns of speed, alcohol, failure to give way and restraints.

In a summary of deaths on Northland roads between 1999-2003, 55% were car drivers, 31% were passengers, 7% were motorcyclists, 5% were pedestrians and 2% were in heavy vehicles.

The below table gives a summary of road crash numbers and severity from 1999-2003 in the Whangarei District.

	2000	2001	2002	2003	2004	Total
Fatal crashes	14	12	14	20	6	66
Serious crashes	27	34	32	33	55	181
Minor crashes	58	71	99	149	148	525
Total injury crashes	99	117	145	202	209	772
Non-injury crashes	494	498	497	605	555	2649

The next table indicates the number of people injured or killed in the Whangarei District in the 3,243 reported crashes outlined above.

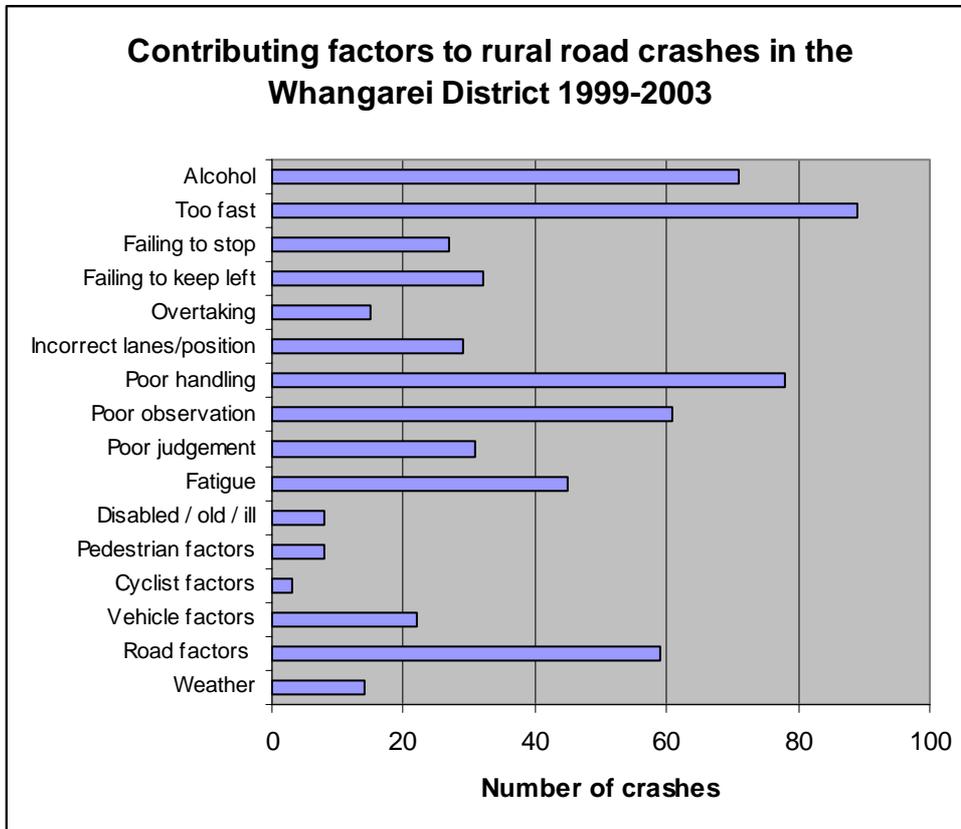
	2000	2001	2002	2003	2004	Total
Fatal casualties	21	13	18	21	6	79
Serious casualties	40	48	41	42	67	238
Minor casualties	99	132	140	228	205	804
Total casualties	160	193	199	291	278	1121

LTNZ offer comparisons of injuries sustained from road crashes in the Whangarei District and other districts throughout New Zealand.

LTNZ also help to target injury prevention work on the roads by providing detailed summaries of the following:

- ❖ location of crashes - urban, rural, intersection, straight road
- ❖ casualty age, ethnicity, gender and role in the accident (e.g. passenger, driver, pedestrian, cyclist)
- ❖ driver age, ethnicity, gender, license status and reasons for crash
- ❖ breakdown of contributing factors such as speed, alcohol, loss of control, fatigue, poor judgement or overtaking
- ❖ crash movement type - overtaking, head-on, loss of control on a bend etc
- ❖ conditions of crash – wet / dry, day / night, time of crash, day of crash

An example of just one of these detailed summaries is below.



CRITERION FIVE

Evaluation measures to assess programmes, processes and effects of change.

Evaluation has been instilled as a key component of the CIPP's working plan from its conception. There are obvious complexities associated with 'measuring' community awareness around the impact of injury, recording injury rates, and the long term nature of such work. However the CIPP has endeavoured to incorporate evaluation measures and processes into all its programmes, to ensure their effectiveness in raising awareness around injury prevention can be measured.

Evaluation is also a key indicator of the sustainability of such programmes, and is invaluable when looking to future planning to assess the best way to direct funding and resources.

Some aspects you cannot truly measure with such work include the underlying impact on attitudes of individuals in the community and on the community as a whole. This type of work also relies on the commitment and input from a wide range of organisations and individuals, and while the strengthening of those relationships and networks is undeniably important, it is very difficult to measure.

Below are just three examples of the evaluation processes undertaken with three of the CIPP's programmes - the Child Safety Updates project, Shattered Dreams, and Workplace Safety Evaluation.

CHILD SAFETY UPDATES - Evaluation

Evaluation of the Child Safety Update was undertaken following the completion of the project in 2004.

The evaluation involved an assessment of the project by an external party, who conducted interviews with key stakeholders, including CIPP members, parents and staff at Early Childhood Centres (ECC's). She also undertook a comparison of project goals and what was actually delivered. Conclusions and recommendations from the evaluation were very satisfactory, and are summarised below:

"The Child Safety Update is being distributed in Northland by ECCs to parents in the most appropriate and effective manner.

Parents read the Update, learning new information, and having existing information confirmed. Parents do put in to practice the information given in the Update.

The Update is filed, left in an accessible place, or discarded when read. Points are discussed in a few homes and also in some Kohanga Reo meetings.

ECC staff use the Update in conjunction with their Pre School kit if the ECC has one, or develop educational programmes around the Update. It is also used as a teaching tool when issues arise and is recommended by staff as a valuable resource for parents.

Northland is the only area in New Zealand that is involved in this project and it is recommended that other areas of the country be involved.

The enthusiasm and commitment from the ECC staff, which can only be gauged through telephone interviews, indicate that the method of distribution through ECCs be continued.

Other environments accessed by parents could also be used for distribution, such as doctor's rooms. This would be reminding ECC parents of the Update and would also be available for parents not involved in ECCs.

It is strongly recommended that funding continues to allow the Child Safety Update to be distributed in to our Northland Early Childhood Centre parents."

A copy of the complete evaluation is attached (Appendix 11).

SHATTERED DREAMS – Evaluation

The 'Shattered Dreams' project was born from the development of an ACC-funded video resource in 2003. The video tells the story of Tamati Paul, a young boy involved in a serious road crash, and his subsequent journey through life living with the injuries he sustained. A pilot project was run in 2003, and owing to its success, it was felt the resource should be made more widely available to schools and young people in the region.

The aim was to deliver the ACC Shattered Dreams resource, in conjunction with Te Runanga o Turanganui-a-kiwa, to Northland youth, with the presence of the video subject, Tamati Paul, to enhance the impact. The 'Shattered Dreams' presentation was delivered to a total of 3660 secondary school students throughout Northland. Conclusions and recommendations from the project are summarised below:

"Project development and achievements were acknowledged at the LTSA National Road Safety Innovation Awards in Wellington with the receipt of the Community Promoter award.

Strong links have been made with Tairāwhiti in a region with similar demographics and issues to Northland. Friendships and working relationships have been developed within the arena of personal trust and commitment that was necessary for this project to be successful.

When using people as a "resource" it takes a huge amount of additional personal commitment from those working closely with Tamati that are over and above the day-to-day work requirements. This is clearly indicative of the respect and admiration held for Tamati and his support team.

School links and collaborative work within existing networks were cemented as people went to special effort to ensure protocol was adhered to and Tamati's needs were met.

Tamati's delivery and powerful presence had a huge impact on those receiving the drink / drive message born out by the statements included in this report.

The fact that a video was given to every school / community has extended the length of the "audience" message time and also the times the drink drive message can be given. It has also allowed opportunity for teachers to use a resource in different ways.

SADD activities and groups were either re-motivated or instigated. In some cases the SADD group within the school took control of the organisation.

Working with schools can be challenging at the best of times owing to timeframes and timetables and the huge workload carried by staff members. In this instance schools were asked to provide equipment and the support of an IT person as part of developing the community working model. Check lists were provided for each school along with the offer to provide equipment if required. However in some cases equipment did not work as planned, no one was present to ensure it worked, and this led to frustration for the organising group and the audience. Also the identification of a key person within the school to communicate proved difficult in some larger schools

The community development framework empowers community to control timeframes, number of speakers, powhiri etc and in some instances difficulties noted were “powhiri too long for students” “introduction too long” “too many speakers” “we wanted to hear more from Tamati but students had been sitting for too long” However comments such as these are part of the community “learning curve” It is the responsibility of the organising group to advise only and to provide an appropriate introductory speaker before the video.

Clearly by having the video subject present as part of the video presentation the impact is enhanced. This could be done with a performing arts presentation or with any other developed resource.

The community development model can only be improved with other opportunities for these communities to “take control” In this way any administration/ IT/ communication difficulties can be overcome.

If peer education is paramount then consideration for the advancing age of the person involved must be made – at what age is a person no longer a peer?

A project of this type can allow for “personal healing” to take place and also requires a full understanding of any disabilities on the part of the organising group.

The project also highlights what can be achieved when stakeholders and community work in collaboration to combine injury prevention resources to contribute to the well being of our communities.”

A copy of the complete evaluation is attached (Appendix 12).

WORKPLACE SAFETY - Evaluation Programme

ACC levies are set on an industry basis. This means that employers in the same industry pay the same rate.

This means that if one employer within an industry sector has a very high number of workplace injuries, the costs of those injuries are carried by all of the employers in that industry – even though the other employers may not have had any injuries.

Experience and trending has also shown that the same employers keep having accidents year after year, therefore something needed to change.

The Injury Prevention, Rehabilitation, and Compensation (IPRC) Act 2001 gave ACC the ability to address this situation in a positive manner.

Annually, ACC identifies employers with significantly higher claim frequency and costs compared to similar industry employers. In collaboration with the employer, ACC provides free consulting advice to help establish the causes of the most common serious injuries, and explore options for addressing these causes (including a risk assessment of harm and severity versus cost and practicality). Then an action plan is prepared for implementing the chosen remedies, including a realistic time frame.

Progress and improve in the employer's claim performance is tracked to ensure that there is an improvement.

Since the workplace safety evaluation programme's inception three years ago, ACC has worked with numerous employers in the Whangarei region. In the last year alone (2004/05), we identified and worked with 7 companies in the Whangarei district with a combined payroll of around \$6.4 million, that met the criteria for WSE. A further 7 companies have been identified (with a combined payroll of about \$17.9m) for us to work with in the 2005/06 year.

CRITERION SIX

Ongoing participation in national and international Safe Communities Networks.

The CIPP was one of the first such coalitions established in New Zealand. Two other communities, Waitakere and Waimakariri, have preceded Whangarei in being designated as 'Safe Communities' by the World Health Organisation, and there is a growing interest in many other districts across the country to follow suit.

The CIPP has a strong network across the country's district health boards, and also maintains particular interest in the activities of both Waitakere and Waimakariri. In turn, Whangarei is supporting other districts to develop injury prevention strategies and intends to support other regions seeking WHO accreditation, particularly the Far North District. Within Northland, the CIPP has focused attention on the Whangarei District because of the region's geographic expanse, and it is envisioned that other communities throughout Northland will be involved in CIPP projects as the stakeholder group is widened.

Marion Weaver, Project Co-ordinator for the CIPP, was secretary of the Injury Prevention Network Aotearoa New Zealand (IPNANZ) from 2002 to 2004, which provides Northland with a direct link into other injury prevention activities across the country. Northland has also had regular input into policy development and future planning at a national level through this and other forums.

Marion was also a member of stakeholder reference group for the NZ Injury Prevention Strategy, and was on the training sub committee for IPNANZ. As part of this training programme, the Northland Shattered Dreams programme is being used as an example of best practice, which highlights the high standard of work happening within Northland. Various Northland projects have been written up in publications nationally, including New Zealand Injury Control Bulletin, Plunket Safety Update, and Safe Waitakere Update.

Marion also attended the 7th Australian Injury Prevention - 2nd Pacific Rim Safe Communities in McKay, Queensland, in September 2004, and was the co-author of the New Zealand presentation to the Bergen International Safe Community Conference in June 2005, entitled Safe Communities Foundation New Zealand and New Zealand Safe Communities: Examples from the field.

Members of the CIPP have also presented at national conferences, sharing experiences from programmes they have run. Examples include a presentation at the IPNANZ conference on the Plunket Well Child project, and a presentation of the Bath Toy initiative at a Safekids Conference, which detailed the CIPP's work with the Well Child Plunket Project. An abstract has also been submitted to present to the IPNANZ Conference in November this year.

As mentioned in Criteria Three, the bath toys developed as part of the Well Child Plunket Project have been adopted by a range of organisations including public health units, injury prevention groups, district health boards, water safe programmes, and Plunket and ACC branches throughout the country. So far 12,000 sets have been sold outside Northland since April 2004. In addition, the change mats (supported by ACC to prevent fall injuries) have been adopted by ACC in Southland, and ACC and Plunket are talking nationally about making them readily available in Plunket centres across the country.

The CIPP is committed to ongoing education and support for other communities looking to adopt injury prevention programmes, and to ultimately add to the Safe Communities movement in New Zealand. Internationally, this guidance and leadership will be through the

Safe Communities Foundation of New Zealand, and nationally through support for the New Zealand Injury Prevention Strategy and Ministry of Health Public Health priority areas, specifically by supporting the conduct of regional forums to improve collaboration and cooperation.

APPENDICES

- 1 Memorandum of Understanding signed between the Whangarei District Council and ACC for 2005-2007
- 2 Action Plan as agreed to by Whangarei District Council and ACC for 2005/06, as well as examples of Council Connections – work already underway
- 3 Terms of Reference for Te Tai Tokerau Community Injury Prevention
- 4 Community Injury Prevention – Te Tai Tokerau Annual Report 2004
- 5 Letters of support from community
- 6 Injury Prevention Service Plan 2005/06
- 7 Northland Regional Road Safety Plan 2004-2010
- 8 Northland District Crime Statistics 2004
- 9 Car Restraint Wearing Rates 1997-2004
- 10 Whangarei District Community Profile: Opportunities for Promoting a Safer Culture 2001
- 11 Report on the Evaluation of the Child Safety Update
- 12 Shattered Dreams Evaluation 2004